

Meeting of the Murrumbidgee Local Health District Board

Date: Wednesday, 27 October 2021

Time: 11.00am

Venue: Room, Yindymarra Meeting Room, Wagga Wagga District Office

Minutes

Board Members

Name	Present (P) Virtual (V) Apology (AP) Absent (A)
Dr Thomas Douch (Chair)	P
Mr Jonathan Green	PV
Ms Andrea Jordan	P
Mr Geoff Twomey	P
Mr Adrian Lindner	P
Mr John Ireland	P
Ms Elke Cleverdon	P
Ms Elizabeth Dixon	P
Dr Alam Yoosuff	P

MLHD Executive & Staff

Name	Title	Present (P) Virtual (V) Apology (AP) Absent (A)
Ms Jill Ludford	Chief Executive, Murrumbidgee Local Health District	P
Mr Kevin Lawrence	Director Finance & Performance, Murrumbidgee Local Health District	P
Mr Troy Trgetaric	Acting Director Operations East, Murrumbidgee Local Health District	P
Ms Robyn Manzie	Director Mental Health Drug and Alcohol, Murrumbidgee Local Health District	PV
Ms Jacqui Zutt	Board Secretariat Murrumbidgee Local Health District	P

Invited Guests

Ms Helen Emmerson	Director People and Culture, MLHD	PV
Ms Jackie Brodie	District Manager Aboriginal Health Strategy, Policy and Performance, MLHD	P
Ms Jenny Spain	CAE/CRO Governance, Risk and Audit Manager, MLHD	P
Ms Jill Reyment	Director Clinical Governance, MLHD	P
Dr Lenert Bruce	Executive Director Medical Services, MLHD	P
Ms Cherie Puckett	Director Clinical Operations (West), MLHD	P
Ms Carla Bailey	Director Clinical Operations (East), and Incident Controller COVID - 19 Health Emergency Operations Centre, MLHD	PV
Ms Fiona Renshaw	Director Integrated Care and Allied Health, MLHD	PV
Ms Julianne Clift	Executive Director Nursing and Midwifery, MLHD	PV

Item 1 **Welcome, Apologies and Acknowledgment of Country**

Item 1.1 and Item 1.2 **Welcome**

The meeting was declared open at 11.34am by the Chair, Dr Thomas Douch. Nil apologies were received.

The Chair acknowledged the traditional owners of the land on which members were participating and paid respects to Elders past, present, future and emerging.

Item 1.3 **Conflict of Interest Declarations**

	Members were asked to declare: <ul style="list-style-type: none">i. Conflicts of interest in relation to the agenda<ul style="list-style-type: none">• Director Douch declared that he is paid by Alpenglow to supervise staff.• Director Harding declared his work with Personal Injury Commission. He will
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Item 2 **Confirmation of Previous Minutes**

Item 2.1 **MLHD Board – September 2021**

The minutes of the Board Meeting held on 29 September 2021 were accepted as a true and accurate record of the meeting.

MOVED: Director Cleverdon

SECONDED: Director Twomey

Item 2.2 **MLHD Planning Resource and Performance Committee**

The minutes of the PRP Sub Committee Meeting held on 29 September 2021 were accepted as a true and accurate record of the meeting.

MOVED: Director Dixon

SECONDED: Director Green

Item 2.3 Audit and Risk Committee

September 2021 Minutes not available.

Item 3 Actions from the Previous Minutes**Item 3.1 Action List**

Action List was discussed.
Closures accepted include:

- B21/08-003
- B21/08-005
- B21/08-007
- B21/09
- B21/09-005
- B21/09-007
- B21/09-008
- B21/09-009

The following Board action will be moved to the Health Care Safety & Quality action list:

- B21/09-004

Item 3.2 Clinical Yarning Tool

Ms Jackie Brodie, District Manager Aboriginal Health Strategy, Policy and Performance spoke to a presentation. Clinical Yarning is designed based on research and provides health care professionals a glimpse into Aboriginal and Torres Strait Islanders views of the health care system.

For Aboriginal People Yarning is a conversational process that involves the sharing of stories and the development of knowledge. Learning from a collective group, building respectful relationships, and to preserve and pass on cultural knowledge. It prioritises Aboriginal ways of communicating, in that it is culturally prescribed, cooperative, and respectful. Yarning about yarning as a legitimate verbal communication method for Aboriginal people.

The Board was appreciative of the presentation and welcome the yarning approach. The Board is keen to monitor progress. This way of communication can also be considered in a wider context.

ACTION: Provide Board with update on implementation across MLHD.

Item 3.3 NSW Audit Office: Engagement Closing Report

Mr Kevin Lawrence, Director Finance and Performance spoke to report.

The Board noted the final report, accepting that technical accounting issues were raised. The Board appreciate the co-operative relationship with all parties involved and compliments the finance team on their work.

Item 4 New Business**Item 4.1 Service Agreement and Foundations For Success – Data Analytics****Item 4.1.1**

Mr Troy Trgetaric, Acting Director Clinical Operations (East) spoke to the report. Key highlights include:

- Operational Commissioning has occurred for the Temporary Paediatric Building at Griffith. Occupancy of the Non Clinical Services Building at Griffith is planned for the 1 November 2021.

- Hay Hospital, MPS enhancement is now completed with the aged care residents able to occupy the new area of the building. The staff have identified strategies to use all common areas in the building, new and old.
- Wagga Wagga staff car park Milestone 1 was handed over on 25 September 2021, comprising 81 staff car parks on the Yathong Street on-grade parking. Work on the Wagga Wagga on-grade Docker street car park has commenced with demolition of buildings. The Multi-Storey Car Park works have commenced with hoarding the site.

The Board noted the report.

Item 4.1.2	State Performance Report Noted.
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Item 4.1.3	<p>Towards Zero Suicides update</p> <p>Ms Robyn Manzie, Director Mental Health Drug and Alcohol spoke to the report. The alternatives to Emergency Departments (Safe Havens) have now opened in Wagga Wagga and Griffith. The Safe Haven service is a warm welcoming space for people experiencing a suicidal crisis where compassionate care will be provided by peer workers with a lived experience of suicidality in a non-clinical environment in collaborative partnership with mental health clinicians.</p> <p>The Suicide Prevention Outreach Team (SPOT) service commenced on 30 July, 2021. The teams provide a rapid crisis response to people experiencing suicidal distress. The response is led by a clinician and peer-worker and include targeted follow up support to people.</p> <p>SPOT services provide virtual support via outreach to support people who have and have not had previous contact with the mental health system and who may be in suicidal crisis and reluctant to present to an emergency department.</p> <p>The Board embraces the development of the Safe Haven and SPOT services and supports the focus on strengthening engagement with youth on the issue of suicide.</p>
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ACTION: Board Chair to write to LHACs regarding suicide prevention matters.

Item 4.2	Workforce At Its Best
Item 4.2.1	Workforce and staff vaccinations update Ms Helen Emmerson, Director People and Culture spoke to the updates.

The Board notes the workforce update provided.
The Board encourages the further development of mid-level staff to grow leadership and management skills.

Item 4.2.2	Work Health Safety Quality Report Noted.
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Item 4.3	Sustainable and Well Managed Resources
Item 4.3.1	Finance Update – September 2021

The Director Finance and Performance spoke to the report.
The Board notes the financial report and roadmaps for September 2021 and supports further discussions regarding finance with NSW Health.

Item 4.3.2	Accounts for Write Off – August 2021 Accounts for Write Off – September 2021 approved.
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MOVED: Director Lindner SECONDED: Director Ireland

Item 4.3.3	Restricted Assets Balances (SP&T)
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Noted.

Noted.

Noted, refer Item 4.3.1.

Item 4.4	Exceptional Rural Healthcare
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Item 4.4.1	Community Engagement
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The Chief Executive advised the 2021 October LHAC Forum was held via webinar on 1 October. The forum provided a COVID update followed up strategic priority update from respective Board Chairs. Questions on notice were addressed. LHAC Project Funding Applications were outlined, and new applications approved.

MOVED: Director Jordan SECONDED: Director Cleverdon

Item 4.4.2	Strategic Plan Quarterly Update
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Snapshot of performance indicators and strategy implementation progress in accordance with the 4 Directions were noted.

Item 4.5	Providing Safe Consistent Person Led Healthcare
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Item 4.5.1	Chief Executive Report
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The Chief Executive spoke to the report.

The Board notes the large volume of media contact required relating specifically to COVID-19 response.

Item 4.6	Sustainable and Well Managed Resources
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Item 4.6.1	Privacy Annual Report
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The Board approves the 2020-21 Privacy Management Annual Report.

MOVED: Director Cleverdon SECONDED: Director Dixon

Item 4.6.2	GIPA Annual Report
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The Board approves the 2020-21 Government Information Public Access (GIPA) Annual Report.

MOVED: Director Harding SECONDED: Director Lindner

Item 5	Critical Issues
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Item 5.1	Locally Led Reform
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Item 5.1.1	
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Item 6	Raising on Non Agenda Items Through the Chair
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Nil.

Item 7	In camera session – Board members only
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Closed session, not for publication.

Item 8	Next Meeting
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The next meeting will be held on 24 November 2021

	Meeting Close
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The meeting closed at 3.01pm.

CERTIFICATION | DECLARATION – BOARD CHAIR

Name: Dr Thomas Douch

Signature:

Date: [Insert Date].