

NORTHERN SYDNEY CENTRAL COAST HEALTH
AREA HEALTH ADVISORY COUNCIL

MINUTES

THURSDAY, 24 APRIL 2008 AT 9.00AM-11.00AM

VENUE: WILSON INGRAM CONFERENCE ROOM, ROYAL NORTH SHORE HOSPITAL

1. Present

Professor C Pollock (Chair)
Ms Georgia Sidiropoulos
Dr Greg Fulcher
Ms Selina Chaine
Mr Paolo Totaro
Ms Pauline O'Connor

In Attendance:

Ms Julie Hartley-Jones (A / Chief Executive)
Ms Tracey Adamson (Director Population Health, Planning & Performance)
Ms C Treharne
Mr Peter Whitecross
Ms Evonne Giovannetti

Apologies:

Mr Matthew Daly (Chief Executive)
Mr Darren Bowd
Dr Stephen Nolan
Ms Di Spragg
Professor M McMillan
Dr Magda Campbell
Mr Paul Tonkin

Mr Whitecross was welcomed to the meeting. Mr Whitecross has been appointed as the Manager, Community Participation Unit (CPU). He will officially start in this role on 5 May. An Administration Officer has also been appointed to the CPU team, Debbie Harrison.

2. Confirmation of Minutes

It was resolved that the minutes of the NSCCAHS Area Health Advisory council meeting held on 28 March 2008 was confirmed as a true and accurate record of proceedings.

3. Review of action items from previous meeting (where not on agenda)

It was noted that an action item relating to multicultural health in the minutes, was not recorded in the action item list.

4. Business Arising

a. HCAC Report

Professor Pollock provided an update on the last meeting of the HCAC. At the meeting the Director General of NSW Health advised that there is currently a review of the role, membership and communication links of the HCAC. Implementation of recommendations has been deferred until the Special Commission Enquiry reports.

A presentation to HCAC regarding the Single Point of Access Program was considered very beneficial.

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The “Red Tape” issue was discussed by HCAC and considered an issue for Area Health Services. This includes delays in recruitment, administrative load on Clinical Managers and access to relevant decision makers. Strategies for rectification for these issues were discussed. The recommendation from HCAC to Mr Daly, CE NSCCH will be for an Area Committee to be established to address and implement these strategies.

b. Response by M Daly to Gosford and Hornsby Ku-Ring-Gai (HKH) Clinical and Community Participation Committee (CPC) Meetings.

The letters were circulated for comment by the group before being sent to Mr Daly. It was suggested at the last meeting that the points discussed be allocated under each of the seven strategic directions, however this was not carried out as there was no easy way to align them.

Recommendation 4 in the HKH letter regarding cost saving mechanisms was discussed. This recommendation was reworded as it suggested that cost saving mechanisms first be discussed by AHAC with Clinician involvement at a later stage. AHAC will be involved in strategic thinking in regard to cost savings strategies. The Area is currently in the process of developing a three year financial plan. It is appropriate for AHAC to have a presentation on the plan.

The Community Participation Unit will distribute both letters to invitees to the meetings.

Action Items *	Person responsible:	Report back due	Future meeting
Hornsby letter from Mr Daly to be reworded to better reflect intent.	T Adamson		
Wendy Hughes invited to present on three year financial plan.	W. Hughes		June 08

c. Letters to Staff Regarding Communication Processes

A letter has been drafted by Ms Hartley-Jones with input from Ms Adamson and Ms Jenny Dennis the Director Corporate Communications. It was suggested that the letter come from Divisional Clinical Directors rather than the Chair of the Medical Staff Council. Some changes to the letter were discussed.

Action Items *	Person responsible:	Report back due	Future meeting
It was agreed that the letter would be emailed to the group for direct input.	J. Hartley-Jones	Next Meeting	

5. Key Business

a. AHAC Workplan

Ms Adamson and Professor Pollock examined the priority areas in the workplan against the State Health Plan and against the Area plan. The mandated KPIs were removed from the plan as it was not considered appropriate to allocate KPIs against AHAC, as AHAC is an advisory committee.

Members were asked to examine the revised document and provide any comments.

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Area staff will need to be notified that a process is underway and that AHAC members may be in contact with them to discuss certain issues. This could be communicated via the CE newsletter.

Action Items *	Person responsible:	Report back due	Future meeting
The workplan is to be sent electronically to all members.	C. Pollock	ASAP	
The revised workplan to be reviewed.	All		
Information to be put into the next CE newsletter to advise that AHAC may be in contact with Area staff.	T. Adamson	Next Meeting	

b. Clinical Services Plan – Presentation of Key Recommendations

This presentation was given by Ms Adamson and Mr David Miles. Printed copies were distributed at the meeting to all members.

A paper summarising the main points of the feedback from the Community Participation Committees was also tabled and distributed to all members. This document was discussed. Concern was raised that the consultation did not involve patients or direct users of the relevant services. This input has not yet been gathered due to the short timeframe of the process. Further consultation will be carried out during the implementation phase.

At the next AHAC meeting the Clinical Services Planning process will be discussed for the first 1 ½ hours of the meeting. Usual AHAC business will predominantly be carried out from 10.30am or deferred until the following meeting.

6. Standing Items

a. Chief Executive Report

Not discussed. Report in papers distributed.

b. RNSH Inquiry Progress Against Recommendations

Not discussed. Report in papers distributed.

c. Special Commission of Inquiry – Update

Not discussed. Report in papers distributed.

d. Finance and Performance Report

Not discussed. Report in papers distributed.

e. Nursing Council – Update

Not discussed. Minutes in papers distributed.

f. Clinical Council

Minutes were distributed with the papers.

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- g. Allied Health Council**
Minutes were distributed with the papers.

- h. Community Participation Committee**
Discussed within Clinical Services Plan feedback.

- i. GMCT Communication - Update**
Not discussed. Newsletter with the papers.

7. Documents for your information
Other documents were included with the papers.

8. Next Meeting – 29 May 2008 at Mona Vale Hospital

New Business

Note: Timing for the Mona Vale meeting will be;

- 8.00am – 9.00am staff meeting with AHAC
- 9.00am – 10.30am is set aside to discuss the Clinical Services Plan in depth.
- Usual AHAC business will be discussed from 10.30am or deferred until the following meeting in June.

A General Manager has been appointed for North Shore Ryde Health Service. Sue Shilbury will start on 14 May 2008.

On behalf of the Central Coast CPC, Ms Sidiropoulos approached AHAC asking for their endorsement of a proposal that carries strong community support for better access and the fast tracking of Public Radiotherapy on the Central Coast. Ms Adamson agreed to provide the Chair of AHAC with relevant Ministerial comments regarding public radiotherapy, which will inform AHAC. AHAC have agreed on the high level of importance for the community and will prepare a reply letter to the Central Coast CPC.

Action Items *	Person responsible:	Report back due	Future meeting
AHAC to respond to Central Coast CPC endorsing their approach.	C. Pollock		May 08

*** As there was not a quorum present at the meeting, these action items will require endorsement at the next meeting.**