Government of South Australia | Health
Barossa Hills Fleurieu Local Health Network

BAROSSA HILLS FLEURIEU LOCAL HEALTH NETWORK

MINUTES

GOVERNING BOARD MEETING NUMBER 53

Thursday 5 September 2024

Jan Murray Day Centre, Gumeracha DSM Hospital, 2 Albert Street, Gumeracha

Members	Name	Item
Chair	Jim Hazel	All
Member	Helena Williams	All
Member	Rosey Batt	All
Member	Pru Blackwell	All
Member	Greg Russell	All
Member	Irene Watson	All
Member	Alex Zimmermann	All

Executive	Name	Item
Chief Executive Officer	Bronwyn Masters	All
Chief Information Officer	Abdel Bassal	All
Director Corporate Services	Daniel Panic	All
Acting Director People and Culture	Peta-Maree France	All
Interim Director Strategy and Governance	Lauren Boase	All
Executive Director Community & Allied Health	Brett Webster	All
Executive Director Nursing & Midwifery Services	Amy Lee	All
Interim Executive Director Operations	Kylie Williams	All

Visitors	Name	Item
Senior Project Officer, Clinical Services	Erin Lord	Item 1.9
Rural Support Service –Executive Director	Debbie Martin	Item 5.3

Apologies	Name
Member	Helen Tedesco
Executive Director Medical Services	Sharon Morton
Co-Director Aboriginal Health	Peter Taylor
Co-Director Aboriginal Health	Rebecca Kimlin
Clinical Director, Mental Health	Brian McKenny
Executive Director Finance Services	Rose Dickinson

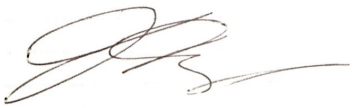
All resolutions recorded in these minutes were carried unanimously unless stated otherwise.

1	OPENING	Minutes
1.1	**In Camera Board Discussion**	
1.2	**Acknowledgement of Country**	P Blackwell made an Acknowledgement to Country.
1.3	**Welcome and Apologies**	Noted.
1.4	**Interests and Conflicts Disclosure Log**	The Board noted the Interests and Conflicts Disclosure Log. Remove windmill production
1.5	**Confirmation of Previous Minutes**	The Board resolved that the August minutes be endorsed.
1.6	**Actions Arising from Previous Meeting (Action List)**	Noted.
1.7	**Board Calendar**	Noted.
1.8	**Risk Appetite Statement**	Noted.
1.9	**Consumer Story**	Erin Lord shared two consumer stories about the Gumeracha Nurse Led Clinics. • Misplaced consumer, history of IV drug use who needed community nursing for daily wound dressings. To assist with creating routine and accountability made daily appointments for the consumer to attend the clinic for treatment. Over the six weeks the consumer has remained drug free, has sought employment and is seeing a positive outcome because of having the routine, purpose and safe welcoming place to go. • Six-year-old unplanned presentation, at the time the clinic wasn't seeing patients under the age of ten, but given our duty of care ensured he was seen rather than sending them to another facility. Patient had sustained a head injury at school, following nurse assessment the clinic contacted the Women's and Childrens Health Network virtual care service, provided a consult and ensure the patient wasn't at risk of a concussion before discharging home. • This example was used to showcase how the clinic could safely and effectively be expanded to include children aged five to nine.
2	**TIER 1 COMMITTEES**	**Minutes**
2.1	**Audit and Risk**	• G Russell presented the report for the august Audit and Risk committee meeting highlighting: • Risk reviews undertaken including - budget cost management risk recommendation to extreme and the celebration of the CHIRON risk retirement. • Ventia attended the meeting to discuss the transition which enabled ARC to clarify any concerns held. • Review of the internal audit charter plan and queried it adequacy for the size of our network and suggested the use of external auditors for areas of concern if needed. • A presentation on challenging behaviour and the increasing concerns about protection for our people.

		• Challenging behaviour presentation – concerns about protection of our people. • The addition of Cyber Security as a regular agenda item to ensure ARC are updated on the issues and actions undertaken, and to enable escalation when appropriate. • Requested an update on BHFLHN compliance to all Treasurer Instructions at the November 2024 meeting. •
2.2	**Clinical Governance**	*No Meeting*
2.3	**Consumer and Community Engagement**	P Blackwell presented the report for the August Consumer and Community Engagement meeting highlighting: • A consumer story highlighting the difficulties faced access care in emergency rooms when racism is present. • Reappointment of K Hourigan to the committee as a consumer representative • Beginnings of the steps to update the Consumer Engagement Strategy including governance and a focus on engagement models, including a workshop on what success will look like in the new strategy. • Discussions on consumer feedback including what systems are in place and how feedback is managed. • Health Advisory Councils and having developed tools to help them succeed in community engagement they aren't successfully implementing them.
2.4	**Rural Support Service Governance**	P Blackwell (as acting chair) presented the report for the Rural Support Service (RSS) Governance Committee, meeting highlighting discussions about • Transfer of immediate care to activity-based funding • Growing concern around compliance.
3	**FOR DECISION**	**Minutes**
3.1	**Safety and Quality Account (Service Agreement)**	The Board received the report from A Lee and endorsed Safety and Quality Account with the stipulation that it must also be presented at the 18 September 2024 Clinical Governance Committee for endorsement. The Board noted further discussion about: RSS hasn't been included in this statement, moving forward working how best to do it • RSS is not included on the BHFLHN statement, but investigation will occur on how to successfully include them in future accounts. • The steps for the account and associated attestation, with a query on what actions are taken or feedback received. • Request to provide a list to Audit and Risk Committee of forward audits and the accreditation processes required.
3.2	**Network Research Strategy (Service Agreement)**	The Board received the report from L Boase and endorsed the Network Research Strategy 2023-2024. The Board noted further discussion about: • The lack of independent research and date sovereignty for BHFLHN, along with the lack of a research framework with only small projects being undertaken. • Cost considerations for research and ensuring that this is included in the Research Strategy due in 2025.
3.3	**Prudential Compliance Liquidity Management Strategy**	The Board received the report from R Dickinson and the Board endorsed the Prudential Compliance Liquidity Management Strategy.

3.4 Strategic Risks (January – June 2024)	The Board received the report from Al Lee and endorsed the Strategic Risks (January – June 2024). The board noted further discussion about: • The need for an overview of the operational part of the BHFLHN strategic risks. • Specific risks including the update of the surgical risk to operational and the extreme rating for the budget and cost management risk. • Ensure clear records and commentary is including in changes to a risk or mitigation against a risk going forward.
4 STRATEGIC DISCUSSION	**Minutes**
4.1 Risk Workshop 2024	The Board discussed the requirement for a risk workshop which will be facilitated by G Russell and A Zimmermann. L Boase to coordinate a date for all board members and all executive to attend with preference before the end of 2024.
4.2 Southern Fleurieu Childcare Centre	The Board received the paper from D Panic on Southern Fleurieu Childcare Centre, with further discussion about: • Expiry of the lease in 2030. • The considerations that the lease is in opposition to the Health Advisory Council constitution that building asset must be used for health reasons. • Concerns raised by the childcare center and the discussions to occur in conjunction with Department for Health and Wellbeing.
4.3 BHFLHN Culture – Deep Dive	The Board received the presentation from P-M France BHFLHN Culture which included further discussion about: • The across government People Matters Survey which saw a high response rate and assisted in indicating key public sector priorities. • Results were aligned to Flourish results with our focus areas of action remaining engagement, wellbeing and middle management investment, with the action plan to be provided to the board for update regularly going forward.
4.4 Workforce Plan	The Board received the presentation from P-M France on the BHFLHN Workforce Plan with further discussion about: • A key metric being considered is temporary vs permanent staff and the loss of staff on temporary staff in nursing, general services and allied health. • How to create a reputation of being the workplace of choice • What the evaluation and target review for the plan should consider, along with the delayed release of the DHW Workforce Plan.
5 FOR NOTING	**Minutes**
5.1 CEO Report	The Board received the CEO report from B Masters and noted further discussion about: • Capital projects including the Greater Northern Plan governance and opportunities for BHFLHN. • Southern Fleurieu Health Services helipad

	• Following #BlakOut and the growing membership to the Allyship Community of Practice how to ensure the Board successfully embed first nations governance in our work. • Single Employer Model with RSS concentrating on the Section19 exemptions and contracts. • Recent conversations with SA Voice to Parliament representative and navigating a way of working together • Working with Attorney General Department on the Medical enterprise agreement negotiations with considerations on rural allowances. • Upcoming SAMET junior doctor accreditations are a low risk but pose no concerns for the network. • Recent coronial enquiries and the recording of recommendations.
5.2 Finance Report	The Board received the finance report from R Dickinson and noted further discussion about: • Presentation to Department of Treasury and Finance which included a recap of financial year 23/24 results and showcased the reform activities occurring and problems to solve.
5.3 Rural Support Service	The Board received the RSS report from D Martin and noted further discussion about: • D Martin upcoming leave with B Webster to provide backfill • Single Employer Model documentation progressing working closely with Crown. • Emerging Risks in patient assisted transport schedule over expenditure and conversations with DHW on opportunities for improvements. • Misalignment of LHN expectations of what the RSS are doing and what RSS are driving is an ongoing discussion seeking ways of resolution.
5.4 New Mount Barker Hospital – Project Update	
5.5 Performance – Quarter Four 2023/2024	The Board received the performance report from L Boase.
5.6 Reporting on Service Level Agreement	The Board received the reporting on service level agreement report from L Boase.
5.7 Correspondence	The Board noted the correspondence received, addressed to the Board Chair in the past four weeks and sent for the Board Chair.
5.8 Media	The Board noted the media that has occurred in the past four weeks relevant to BHFHN.
6 OTHER BUSINESS	**Minutes**
Nil	
MEETING CLOSE	
Next Meeting	Thursday 3 October 2024, Eudunda



Jim Hazel
Chair - Barossa Hills Fleurieu Local Health Network Governing Board
3 October 2024