

LIMESTONE COAST LHN GOVERNING BOARD MEETING MINUTES

Meeting Date: 20 January 2020 11.30am - 3.30pm

Location: Conference Room 2, Mount Gambier & Districts Health Service

Acknowledgement of Limestone Coast Local Health Network acknowledges Traditional Custodians of

Country Country throughout the region and recognises the continuing connection to lands,

waters and communities. We pay our respects to Aboriginal and Torres Strait Islander

cultures; and Elders past and present.

Board Members: Chair: Grant King (GK) Glenn Brown (GB) Lindy Cook (LC) John Irving (JI) Dr Anne Johnson (AJ)

Dr Andrew Saies (AS) Kerri Reilly (KR)

Members: Ngaire Buchanan (NB) Kristen Capewell (KC) Dr Elaine Pretorius (EP) Paul Bullen (PB) Hannah Morrison (HM)

Attendees: Pam Schubert (PS), Executive Officer & Director of Nursing, Mount Gambier & District Health Service

Kim Hosking (KH), CEO, Country SA Primary Health Network

Elizabeth Fallas (EF), Palliative Care Team, Country Health Connect

Rebecca Whittaker (RW), Palliative Care Team, Country Health Connect Melissa Norman (MN), Palliative Care Team, Country Health Connect

Secretariat: Angela Miller (AM), Director of Governance & Planning, Limestone Coast Local Health Network

Apologies: Lindy Cook

1.	MEETING OPENING	
Item		Discussion
1.1	Acknowledgement of Country	KR provided the Acknowledgement of Country.
1.2	Apologies	Lindy Cook

1.3	Introduction	An introduction of the meeting of the Limestone Coast LHN Governing Board was provided by Grant King.
1.4	Director Conflict of Interest Disclosures	Nil
1.5	Confirmation of previous meeting minutes and actions	Minutes of the meeting held on 25 November 2019 were accepted as a true and accurate reflection of the meeting and an update on outstanding actions was provided.
2.	BOARD CHAIR REPORT	
2.1	Report from Grant King, Governing Board Chair	GK provided an update on discussions with the Keith District Hospital Board following the meeting of the two Governing Boards on 9 December 2019.
		GK referenced a meeting with Superintendent Phil Hoff and the responsibility of forensic testing highlighting the importance of agencies working together, the role of police in health and the importance of being part of the solution.
		Confirmation of insurance in relation to Board Member liability regarding the Independent Commissioner Against Corruption (ICAC) was also highlighted.
		GK further noted a meeting with Troy Bell, MP, and a discussion held in relation to workforce and the work in progress for regional recruitment in health, police and the role the media play in publicity.
3.	LIMESTONE COAST LHN REPORTS	
3.1	CEO Report a) General update	The Limestone Coast LHN CEO report was noted and NB provided an update on the LHN since the last meeting of the Governing Board on 25 November 2019. This update included the schedule of a regular meeting with Superintendent Phil Hoff and a meeting in relation to education, police and media with Troy Bell, MP.
		Confirmation of the availability of service planning data in relation to Keith and Bordertown was provided to support further discussions in relation to the service

proposition for the Keith catchment area.

NB provided an update on the Accreditation by the Australian Council on Healthcare Standards (ACHS), the recommendations provided as a result of the survey held from 2 – 6 December 2019 and how the review and implementation of the recommendations will assist in formalising further governance structures including that of the Mount Gambier Private Hospital.

An update on recruitment within the LHN was provided including welcoming the new Executive Director of Medical Services, Dr Elain Pretorius, to the region and as a standing invitation to the meetings of the Governing Board. An update was also provided on the commencement of the Senior Communication Adviser on 4 February 2020.

Confirmation was provided that funding for the extension of the carpark in Mount Gambier has been secured and planning is underway.

A query was raised in relation to the recruitment of an oncologist with confirmation that cover is in place and significant interest has been received.

Acknowledgement of the work done by Jennie Jacobs, Executive Officer/Director of Nursing, Bordertown was provided in relation to the outcome of the accreditation visit in Bordertown, the support provided to Kingston and the need to develop a strategy for aged care that will be supported by the Aged Person Strategy.

Reflection on emergency preparedness and the prompt response required in relation to the impact of the fires was made by AS noting that it may take months to prioritise and allocate funds with action and proactive engagement in communities required now.

b) Performance Reporting Summary November 2019 The Performance Reporting Summary was noted as being based on the existing reporting format for November and December 2019 confirming that new reporting will be able to be conveyed in parallel with the existing format for the first time in January to ensure meaningful reporting. It was noted that the LHN is

ahead of target YTD with a slight variance based on end of year predictions not including savings strategies implemented across the LHN.

Issues were noted in relation to activity regarding Chemotherapy where the activity is higher than what is funded and the impact of Sunrise (Electronic Management Record – EMR) in relation to coding at admission and the similar concern raised during EMR implementation at the Royal Adelaide Hospital (RAH). Actions to rectify the recording of activity include the adjustment of codes, further training and reconciliation of data.

JI provided an update on the meeting of the Finance & Performance Committee meeting prior to the meeting of the Governing Board and the attention being given to performance and the detailed review to ensure greater understanding of the activity and be better placed to respond, make necessary changes, understand options and make recommendations.

c) Key Performance Indicator (KPI) Summary November 2019 KC highlighted the changes in the format of the Key Performance Indicator (KPI) reporting and the clear links to the Service Agreement to ensure achievement of these areas in line with the Health Performance Framework.

LCLHN have put in a submission for funding for a GP Liaison role. EP highlighted the opportunity for a GP Liaison to work with specific areas/departments within the LHN to further assist with discharge planning. Further discussion was held relating to deteriorating patients noting this was not just physiological healthcare associated frailty and cognitive decline.

The challenges in the Emergency Department were noted.

ACTION:

A review of the 'Average Cost per NWAU' to be undertaken for Penola

ACTION:

Key Performance Indicator (KPI) reporting format to be reviewed to ensure clarity on performance priorities and where attention needs to be paid.

4.	ENGAGEMENT STRATEGIES	
4.1	Engagement Strategy & Governance Update	AJ provided an update on the development of the engagement strategies and the work of the sub-groups for the Clinician & Staff and the Consumer, Community & Carer Engagement Strategies for the LHN highlighting executive consultation was currently underway. Further noted was the statewide planning being undertaken by SA Health and the 'mapping' exercise of this planning to ensure the incorporation of Aboriginal Health.
		The commencement of the Senior Communications Adviser in February 2020 was highlighted as an opportunity to strengthen communication, cultivate innovation and ideas and ensure the voices of staff and community are incorporated in decision-making through the co-design process. It was noted the first iteration of the strategy will ensure all legislative requirements are met with the next version adding local flavour, energy and a further review of terminology.
		An opportunity to strengthen and foster relationships with GP practices and enhance discharge planning processes was highlighted following a visit by GK and GB to the Hawkins Medical Clinic in December 2019.
		A discussion was held regarding the oversight committee for the LHN engagement strategies, the development of a Terms of Reference (TOR) and how this can be linked to the local Management Operating System (MOS) for manage and monitoring.
5.	TOPIC OF THE MONTH	
5.1	Country SA Primary Health Network	Kim Hosking, CEO of the Country SA Primary Health Network (CSAPHN), provided a general overview of the work of the CSAPHN to the Governing Board noting the transition to Local Health Networks (LHNs) from 1 July 2019.
		Confirmation was provided to the Governing Board that the CSAPHN is Commonwealth funded and provides funded services into rural SA. The coordination and integration of services have been adapted to the LHNs and the Rural Support Service (RSS) and will be restructured over the coming months.

Four (4) years old, the former CSAPHN was known as 'Medicare Local' and has seen funding grow from \$20million in its first year to \$55million noting more than half of the funding supports Primary Mental Health. Mount Gambier was noted as having the second highest number of private providers of Mental Health support (the highest being Victor Harbour). It was noted that the LHNs receive \$18million from the Commonwealth for Primary Mental Health which presented an opportunity to better integrate activities.

Outside of Mental Health, the other 50% is used for grants for the Integrated Cardiovascular Clinical Network (ICCNet), the Coordinated Approach to Child Health (CATCH) program, Point of Care testing and wound management noting timely submissions for funding are required to be presented to the Commonwealth in February of each year to ensure approval by April/May.

The history of the tender process was provided confirming the Commonwealth Government has tasked the CSAPHN with managing the grants and opportunistic funding process and the LHNs can initiate submissions/proposals via 'Tenderlink'.

A discussion was held relating to the Community Paramedic Program (CPP) and the funding of 1.4 FTE (equating to \$425k annually) with an evaluation of this program taking place in 2020. LCLHN confirmed funding for this program for a 12 month period with further funding dependent on the outcome of the evaluation.

The opportunity for Nurse Practitioner roles within the LHN and the availability of funding for the next 2 financial years to assist with resourcing through the PHN was discussed. A model used in Pinnaroo where the Nurse Practitioners work with Mental Health and Allied Health to ensure sustainable services was referenced following their concerns with maintaining General Practitioners in the area.

KH confirmed support in relation to Aboriginal Health by way of integrated team care funded by PHN and have a health navigator/care coordinator role noting alcohol and drug programs were also funded. Direct work with Pangula Mannamurna was highlighted noting the changes in CEO and leadership and the potential impact on funding submissions during this time.

KH referenced the opportunity to provide support to access platforms for

		Human Resources (HR) and Information Technology (IT) to deliver back office savings in order to provide frontline services confirming funding was based on an 80:20 rule of 80% frontline and 20% administration. Confirmation was provided that the CSAPHN do commission service providers for GP education, this is sourced through GPEx Limited, the South Australian Postgraduate Medical Association (SAPMEA) for niche requirements and 'Drs Health' as well as the provision of GPs where required. KH advised that he would attend future meetings in person where possible and is looking forward to working together to initiate support to meet the needs of the community. He further advised that the CSAPHN provides needs analysis support and has access to a comprehensive range of data should this assist the LHN.
7.	PRESENTATION	
7.1	LCLHN Specialist Palliative Care Services & the 'Donna Project'	GK provided an introduction to the LCLHN Palliative Care Team. It was noted the presentation relating to Specialist Palliative Care Services and the 'Donna Project' was driven by an accreditation recommendation in December 2019. A PowerPoint presentation was provided to the Governing Board along with a presentation of a 'Nurture Pack' noted as 'phase 2' of the project. KR highlighted the high instance of kidney failure and late diagnoses of cancer for Aboriginal & Torres Strait Islander communities and further highlighted the issues related to dying at home stating that ideas culturally would be different in communities. It was confirmed that work was being done in consultation with Pangula Mannamurna, an Aboriginal Community Health Service, targeting renal care for aboriginal people noting that Aboriginal guidelines for providing culturally appropriate, safe care was to be revised and redeveloped. A question was raised in relation to the ability of the Palliative Care Team to service the whole of the Limestone Coast and the opportunity to deliver a range of consultations via video conference and telehealth to meet this need was confirmed. The ability to influence end of life care in residential aged care was also noted as was the complexity of cancer care now due to increased life

		span, complexity of symptoms and availability of drug trials.
		ACTION:
		A copy of the PowerPoint presentation to be provided to the Governing Board.
8.	STRATEGIC PLANNING	
8.1	Strategic Planning Update	GK provided an update on Strategic Planning for the LCLHN.
		NB highlighted the Rural Medical Workforce Strategy implementation planning workshop being held on 6 February 2020 in Mount Gambier and attended by the Executive and Regional Leadership team confirming the priorities as provided by the Governing Board had been provided to support the next stages of this planning.
		NB provided an update of Service Planning for the LHN including the commencement of planning for Mount Gambier and the initial discussions regarding the Terms of Reference and membership being held on 23 January 2020.
		A discussion was held relating to workforce planning across the LHN for the short, medium and long term and the issues and solutions related to each stage of the planning. Areas highlighted included nursing, ancillary, allied health and specialists, mental health anaesthetics and midwifery. EP advised a discussion paper was in progress relating to workforce planning.
		A midwifery model of care and affiliation with Charles Sturt University and the opportunity to look at a different model was also discussed. The opportunity to recruit direct entry mid wives and support Registered Nurse (RN) certification was raised.
		Workforce recruitment relating to Mental Health and the opportunity to attend Workforce Expo's in the UK was highlighted.
		ACTION:
		GK to meet with Lisa Cockington, Manager Strategy & Innovation, Rural Support Service to progress planning.
		ACTION:

		A summary of the priorities relating to the Rural Health Workforce Strategy to be provided to the Board.	
9.	OTHER BUSINESS		
9.1	Board Governance/Private Hospitals	GK highlighted the work of the Keith District Hospital Board (KDHB) and how well the Board members are working together noting they were meeting on 14 January 2020 to review the updated business plan proposal and a meeting of the LCLHN and KDHB would be scheduled following this review.	
		A discussion was held relating to the governance of the Mount Gambier Private Hospital, the opportunity to engage additional specialists and the progress of discussions to date. The second meeting of the working group is to be scheduled following the receipt of the draft Service Agreement in February 2020.	
		A 'GP Meet & Greet' was confirmed as being scheduled for Wednesday 12 February 2020.	
		ACTION:	
		GK to meet with AsiaAustralis to provide further review based on updated model.	
		ACTION:	
		The second meeting of the LCLHN & MGPH Working Group to be scheduled following receipt of the draft Service Agreement.	
9.2	Any other business	Correspondence from the Country LHN Governing Board Chairs to the Minister in relation to the Independent Commissioner Against Corruption (ICAC) was discussed and confirmation of the Minister's support was noted.	
10.	MATTERS FOR APPROVAL		
10.1	Governing Board Charter Volume 2	The Governing Board Charter Volume 2 was discussed, terminology to be amended before final review.	
		ACTION:	
		Terminology within the memberships of the Governing Board committees to be	

		reviewed, 'consists of' to be replaced with 'includes'
10.2	Service Agreement 2019-20	DECISION:
	a) CE Correspondence	The revised Service Agreement 2019-20 was approved by the Governing Board.
	b) Revised Service Agreement 2019- 20	
11.	MATTERS FOR NOTING	
11.1	LCLHN Invoice Payments November 2019	The LCLHN Invoice Payments for November 2019 were noted.
11.2	LCLHN Late Payments of Interest (LPI) November 2019	The LCLHN Late Payments of Interest (LPI) for November 2019 were noted.
11.3	LCLHN Invoice Payments December 2019	The LCLHN Invoice Payments for December 2019 were noted.
11.4	LCLHN Late Payments of Interest (LPI) December 2019	The LCLHN Late Payments of Interest (LPI) for December 2019 were noted.
11.5	LCLHN & Keith Board Minutes – 9 Dec 2019	The LCLHN & Keith Board minutes of the meeting held on 9 December 2019 were noted.
11.6	LCLHN & MGPH Board Minutes – 11 December 2019	The LCLHN & MGPH Board minutes of the meeting held on 11 December 2019 were noted.
11.7	Finance & Performance Committee Agenda – 20 January 2020	The Finance & Performance Committee agenda for the meeting on 20 January 2020 was noted.
11.8	Finance & Performance Committee Minutes – 25 November 2019	The Finance & Performance Committee minutes for the meeting held on 25 November 2019 were noted.
11.9	Clinical Governance Committee	The Clinical Governance Committee minutes of the meeting held on 25

nda for the meeting on 20	
) agenda & minutes of the	
formance Council was discussed diversity of Aboriginal people g Board, Executive and staff.	
of the Department for Health & funding Model was discussed discountry LHNs.	
missioning to be confirmed with	
A discussion was held regarding the consultation paper relating to Building Self-Sufficiency of Regional LHNs including the impact this will have, resource transfers and a favourable \$144k that will be transferred back to the Limestone Coast as a result of recharging to-date noting under expenditure within the Rural Support Service (RSS) would not be charged and would be processed as a credit to the LHNs.	
2019 was noted.	
October 2019 was noted.	
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12.	SUMMARY AND CLOSE	
12.1	Next Meeting & location	Monday 24 February 2020, Bordertown
12.2	Meeting Close	3:34 PM

Ac	tion List: Meeting 29 July 2019		
No.	Action	Responsibility	Due:
5.1.2	A communication to staff and public to be drafted noting the positive impact on consumers regarding the bandwidth upgrade at Penola, Millicent & Mount Gambier (and across the LHN in September 2019)	NB	On Hold
Ac	tion List: Meeting 2 September 2019		'
No.	Action	Responsibility	Due:
6.1.2	A communication plan to be finalised and communicated following confirmation of the process and options for the Aged Care Bank & Investment Account Communication Plan	KC	On Hold
Ac	tion List: Meeting 30 September 2019		
No.	Action	Responsibility	Due:
6.1.1(f)	Key themes and drivers discussion points to form the basis of the strategic plan and aligned to a working document.	GK & AM	In Progress

Α	ction List: Meeting 28 October 2019		
No.	Action	Responsibility	Due:
9.1.2	The revised list of Outstanding Capital Works is to be prioritised to determine the order of works to be completed including priority of funding and level of risk.	РВ	30 March
9.1.2	Link issues, establish baseline and possible solutions for Outstanding Capital Works under each heading within the Service Level Agreement.	РВ	30 March
Α	ction List: Meeting 25 November 2019		
No.	Action	Responsibility	Due:
9.10	The Security Audit Action Plan is to be revised to include allocation of sustainability funding	PB & JV	30 March
9.10	The Security Audit Action Plan is to be revised to include prioritisation as per the risk matrix.	PB & JV	30 March
A	ction List: Meeting 20 January 2019		
No.	Action	Responsibility	Due:
3.1 3.1	A review of the 'Average Cost per NWAU' to be undertaken for Penola Key Performance Indicator (KPI) reporting format to be reviewed to ensure clarity on performance priorities and where attention needs to be paid.	KC & JV KC & JV	24 February 24 February
7.1	A copy of the Palliative Care PowerPoint presentation to be provided to the Governing Board.	AM	Completed
8.1	GK to meet with Lisa Cockington, Manager Strategy & Innovation, Rural Support Service, to progress planning.	GK & AM	Completed
8.1	A summary of the priorities relating to the Rural Health Workforce Strategy to be provided to the Board.	AM	Completed
9.1	GK to meet with AsiaAustralis to provide further review based on updated	GK & AM	Completed

	model.		
9.1	The second meeting of the LCLHN & MGPH Working Group to be scheduled	AM	24 February
	following receipt of the draft Service Agreement.		
10.1	Terminology within the memberships of the Governing Board committees in the	AM	Completed
	Governing Board Charter Volume 2 to be reviewed, 'consists of' to be replaced		
	with 'includes'		
11.13	Membership relating to Aboriginal Health Commissioning to be confirmed with	AM & KR	24 February
	Kerri Reilly.		