



## Health

Riverland Mallee Coorong  
Local Health Network

# MINUTES

## Riverland Mallee Coorong Local Health Network Governing Board Meeting # 22

**Date:** Thursday 24 June 2021

**Time:** 1.00 pm – 4.15 pm

**Venue:** Resource Room, Renmark Paringa District Hospital

**In Attendance:** Peter Joyner (PJ), Elaine Ashworth (EA), Fred Toogood (FT), Claudia Goldsmith (CG), Mel Ottaway (MO), Shane Mohor (SM), Wayne Champion (WC), Craig Lukeman (CL),

**Apologies:**

**Secretariat:** Jeanette Brown (JB)

**Guests:** Karen Hollitt (KH), Michelle Mantripp (MM) (Item 5.1.4), Erin Conlon and Cynthia Barton, ACQSC (Item 7.1)

**Acknowledgement:**

*We acknowledge and respect the traditional custodians whose ancestral lands we are meeting on here today. We acknowledge the deep feelings of attachment and relationship of Aboriginal people to country. We also pay respects to the cultural authority of Aboriginal people visiting/attending from other areas of South Australia/Australia present here.*

ITEM	DISCUSSION POINTS	OUTCOME / ACTIONS
<b>1. IN CAMERA DISCUSSION</b>		
<b>2. MEETING OPENING</b>		
2.1 Acknowledgement	<ul style="list-style-type: none"> <li>PJ provided Acknowledgement</li> </ul>	
2.2 Present and Apologies	<ul style="list-style-type: none"> <li>PJ, EA, FT, CG, MO, SM, WC, CL</li> </ul>	
2.3 Interests and Conflicts Disclosure 2.3.1 Board Disclosure Log	<ul style="list-style-type: none"> <li>Nil conflicts of interest declared.</li> <li>Interests disclosure log noted and updates provided.</li> </ul>	
2.4 Confirmation of Minutes from previous meeting	<ul style="list-style-type: none"> <li>The minutes from the Board Meeting held 28 May 2021 were endorsed.</li> </ul>	The Board endorsed the previous minutes.
2.5 Review Actions Log	<ul style="list-style-type: none"> <li>Actions Log Reviewed.</li> <li>Noted that Chair to follow up listing of potential Board members from the Department for Health and Wellbeing.</li> </ul>	
<b>3. MATTERS FOR NOTING</b>		
3.1 Chairperson Report	<ul style="list-style-type: none"> <li>Report provided a summary of current issues including: COVID-19, current pressures and succession planning.</li> </ul>	Chairperson's Report noted.

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3.2 Chief Executive Officer (CEO) Report	<ul style="list-style-type: none"> <li>• Report highlighted achievements and current operational issues.</li> <li>• Noted the current status of COVID-19 including the vaccination program, Riverland Academy of Clinical Excellence, employee resilience, and RMCLHN Awards.</li> <li>• Reflection on achievements in first two years as an LHN.</li> <li>• Noted an emerging issue related to a confirmed case of tuberculosis.</li> </ul>	CEO Report noted.
<b>4. MATTERS FOR DISCUSSION</b>		
4.1 Service Agreement and Commissioning Bids update	<ul style="list-style-type: none"> <li>• Noted the update provided to the Finance Committee.</li> </ul>	
4.2 Regional LHN Budget Reallocation.	<ul style="list-style-type: none"> <li>• Noted the update provided to the Finance Committee.</li> </ul>	
4.3 Update re Section 19(2)	<ul style="list-style-type: none"> <li>• Noted the update provided to the Finance Committee.</li> </ul>	
4.4 Bridge Clinic Agreement	<ul style="list-style-type: none"> <li>• Nil further since May 2021 meeting.</li> </ul>	
4.5 Analysis re Aged Care Royal Commission staffing	<ul style="list-style-type: none"> <li>• Noted the analysis of RMCLHN Residential Aged Care sites compared to Recommendation 86 of the Aged Care Royal Commission report that proposes 3.3 hours per resident per day to be provided from 1 July 2022 including 40 minutes Registered Nurse time per resident per day.</li> <li>• Noted the requirement for further definitions due to different classifications / naming across jurisdictions.</li> </ul>	The Board noted the information about RMCLHN current staffing compared to Royal Commission recommendations.
4.6 Risk Appetite Statement Review	<ul style="list-style-type: none"> <li>• Noted the recommendation from the Audit and Risk Committee regarding the updated Risk Appetite Statement.</li> </ul>	The Board endorsed the updated Risk Appetite Statement.
4.7 Audit & Risk Committee Evaluation Report	<ul style="list-style-type: none"> <li>• Noted the annual self-assessment report for the Audit and Risk Committee.</li> <li>• Discussion about risk analysis of clinical risks at Clinical Governance Committee.</li> </ul>	The Board noted the self-assessment report. ACTION: Review of Clinical Risks to be included on Clinical Governance Committee agenda.
4.8 Governing Board Evaluation 2021	<ul style="list-style-type: none"> <li>• Discussion about the 2020 evaluation process and potential to undertake another self-assessment or undertake an external evaluation in 2021. Consideration to be given to an external evaluator for 2022.</li> </ul>	The Board agreed to undertake an internal evaluation process of the Governing Board for 2021. ACTION: Governing Board 2021 self-assessment to be set up as an on-line process.
4.9 Revised Internal Audit Charter and Internal Audit Plan	<ul style="list-style-type: none"> <li>• Noted the recommendation from the Audit and Risk Committee regarding the updated regional LHN Internal Audit Charter and the regional LHN Internal Audit Plan,</li> </ul>	The Board endorsed the regional LHN Internal Audit Charter and the regional LHN Internal Audit Plan,
4.10 Other matters for discussion	<ul style="list-style-type: none"> <li>• Discussion about the patient journey experience with RMCLHN including what works well and areas for improvement.</li> </ul>	

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5. STANDARD AGENDA ITEMS FOR DISCUSSION		
<p>5.1 Performance Report</p> <p>5.1.1 Finance and FTE Report-PPRC</p> <p>5.1.2 KPI Monthly Performance Report</p> <p>5.1.3 People and Culture Report</p> <p>5.1.4 Quality and Safety Reports</p> <p>5.1.5 Other</p>	<ul style="list-style-type: none"> <li>The RMCLHN June Performance Reports were noted.</li> <li>Noted that detailed discussion about financial performance reports occurred at the Finance Committee.</li> <li>Key Performance Indicators, People and Culture, and Quality Risk and Safety performance reports, including compulsory reporting, were noted.</li> <li>Noted the People and Culture Report with discussion about frequency.</li> <li>Noted the Quality and Safety Reports with Karen Hollitt, EDONM and Michelle Mantripp, A/Manager Quality Risk &amp; Safety in attendance.</li> <li>Discussion about pressure injury reporting with consideration to be given to incorporating notification when pressure injuries are healed.</li> </ul>	<p>The Board noted the RMCLHN Performance Reports.</p> <p><b>ACTION:</b> Consideration to be given to incorporating notification when pressure injuries are healed within RMCLHN processes and reporting.</p>
<p>5.2 RMCLHN Planning Update</p> <p>5.2.1 Operational plan</p> <p>5.2.2 Diversity &amp; Inclusion Plan and Disability Access &amp; Inclusion Plan</p>	<ul style="list-style-type: none"> <li>Noted the update on the development of additional RMCLHN plans.</li> <li>Noted the updated Operational Plan.</li> <li>Noted the Diversity &amp; Inclusion Plan and Disability Access &amp; Inclusion Plan that will become appendices to the Workforce Plan once that is developed.</li> <li>Discussion about the planning workshop scheduled for 25 June 2021.</li> </ul>	<p>The Board endorsed the Operational Plan noting additions will continue to be made as actions from other plans are developed and incorporated.</p> <p>The Board endorsed the Diversity &amp; Inclusion Plan and Disability Access &amp; Inclusion Plan.</p>
6. MATTERS FOR DECISION		
<p>6.1</p>	<ul style="list-style-type: none"> <li>Nil</li> </ul>	
7. PRESENTATION		
<p>7.1 Aged Care Safety &amp; Quality Commission (ACSQC) presentation</p>	<ul style="list-style-type: none"> <li>Erin Conlon, Regional Director SA/WA/NT and Cynthia Barton, Compulsory Reporting Compliance Officer, in attendance via Teams.</li> <li>Discussion included:                             <ul style="list-style-type: none"> <li>ACSQC processes and the role of different sections of ACSQC, including the role of the assessment team, compliance section and the delegate.</li> <li>Terminology around compliance and notices.</li> <li>RMCLHN performance.</li> <li>Potential changes as a result of the Royal Commission.</li> <li>Role of the Board in understating Aged Care Standards.</li> <li>Introduction of Serious Incident Reporting from 1 April 2021 and new reporting anticipated in relation to restrictive practices.</li> <li>Noted that reassessments take into consideration changes within the sector with expectations of ACSQC constantly evolving.</li> </ul> </li> </ul>	<p>The Board noted the information provided by representatives from the Aged Care Safety &amp; Quality Commission.</p>

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8. MATTERS FOR INFORMATION		
8.1 RMCLHN Board Finance Committee Minutes	<ul style="list-style-type: none"> <li>Noted the draft Minutes of 28 May 2021.</li> </ul>	The Board noted the draft Minutes.
8.2 RMCLHN Board Clinical Governance Committee Minutes	<ul style="list-style-type: none"> <li>Noted the draft Minutes of 28 May 2021.</li> </ul>	The Board noted the draft Minutes.
8.3 RMCLHN Board Audit & Risk Committee Minutes	<ul style="list-style-type: none"> <li>Noted the draft Minutes of 27 May 2021.</li> </ul>	The Board noted the draft Minutes.
8.4 Rural Support Service (RSS) Governance Committee	<ul style="list-style-type: none"> <li>MO provided a summary of the meeting held in May noting that meetings are currently monthly.</li> <li>Noted the structure of RSS including Account Managers assigned to each LHN.</li> <li>Noted that a performance dashboard is being considered for reporting to the Committee</li> </ul>	The Board noted the meeting report. ACTION: RSS Governance Committee reports to be added as a standing agenda item.
9. ITEMS APPROVED BY CEO FOR NOTING		
9.1 Legislative Compliance	<ul style="list-style-type: none"> <li>Noted the information about the DHW Master Service Agreement with Law Compliance for the provision of Legislative Compliance Services and the requirement for each LHN to enter into an Individual Supply Contract.</li> </ul>	The Board noted the information about legislative compliance.
10. CORRESPONDENCE		
10.1 Incoming – BHFLHN Chair re RSS Surplus	<ul style="list-style-type: none"> <li>Noted the correspondence.</li> </ul>	The Board noted the correspondence.
11. MEETING FINALISATION		
11.1 Questions / Comments	<ul style="list-style-type: none"> <li>Nil further</li> </ul>	
11.2 Review actions to be taken	<ul style="list-style-type: none"> <li>Refer items: 4.7, 4.8, 5.1.4 and 8.4</li> </ul>	
11.3 Meeting Evaluation / Suggestions for next meeting	<ul style="list-style-type: none"> <li>PJ summarised the meeting.</li> </ul>	
11.4 Next meeting	<p><b>Next Meeting - Date: 30 July 2021</b>  <b>Time: 1.00 – 4.00 pm</b>  <b>Location: Meningie</b></p>	
11.5 Meeting Close	4.15 pm	

**Signed:**

Peter Joyner  
 Chair  
 Date: 30/ 07/ 2021

