

**LIMESTONE COAST LHN
GOVERNING BOARD
MEETING MINUTES**

Meeting Date: 27 April 2021 11:30am – 4:00pm

Location: Mount Gambier and Districts Health Service, Conference Room 2 and via Microsoft Teams

Acknowledgement of Country Limestone Coast Local Health Network acknowledges Traditional Custodians of 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)

Members: Ngaire Buchanan (NB) Kristen Capewell (KC) Dr Elaine Pretorius (EP) Paul Bullen (PB) Hannah Morrison (HM)
Angela Miller (AM) Ravinder Singh (RS) Sally Foster (SF)

Guests: Jayel van den Hurk, Acting Director of Governance and Planning, LCLHN

Secretariat: Emily Baker, Senior Administration Officer, Governance & Planning

1.	IN CAMERA SESSION	
Item		Discussion
1.1		IN CAMERA SESSION – 11:45pm – 12:15pm
2.	MEETING OPENING	
Item		Discussion
2.1	Acknowledgement of Country	GK provided the Acknowledgement of Country.
2.2	Apologies	An apology was provided for Ngaire Buchanan, Chief Executive Officer (CEO), LCLHN.

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2.3	Introduction	GK provided an introduction to the meeting of the Limestone Coast Local Health Network (LCLHN) Governing Board.
2.4	Director Conflict of Interest Disclosures	Nil Conflicts of Interest disclosed.
2.5	Confirmation of previous meeting minutes and actions	The minutes of the meeting held on 29 March 2021 were accepted as a true and accurate reflection of the meeting held and an update on actions was provided.
3.	BOARD CHAIR REPORT	
3.1	Report from Grant King, Board Chair	<p>GK provided an update in relation to work progressing with Strategic Planning activities for the Limestone Coast Local Health Network (LCLHN).</p> <p>An update was provided in relation to a recent meeting of the combined LCLHN Health Advisory Councils (HACs), including discussions regarding communication support available to the HACs from the LCLHN.</p> <p>An update was provided in relation to the COVID-19 Vaccination Program, including the need for the LCLHN to continue to work collaboratively with local General Practitioners (GPs) to provide guidance and clarity for the community.</p>
4.	LIMESTONE COAST LHN REPORTS	
4.1	CEO Report a) General update	<p>The Chief Executive Officer (CEO) report was noted, and progress updates were provided in relation to key topics.</p> <p>An update was provided in relation to Keith and District Hospital (KDH), including:</p> <ul style="list-style-type: none">• A new funding agreement and Memorandum of Understanding (MOU) between the Limestone Coast Local Health Network (LCLHN) and the Keith and District Hospital (KDH), providing continued financial support to the KDH until December 2022.• The recruitment of a project lead for a period of two years, to work with the LCLHN and the KDH, to transition the existing health service to a Community Health Hub model, providing access to a range of services for the Keith community into the future. <p>The Governing Board resolved to provide ongoing support for the project lead, following their onboarding to the role, and it was agreed that regular progress</p>

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updates should be provided by the project lead to the LCLHN Governing Board via a monthly Briefing.

A progress update was provided in relation to the Mount Gambier Private Hospital (MGPH) and a proposed funding arrangement between the LCLHN and MGPH including:

- Recent discussions between the MGPH CEO and the LCLHN Acting CEO.
- A review of the recharge schedule to ensure clarity and transparency for both parties, and to provide an evidenced-based calculation to support funding discussions.
- Correspondence being prepared for the Minister for Health and Wellbeing (MHW) to provide an update on work progressing between the LCLHN and MGPH.
- The overarching responsibility for the LCLHN in relation to reporting data, including communication of the LCLHN Clinical Solvency Statement (CSS), and the desire to establish a defined process for the MGPH to reciprocate communication of a CSS to the LCLHN Clinical Governance Committee.

The COVID-19 Vaccination program was discussed, and progress updates were provided on key areas, including:

- Acknowledgement for the work being progressed by the LCLHN COVID-19 Vaccination Team, including the continuously evolving scope of the project and the need for a consistent flow of communications to LCLHN staff
- The anticipated commencement of a community clinic for the LCLHN, in mid May, and work progressing with procurement of resources to establish the site.
- Work progressing to engage with staff regarding the benefits of receiving the COVID-19 vaccination
- The anticipation for new vaccinations, in addition to Pfizer and Astra Zeneca, to be available in Australia by the end of the year.

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		<p>An update was provided in relation to a review of internal processes, and actions taken by the LCLHN to address any issues of fatigue, bullying and harassment in the workplace, in preparation for an audit by SafeWork SA, anticipated for early June.</p> <p>Work progressing to collaborate with Tatiara District Council regarding the proposed Bordertown Health Hub, and consideration for co-locating some LCLHN services on the site, was discussed, and agreed in principal, subject to further investigation by the Director of Corporate Services, LCLHN.</p> <p>The Governing Board resolved to ensure that planning activities for the region would provide a range of services for the Bordertown community into the future.</p>
	b) Performance Reporting Summary February 2021	<p>The Chief Finance Officer (CFO) provided a summary of key points from the February 2021 Finance Report, including:</p> <ul style="list-style-type: none">• The End of Year (EOY) forecasted Net Adjusted Result (excluding revaluations), reported to be \$2.4m unfavourable to budget.• The unfavourable result to budget being inclusive of allowable variances, including \$1.1m in relation to COVID-19 net Year to Date (YTD) expenditure and \$1.1m in relation to a proposed adjustment to the allocation for depreciation of assets for the current budget period.• \$440k unfavourable expenditure attributed to central Microsoft Licencing costs, and the rollout of Windows 10 across all SA Health devices.• National Weighted Activity Unit (NWAU) EOY forecasted result favourable to target, and the influence of an improved result in relation to funding allocation for the upcoming budget period.• The desire to engage additional resources to facilitate continuous improvement projects for the LCLHN.
	c) Key Performance Indicator (KPI) Summary February 2021	<p>The Key Performance Indicator (KPI) Summary for February 2021 was noted.</p>
5.	ENGAGEMENT STRATEGIES	
5.1	Engagement Strategy Update	<p>An update was provided on the Consumer, Carer & Community Engagement Strategy (CCCES), including confirmation that the consultation phase had been</p>

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		<p>completed and the final version of the CCCES would be prepared for review and approval by the Board in May 2021.</p> <p>An update was provided on the Clinician & Staff Engagement Strategy (CSES), including anticipation for the commencement of consultation via online workshops in early May and with further consideration to be given to ensure successful engagement with Medical Officers and external General Practitioners.</p>
6.	GOVERNING BOARD COMMITTEE UPDATES	
6.1	Audit & Risk Committee Summary	<p>An update was provided by the Audit & Risk Committee chair, including:</p> <ul style="list-style-type: none">• Work progressing in relation to the review of the Terms of Reference• Work progressing to finalise three KPIs, ensuring alignment to the key stakeholders for the Committee including the Governing Board, the LCLHN (Staff and Consumers), and the Department for Health and Wellbeing (DHW).
6.2	Clinical Governance Committee Summary	<p>An update was provided by the Clinical Governance Committee chair, including work progressing to finalise three KPIs, ensuring alignment to the key stakeholders for the Committee including the Governing Board, the LCLHN (Staff and Consumers), and the Department for Health and Wellbeing (DHW).</p>
6.3	Finance & Performance Committee Summary	<p>An update was provided by the Finance & Performance Committee chair, including:</p> <ul style="list-style-type: none">• Confirmation that a review of the Terms of Reference had been tabled and discussed at the meeting of the committee, on 27 April 2021.• Work progressing to finalise three KPIs, ensuring alignment to the key stakeholders for the Committee including the Governing Board, the LCLHN (Staff and Consumers), and the Department for Health and Wellbeing (DHW).
7.	STRATEGIC PLANNING	
7.1	Strategic Planning Update	<p>The LCLHN draft strategic vision statement options were noted.</p>

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		<p>RESOLUTION</p> <p>The Governing Board resolved to use the Country Health SA LHN Vision Statement, as adopted from 1 July 2019, for the Consumer, Carer and Community Engagement Strategy and while the Vision for the LCLHN is determined through the Strategic Planning process.</p>
8.	TOPIC OF THE MONTH	
8.1	Governing Board Briefing – Ambulatory Care	<p>The Governing Board Briefing in relation to Ambulatory Care was noted.</p> <p>Key points from the briefing were discussed including:</p> <ul style="list-style-type: none">• The limitations identified in relation to the existing infrastructure at the Mount Gambier & Districts Health Service (MGDHS) and the impact to the current day to day operations, and additionally in relation to accommodating future strategic plans for the site.• The need to address the requirements for a more suitable administrative work environment for Clinicians and Medical Officers, as outlined by the Australian College of Emergency Medicine (ACEM) and with the relevant Employee Associations.• The opportunity to pursue strategic operational outcomes for the LCLHN by further establishing the MGDHS as the “Hub” in which specialist services branch out to other sites, delivering more health services, closer to home, for the Limestone Coast community.• The opportunity to improve Hospital Avoidance KPI results, and additionally alleviate pressures on acute beds, by increasing access to Telehealth services, introducing Rapid Access Clinics and expanding Hospital in the Home services.• The ability to support Tier 2 Interdisciplinary Care, delivering more Patient Centred Care for consumers who would have the opportunity to schedule appointments with various specialists concurrently, and at the one location. <p>RESOLUTION</p> <p>The Governing Board provided endorsement of the Governing Board Briefing – Ambulatory Care, highlighting the alignment of the proposal to the Boards</p>

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		desire to provide innovative care for consumers of LCLHN services, into the future, and additionally to strengthening the workplace culture, providing infrastructure that supports best practice working environments.
9.	MATTERS FOR DISCUSSION	
9.1	Revised LCLHN 2021-22 Service Imperatives Briefing	<p>The revised LCLHN 2021-22 Service Imperatives briefing was noted.</p> <p>RESOLUTION</p> <p>The Governing Board provided endorsement for the revised LCLHN 2021-22 Service Imperatives briefing, to be tabled for discussion at the next Governing Board meeting, to be attended by Dr Chris McGowan, Chief Executive (CE), Department for Health and Wellbeing (DHW).</p>
9.2	Governance Committee Evaluations	<p>The Audit & Risk Committee Evaluation survey results were noted.</p> <p>The Clinical Governance Committee Evaluation survey results were noted.</p> <p>The Finance & Performance Committee Evaluation survey results were noted.</p>
9.3	Governance Committee Key Performance Indicators	<p>The Governance Committee Key Performance Indicators for each of the relevant committees were noted.</p> <p>RESOLUTION</p> <p>The Governance Committee Chairs agreed to a cohesive approach to the development of KPIs for each committee and to align the KPIs to the three key stakeholders for each Committee, including the Governing Board, the LCLHN (Staff and Consumers), and the Department for Health and Wellbeing (DHW).</p>
9.4	Governing Board External Review Requirements	<p>The Governing Board External Review process was discussed, and it was noted that many of the regional LHNs had opted to complete an internal annual self-assessment to compliment the external review process that may be pursued by the DHW.</p> <p>The Governing Board reflected on the self-assessment process previously completed in July 2020, and it was agreed that a review of the evaluation questions would be undertaken by the membership to further refine the process</p>

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		for 2021 while ensuring the review measured performance against the Board Charter and the Governing Board's requirements under the Health Care Act 2008.
10.	MATTERS FOR APPROVAL	
10.1	LCLHN Financial Delegations	<p>The LCLHN Financial Delegations Procedure was discussed and the endorsement provided by the Finance and Performance Committee, on 27 April 2021 was noted.</p> <p>RESOLUTION</p> <p>The revised LCLHN Financial Delegations procedure was approved by the Governing Board.</p>
11.	MATTERS FOR NOTING	
11.1	LCLHN Payment Performance Report March 2021	The LCLHN Payment Performance Report March 2021 was noted.
11.2	LCLHN Late Payments of Interest (LPI) March 2021	The LCLHN Late Payments of Interest (LPI) March 2021 were noted.
11.3	Finance & Performance Committee Agenda – 27 April 2021	The Finance & Performance Committee Agenda – 27 April 2021 was noted.
11.4	Clinical Governance Committee Agenda – 27 April 2021	The Clinical Governance Committee Agenda – 27 April 2021 was noted.
11.5	Briefing – Serious Incident Response Scheme (SIRS)	The Governing Board Briefing – Serious Incident Response Scheme, was noted.
12.	OTHER BUSINESS	
12.1	Governing Board Meeting – Standing Invitations	<p>The current standing membership for the LCLHN Governing Board meetings were discussed, including a review of required subject experts noted in the Board Charter Volume 2.</p> <p>It was agreed that the topic should be tabled at the next meeting of the Strategic Leadership group for discussion, including:</p>

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		<ul style="list-style-type: none">• A review and assessment of current and proposed subject experts to ensure valuable ongoing contribution is provided by the Executive members to the Governing Board.• The potential to invite executive members, who are not currently standing members of the Governing Board meetings, to attend on a scheduled and rotating basis to present a 'Topic of the Month' relating to their field of expertise. <p>The Governing Board resolved to continue exploring opportunities to engage with and provide opportunities for matters to be presented to the Board by staff and community members, including through strengthening relationships with the various Health Advisory Councils across the Limestone Coast region.</p>
12.2	Diligent Questionnaire	The results from the Diligent Questionnaire were noted, and an update was provided in relation to a planned meeting with the Diligent Customer Success Manager in early May 2021, providing an opportunity to discuss areas for improvement with the software portal which have been identified by the LCLHN.
12.3	Any other business	<p>An update was provided in relation to upcoming changes to the State Government procurement framework, which is anticipated to have significant impact for the LCLHNs local procurement processes in the future.</p> <p>Confirmation was provided by the Director of Corporate Services that the new framework would be presented to the Strategic Leadership Group, and subsequently to the Governing Board, once further information is provided to the LCLHN by the DHW.</p>
13.	MEETING EVALUATION AND CLOSE	
13.1	Meeting Evaluation	AS provided an evaluation of the LCLHN Governing Board Meeting.
13.2	Next Meeting & location	31 May 2021, Mount Gambier.
13.3	Meeting Close	4:00 pm