

Minutes

Date: 25 November 2022 **Time:** 11.20 am **Venue:** Riverland General Hospital, Berri & via TEAMS **Meeting Number:** #37

Riverland Mallee Coorong Local Health Network Governing Board Meeting

Present: Peter Joyner (PJ), Elaine Ashworth (EA), Mel Ottaway (MO), Claudia Goldsmith (CG), Fred Toogood (FT)

Attendees: Wayne Champion (WC) - CEO, Craig Lukeman (CL) - CFO, Sharon Wingard (SW) - DAH

Guests: Karen Hollitt (KH) – EDONNM, Anne McKinlay (AM) – QRS Manager

Apologies:

Secretariat: Jeanette Brown (JB)

Traditional Acknowledgement

We would like to acknowledge the Aboriginal custodians of the Land and waters that we are meeting upon today. We respect their spiritual relationship with their country and acknowledge that their cultural beliefs are an important focus of their past, present and future. We also pay respect to the cultural authority of Aboriginal people in attendance from other areas.

ITEM NO.	ITEM	DISCUSSION POINTS	OUTCOME / ACTIONS
1	PRESENTATION		
1.1	Anne McKinlay, QRS Manager	<ul style="list-style-type: none"> ○ Anne McKinlay, QRS Manager, provided an overview of the National Safety and Quality Health Service (NSQHS) Standards Accreditation responsibilities of the Governing Board. <ul style="list-style-type: none"> ▪ There are 8 Standards incorporating 148 Actions with the Clinical Governance and Partnering with Consumers Standards setting the overarching system requirements. ▪ The Governing Board is responsible for the organisation's corporate and clinical governance and, ultimately, is responsible for ensuring the organisation is run well and delivers safe, high-quality care. 	<p>The Governing Board noted the presentation about NSQHS Accreditation</p> <p>ACTION: 20221125-01 - Board members to review NSQHS Standards Guidelines for Governing Bodies and identify questions for further discussion.</p>

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		<ul style="list-style-type: none"> ▪ The Executive and Managers have a responsibility to advise and inform the Governing Board and ensure that the systems and culture that support the delivery of care are well designed and perform well. ▪ Accreditation will now be an annual event, around November each year, and will address different standards although elements of Clinical Governance and Partnering with Consumers will be included each visit. At present, it is unclear how all 12 sites, community health and mental health will be managed during assessment visits. ▪ Discussion about current and potential future ways of obtaining consumer and community feedback. ▪ Discussion about the knowledge of Board members and how this might be articulated during assessment visits. ▪ The NSQHS Standards User Guide for Governing Bodies provided to members and also available in Diligent Resources. ▪ Discussion about holding a workshop to undertake a Board gap analysis. ▪ Discussion about Board Member continuing education requirements such as aged care reform. 	<p>ACTION: 20221125-02 - A Board Workshop to be held in March 2023 to undertake a gap analysis against the NSQHS Standards.</p> <p>ACTION: 20221125-03 - Future Quality and Safety Reports to incorporate cross references to the applicable NSQHS Standards and also Aged Care Standards and National Disability Insurance Scheme (NDIS) Standards.</p>
2	IN CAMERA DISCUSSION		
		<ul style="list-style-type: none"> ○ In-Camera discussion held at the beginning of the meeting. ○ Schedule for 2023 to be reviewed. 	
3	CONFIRMATION OF MINUTES & ACTION ITEMS		
3.1	Acknowledgement/ Present and Apologies	<ul style="list-style-type: none"> ○ Chair welcomed members and attendees and provided acknowledgement. 	
3.2	Interests and Conflicts Disclosure Log	<ul style="list-style-type: none"> ○ Current Interests and Conflicts Disclosure Log noted. 	
3.3 3.3.1	Confirmation of Minutes Minutes from Board meeting 27/10/2022	<ul style="list-style-type: none"> ○ The minutes from the Board Meeting held 27 October 2022 were endorsed. 	

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3.3.2	Minutes from Annual Public Meeting 26/10/2022	<ul style="list-style-type: none"> ○ The minutes from the Annual Public Meeting held 26 October 2022 were endorsed. 	ACTION: 20221125-04 - Options to improve sound quality for future Board events to be investigated.
3.4	Review Actions Log	<ul style="list-style-type: none"> ○ The Board noted the Actions Log including completed actions and those included in the agenda. 	
3.5	Board Work Plan	<ul style="list-style-type: none"> ○ The Board noted the Work Plan. 	
4	MATTERS FOR DECISION		
4.1	Ventia Agency Scope of Agreement	<ul style="list-style-type: none"> ○ Noted the information about the 2022-2023 Agency Scope of Agreement with Ventia for the management of the Preventative Maintenance Program. ○ Noted that Ventia were awarded the Across Government Facilities Management Arrangement (AGFMA) by the Government of South Australia. ○ Noted that the proposed budget is based on actual forecast work at forecast costs. ○ The Board endorsed the Chief Executive Officer to execute the agreement on behalf of RMCLHN. 	The Board endorsed the Chief Executive Officer to execute the agreement on behalf of RMCLHN
5	MATTERS FOR DISCUSSION		
5.1	RMCLHN Mock Accreditation	<ul style="list-style-type: none"> ○ Noted the information about the RMCLHN National Standards Mock Accreditation surveys undertaken in October 2022. ○ Noted that further mock surveys will be undertaken in March 2023. ○ Noted the key areas of focus arising from the October 2022 mock surveys with discussion occurring in detail at the Clinical Governance Committee meeting. Noted that a plan for continuous improvement is being developed to address areas of focus. 	ACTION: 20221125-05 - RMCLHN Plan for Continuous Improvement arising from mock surveys to be provided at the January 2023. meeting.
5.2	Board Update Membership	<ul style="list-style-type: none"> ○ Addressed in-camera ○ Noted that the Department for Health and Wellbeing (DHW) will be advertising for Expressions of Interest (for all Local Health Networks) in the new year. 	

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		<ul style="list-style-type: none"> Noted the update about the RMCLHN external member to the Aged Care and Disability Governance Committee remuneration determination. 	
5.3	Corrective Plan and Health & Safety Representatives Update	<ul style="list-style-type: none"> Noted the information update about the RMCLHN Corrective Action Plan including information about the RMCLHN Health and Safety Representatives. Noted there were 14 corrective actions as at 7 November 2022. Discussion about timeframes associated with some actions. 	ACTION: 20221125-06 - Outstanding actions on the RMCLHN Corrective Action Plan to be further reviewed.
5.4	Workforce Advertising of Vacancies	<ul style="list-style-type: none"> Update provided noting that DHW is now working on a project to consider process for all LHNs with DHW branding to be utilised in the interim. Noted that the topic was raised during meeting held between Board Chair, CEO, Minister and the Chief Executive DHW. Noted that individual LHN branding will be incorporated into an international recruitment project. 	
5.5	Policy Update	<ul style="list-style-type: none"> Noted the report of current SA Health and Rural Support Services Policies. Noted that all polices are accessible on the SA Health website. Noted that the links on the document provided are to the intranet and not as accessible. Discussion about policy compliance. 	ACTION: 20221125-07 - List of Policies to be recirculated with internet links.
5.6	Service Agreement Update	<ul style="list-style-type: none"> Nil further 	
6	STANDARD AGENDA ITEMS FOR DISCUSSION		
6.1	Performance Report	<ul style="list-style-type: none"> The Board noted the RMCLHN Performance Reports, noting that these were discussed in detail at the Finance Committee, Clinical Governance Committee, and Aged Care and Disability Governance Committee meetings. 	The Board noted the RMCLHN Performance Reports.
6.1.1	Finance and FTE Report-PPRC	<ul style="list-style-type: none"> The Finance and FTE Report was noted and also discussed at the Finance Committee Meeting. 	

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<p>6.1.2</p> <p>6.1.3</p> <p>6.1.4</p>	<p>KPI Monthly Performance Report</p> <p>People and Culture Report</p> <p>Quality and Safety Reports</p>	<ul style="list-style-type: none"> ○ The KPI Monthly Performance Report was noted and also discussed at the Clinical Governance Committee Meeting. ○ The People and Culture Report was noted. <ul style="list-style-type: none"> ▪ Discussion about current matters under investigation and process, from reporting of an allegation through to final outcome. ▪ Noted the role of the Independent Commission Against Corruption (ICAC) SA that investigates corruption matters and the role of Ombudsman SA that investigates misconduct and maladministration matters. ○ Karen Hollitt, Executive Director of Nursing and Midwifery, and Anne McKinlay, Quality Risk and Safety Manager, in attendance. ○ The Quality and Safety Reports were noted and discussed at the Clinical Governance Committee and Aged Care and Disability Governance Committee. 	
<p>6.2</p> <p>6.2.1</p> <p>6.2.2</p>	<p>RMCLHN Planning Update</p> <p>Operational Plan Report</p> <p>Draft Digital Health Strategy</p>	<ul style="list-style-type: none"> ○ Noted the Planning Workshop scheduled for 15 December with a focus on environmental sustainability. ○ Noted the monthly Operational Plan report and the updated RMCLHN Operational Report ○ Noted the information about the draft RMCLHN Digital Health Strategy. ○ Discussion about the purpose of the overall strategy that will guide RMCLHN activity and innovation compared with specific projects such as CHIRON replacement. ○ Discussion about the intended audience and language within the document. 	<p>The Board noted the Planning Update.</p> <p>ACTION: 20221125-08 - Draft Digital Health Strategy to be reviewed to ensure language is client focused and accessible for the intended audience.</p> <p>ACTION: 20221125-09 - Reviewed draft Digital health Strategy to be circulated out of session in December 2022 for endorsement for further consultation.</p>

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6.2.3	Draft Strategic Asset Management Plan	<ul style="list-style-type: none"> ○ Noted the information about the draft RMCLHN Strategic Asset Management Plan. ○ Discussion about <ul style="list-style-type: none"> ▪ The intended audience and language within the document. ▪ The potential inclusion of definitions. ▪ The proposed development of a clinical services plan that will guide asset management decisions. ▪ The document provides a good description of all sites and current asset assessment. ▪ Available asset sustainment funding and how funding is allocated across regional LHNs. ○ The Board supported the draft Strategic Asset Management Plan, following a review of language, as an internal document to guide investment opportunities. 	<p>ACTION: 20221125-10 - The Strategic Asset Management plan to be reviewed for language accessibility.</p> <p>ACTION: 20221125-11 - A summary Facilities Renewal Plan to be developed as a companion document to the Strategic Asset management Plan outlining priorities for renewal without timelines.</p>
7	MATTERS FOR NOTING		
7.1	Chairperson Report	<ul style="list-style-type: none"> ○ The Chairperson Report was noted. 	Chairperson's Report noted.
7.2	Chief Executive Officer (CEO) Report	<ul style="list-style-type: none"> ○ The CEO Report provided a summary of current issues, with the Board noting the following topics: <ul style="list-style-type: none"> ▪ Murray River Flood Event ▪ Japanese Encephalitis Virus ▪ COAG Section 19(2) Exemptions ▪ Aged Care Services ▪ Mannum Service Planning ▪ RACE Clinical Leadership Program ▪ Riverland CCSD Upgrades and CSSD Hub and Spoke Project ○ Discussion about: <ul style="list-style-type: none"> ▪ Progress of CHIRON replacement proposal. ▪ NDIS accreditation process. 	CEO'S Report noted.
7.3	COVID -19 Update	<ul style="list-style-type: none"> ○ COVID-19 status as at date of meeting provided noting that there has been a further peak as predicted, mainly due to reduced community immunity, and noting that a number of staff have been furloughed. 	The Board noted the COVID-19 update.

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		<ul style="list-style-type: none"> ○ Noted the DHW announcement that public PCR testing will cease in January 2023 and RATs to be accessible for the community. 	
7.4	Barmera Retirement Village Management Report.	<ul style="list-style-type: none"> ○ Noted the Barmera Retirement Village 2022 Annual Management Report. 	The Board noted the Barmera Retirement Village Report.
8	MATTERS FOR INFORMATION		
8.1	RMCLHN Board Finance Committee		
8.1.1	27 October Minutes	<ul style="list-style-type: none"> ○ Noted the RMCLHN Board Finance Committee Minutes 27 October 2022 (Draft). 	
8.1.2	Chair's Update	<ul style="list-style-type: none"> ○ Nil further for Finance Committee Chair's update. 	
8.2	RMCLHN Board Clinical Governance Committee		
8.2.1	Minutes 26 October 2022	<ul style="list-style-type: none"> ○ Noted the RMCLHN Board Clinical Governance Committee Minutes 26 October 2022 (Draft). 	
8.2.2	Chair's Update	<ul style="list-style-type: none"> ○ The Clinical Governance Committee Chair update: <ul style="list-style-type: none"> ▪ The major topic of discussion related to mock accreditation and general reports. 	
8.3	RMCLHN Board Aged Care and Disability Governance Committee		
8.3.1	26 October Minutes	<ul style="list-style-type: none"> ○ Noted the RMCLHN Board Clinical Governance Committee Minutes 26 October 2022 (Draft). 	
8.3.2	Chair's Update	<ul style="list-style-type: none"> ○ Nil further for Aged Care and Disability Governance Committee Chair update: 	
8.4	RSS Governance Committee		
8.4.1	RSS Governance Committee Minutes	<ul style="list-style-type: none"> ○ The RSS Governance Committee Meeting Minutes 28 September 2022 (approved) were noted. 	

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8.4.2	RSS Representative Update	<ul style="list-style-type: none"> ○ The RSS Governance Committee Meeting Minutes 26 October (draft) were noted. ○ The RSS Governance Committee Meeting Summary 26 October 2022 was noted. ○ The RSS Governance Committee 2023 Meeting schedule was noted. ○ The RMCLHN representative on the RSS Committee update <ul style="list-style-type: none"> ▪ Change of representative for EFNLHN with Board Member Leanne Dunchue replacing CEO Verity Paterson. ▪ Issues regarding GP payments in YNLHN resolved. ▪ Change to meeting schedule for 2023. ▪ IT security review being undertaken regarding LeeCare. ▪ Contract Management presentation noting that LHN CEOs have supported additional resourcing.
9	ITEMS APPROVED BY CEO FOR NOTING - Nil	
10	CORRESPONDENCE	
10.1 10.1.1	Incoming: RDWA Annual Report	<ul style="list-style-type: none"> ○ Noted the incoming correspondence RDWA 2021-22 Annual Report. ○ Noted that RMCLN no longer utilises the RDWA Virtual Emergency Service since the implementation of the RMCLHN service.
10.2 10.2.1	Outgoing: LCLHN – RACE Symposium	<ul style="list-style-type: none"> ○ Noted the outgoing correspondence re RMCHN Rural Generalist Training Program. ○ Discussion about the complexities, underpinning infrastructure and positive relationships that need to be in place for successful implementation of RACE in other LHNs. ○ Noted that a Symposium will be held in February or March 2023 with all LHNs to be invited. The symposium to include a workshop exploring what might be possible in other LHNs and/or how RACE may be able to support other LHNs.

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11 MEETING FINALISATION			
11.1	Questions ./ Comments	<ul style="list-style-type: none">Discussion about the October visit to Raukkan and Meningie with Sharon Wingard apologising for not being able to attend and Board members reflecting on how rewarding the experience had been.	
11.2	Review actions to be taken	<ul style="list-style-type: none">Refer items:1.1, 3.3.2, 5.1, 5.3, 5.5, 6.2.2 and 6.2.3.	
11.3	Meeting evaluation	<ul style="list-style-type: none">PJ summarised the meeting including the need for the Board to be able to articulate knowledge and understanding for accreditation.	

Meeting Close: 2.10 pm

Next Meeting: **Date:** 25 January 2022
Time: 12.30pm –3.00pm
Location: Murray Bridge Hospital (and Teams)

Planning Day: **Date:** 15 December 2022 (Combined Annual Planning Session with Executive)
Time: 9.30am –4.00pm
Location: Rydges Pit Lane Hotel, Taillem Bend

Apologies:

Signed:	
	
	Peter Joyner
	Chair
	25 Jan, 2023 10:47:15 AM GMT+10:30
Date: / /	