

SALHN GOVERNING BOARD

Minutes of the meeting

12 May 2022

8:00 am – 2:35 pm (ACST)

Teal Room 1, RAP Building, Flinders Medical Centre

INVITEES:	
Board Members	SALHN Executive
Mr Mark Butcher (Chair)	Mr Wayne Gadd, Interim Chief Executive Officer
Ms Virginia Hickey	Mr Michael Francese, Chief Workforce Officer
Ms Julie Mitchell	Mr Matt Rooney, Acting Chief Finance Officer
Ms Jill Noble	Ms Sarah Woon, Acting Chief Operating Officer
Ms Jenny Richter	Ms Helen Tedesco, Acting Executive Director Governance & Risk
Dr Tony Sherbon	Ms Sarah McRae, COVID Operations Support
APOLOGIES:	IN ATTENDANCE:
Associate Professor Tamara Mackean	Dr Diana Lawrence Executive Director of Medical Services <i>(for Item 7.0 and 8.0)</i>
Ms Carole Lennon, Board Secretariat	Dr Alison Weightman Medical Lead, Clinical Strategic Projects <i>(for Item 7.0)</i>
	Dr Ryan Bekeris Trainee Medical Officer <i>(for Item 7.0)</i>
	Dr Rekha Ravutha Gounden Trainee Medical Officer <i>(for Item 7.0)</i>
	Mr Justin Prendergast Executive Director of Nursing and Midwifery <i>(for Item 8.0)</i>
	Ms Linda Kohlhagen Executive Director of Allied Health & Intermediate Care Services <i>(for Item 8.0)</i>

8:30 am In-camera discussion

~ The meeting commenced at 9:10 am ~

1. Welcome & Acknowledgement of Country

Mr Butcher opened the Board meeting with the Kaurna Acknowledgement of Country.

Mr Butcher welcomed Board members and all those in attendance to the meeting.

Apologies

The apologies of Associate Professor Tamara Mackean were noted.

While the apologies of the Board Secretariat were noted, the meeting was recorded to allow Ms Lennon to prepare the minutes following the meeting.

Framing of Meeting

The Board Chair and Interim Chief Executive Officer updated the Board on key themes for discussion, including:

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- Sustained high demand for medical and surgical services;
- Ongoing COVID demand;
- Being mindful of the workforce delivering care to our consumers; and
- Threading workforce wellbeing and culture through agenda items.

~ Dr Diana Lawrence, Dr Alison Weightman, Dr Ryan Bekeris & Dr Rekha Ravutha Gounden joined the Board meeting at 9:10 am ~

Agenda items were reordered to enable the Values Moment to occur first, followed by the Accreditation Spotlight.

8. Values Moment | Medical Workforce Wellbeing

The Board Chair welcomed and introduced Dr Diana Lawrence, Dr Alison Weightman, Dr Ryan Bekeris and Dr Rekha Ravutha Gounden to the meeting to discuss the Staff Wellbeing Burnout and Fatigue: Learnings from 'Delivering the Healthy Hospital.'

DECISION: Board Members noted the Medical Workforce Wellbeing paper

Action: Letter of thanks to Dr Weightman, Dr Bekeris and Dr Gounden for attending the Board meeting and presenting their findings
(Assignee: Ms Carole Lennon and Ms Helen Tedesco)

Action: Review of the Health Roundtable App for use in SALHN by the Safety Council
(Assignee: Mr Michael Francese and Dr Diana Lawrence)

~ Dr Weightman, Dr Bekeris and Dr Gounden left the Board meeting at 9:50 am, Dr Lawrence remained, and Mr Prendergast and Ms Kohlhausen joined the meeting ~

7. Spotlight | SALHN Accreditation 2022

The Board Chair welcomed Mr Justin Prendergast and Ms Linda Kohlhausen to the meeting to assist Dr Lawrence and Ms Tedesco in providing the Board with an update on the preparedness for SALHN Accreditation. The Accreditation of SALHN's compliance with the National Safety and Quality Health Service Standards (NSQHSS) is scheduled for 7-11 November 2022. The professional leads provided an overview of the preparation for Accreditation against each of the 8 National Standards. Amongst other things the Board discussed:

- Continuous improvement and focus on improving patient care;
- Impact of ageing Infrastructure and workforce shortages;
- An expectation of the Board for the Executive to notify the Department for Health and Wellbeing and the Minister on SALHN's preparedness for Accreditation; and

DECISION: Noted the 2022 Accreditation Update

DECISION: In principle, Board support, in the lead up to Accreditation, to SALHN Executive for necessary additional resources or assistance

Action: Appropriate level of communication to occur with the Department for Health and Wellbeing and the Minister around SALHN's Accreditation
(Assignees: Mr Wayne Gadd and Dr Diana Lawrence)

Action: SALHN Accreditation to be a standing agenda item until Accreditation occurs
(Assignees: Ms Helen Tedesco and Ms Carole Lennon)

Action: Briefing on the Infection Control External Review to be provided at the June meeting
(Assignees: Ms Helen Tedesco and Ms Carole Lennon)

~ Dr Lawrence, Mr Prendergast and Ms Kohlhausen left the meeting at 10:40 am ~

~ Break at 10:50 am – Board meeting reconvened at 10:55 am ~

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3. Agenda Specific | Undisclosed Declarations of Interest

There were no interests disclosed

4. Starring of items

There were no further items starred for discussion.

5. Minutes of the previous meeting

The minutes of 17 March and 8 April 2022 were approved as a true and accurate record of proceedings.

6. Actions arising from the previous meeting

Actions arising from previous meetings were either completed, on track for delivery by the due date, or addressed for discussion in agenda Items.

DECISION: The Board noted the completed actions and items for discussion as per the agenda

9. Interim Chief Executive Officer (CEO) Report

The Board Chair welcomed Mr Gadd to address the Board. Mr Gadd provided an overview of a number of specific items within his report, namely:

- SALHN is experiencing sustained high demand across all areas;
- An increase in the transfer of care and ambulance offload delays, due in part to a shortage of acute and sub-acute beds;

The Board discussed, amongst other things:

- Statutory governance of DASSA by SALHN;
- Legal governance of DASSA by the Department for Health and Wellbeing;
- Items for discussion with the Minister at an upcoming briefing

DECISION: The Board discussed and noted the content of the Interim CEO Report

10. SALHN Performance

10.1 SALHN Finance Performance Report

Mr Rooney, Acting Chief Finance Officer, provided an analysis of the headline and underlying results for the period, with key highlights including:

- SALHN continues to be significantly impacted by costs associated with the response to COVID-19.
- SALHN's underlying EoY position is \$14.7m unfavourable to budget;
- Activity cost pressures related to elective surgery, obstetrics, neonatal, renal and colonoscopy totalling \$9.4m (of the underlying EoY position of \$14.7m);
- Commissioning discussions and modelling for 2022-2023 have commenced with the Department for Health and Wellbeing.

The Board discussed, amongst other things:

- SALHN's budget performance and the work that has been undertaken to address financial sustainability, including savings targets.

DECISION: The Board discussed and noted the Finance Report

**Action: Commissioning numbers, and the data behind them, to be provided at the 16 June 2022 Board meeting
(Assignees: Mr Wayne Gadd and Mr Matt Rooney)**

**Action: Financial Performance to be an agenda item for the monthly meeting with the Minister for Health and Wellbeing
(Assignees: Mr Wayne Gadd and Mr Matt Rooney)**

10.1.1 SALHN Budget 2021-2022

The Acting Chief Finance Officer, Mr Rooney, provided an update on the 2022-2023 budget process status, which will be analysed against the current budget allocation and spend to highlight any challenges for 2022-2023. Key highlights included:

- The divisional budget meeting has occurred with the Acting Chief Operating Officer and Acting Chief Finance Officer, and a draft bed plan and operational assumptions have been agreed upon to feed into the budget build;
- Budget updates, including initial build and assumptions, will be provided to the Board at the 16 June 2022 meeting;
- In 2021-2022 there had been a significant investment in demand management initiatives, most of which have not been confirmed for 2022-2023. However, for the initial build, most of the demand management initiatives have been assumed to continue;
- Funding for the Repat Health Precinct.

Inter alia, the Board discussed:

- Redesign of the Service Level Agreement with the Department for Health and Wellbeing, with consistent Key Performance Indicators;
- Demand management initiatives;
- Election commitments and funding allocation.

DECISION: **The Board discussed and noted the Budget 2021-2022**

10.2 SALHN Operational Performance report

The Acting Chief Operating Officer, Ms Woon, provided an overview of the operational performance of SALHN, the progress of strategic projects, and a summary of emerging operational issues, including access and flow, elective surgery, priority, and infrastructure projects.

The Acting Chief Operational Officer, Ms Woon, highlighted key discussion items, which included:

- Elective Surgery overdue lists and the work occurring and planning to address;
- McLaren Vale and Districts War Memorial Hospital and SALHN's approach beyond 30 June 2022, and opportunities for stability; and
- Improvement in activity and safety, and quality metrics.

DECISION: **Members noted the SALHN Operations Report February 2022 update**

10.3 SALHN Workforce Performance report

The Chief Workforce Officer, Mr Francese, provided an overview of the workforce performance of SALHN, with key discussion items being:

- In April 2022, an average of 145 staff per day were unable to attend the workplace, equating to 15,500 days lost;
- A range of wellbeing initiatives for staff continues across the Network;
- Fourteen training courses have been adopted as the key focus for the remainder of 2022 in the lead up to Accreditation;

The Board discussed, amongst other things:

- Nursing and Midwifery Enterprise Agreement 2020 nursing ratios;
- Training Medical Officers' health, wellbeing and sustainability; and
- Staff health and wellbeing and fatigue.

~ The Board meeting broke at 12:20 pm to attend the Medical Grand Round ~

~ Board members returned from the Medical Grand Round and reconvened the meeting at 1:36 pm ~

The Board Chair acknowledged the successful attendance of the Minister for Health and Wellbeing at the Medical Grand Round today and the apology of Ms Jill Noble for the remainder of the Board meeting.

10.3.1 Mandatory Training

The Chief Workforce Officer, Mr Francese, sought approval for the Mandatory Training Board Directive, highlighting the mandated training programs identified as an essential suite of training requirements to maintain staff and patient safety at SALHN.

The Board discussed, amongst other things:

- Ensuring Board compliance with mandatory training requirements.

DECISION: Approved the SALHN Mandatory Training Board Directive

DECISION: Endorsed undertaking the necessary Mandatory Training identified for Governing Board members

Action: Overdue Mandatory Training courses and links with CNMER to be circulated to Board members
(Assignees: Ms Helen Tedesco and Mr Michael Francese)

10.4 Monaghan Report | Executive Response and Framework

Mr Gadd, Interim Chief Executive Officer, acknowledged the challenges associated with the Monaghan Report and the feedback received. The focus now needs to be on the Patient Journey Collaboration that will respond to the 19 recommendations and embed the existing Total Quality Care Program improvement work and Department for Health and Wellbeing SPRINT work.

Other key discussion items included:

- Focussing on the Patient Journey Collaboration to implement the 19 recommendations;
- Focussing on workforce wellbeing as part of the Patient Journey Collaboration;
- Emergency Department governance and integrating the Chief Operating Officer role into the Division of Medicine, Cardiac and Critical Care; and

The Board discussed, amongst other things:

- The work to be undertaken to implement the 19 recommendations in the Monaghan Report successfully;
- To prioritise response activities and principles to ensure SALHN's Key Performance Indicators improve;
- The support by the Department for Health and Wellbeing of resources to implement SPRINT work at SALHN; and
- Capturing the Board's decision-making process and learnings learnt from the Southern Health Expansion Plan (SHEP).

DECISION: Endorsed the proposed approach of integrating the Monaghan Report response, existing patient flow improvements under the Total Quality Care Program and the Urgent Care Improvement Sprint within The Patient Journey Collaboration proposed governance

DECISION: Noted and discussed the proposed Patient Journey Collaboration Oversight Committee Terms of Reference, and for them to be a decision making authority

DECISION: Noted and discussed the SALHN and DHW Urgent Care Improvement Sprint that will provide additional support to improve the patient journey

Action: Engagement of Board members with the Interim Chief Executive Officer and Acting Chief Finance Officer in considering the lessons learnt from SHEP
(Assignees: Ms Jenny Richter and Ms Julie Mitchell)

11. Items from Sub-committees

11.1 Clinical Governance Sub-committee

The Chair of the Clinical Governance Sub-committee, Ms Richter, highlighted key themes discussed at the Sub-committee meeting:

- Implementation of the Voluntary Assisted Dying legislation;
- Hospital-Acquired Complications;
- SALHN Accreditation preparation; and
- Repat Health Precinct site governance.

DECISION: Board Members noted the minutes of the Clinical Governance Sub-committee meeting on 14 April 2022

Action: Spotlight on Voluntary Assisted Dying Legislation at the 16 June 2022 meeting (Assignees: Ms Helen Tedesco and Ms Carole Lennon)

11.1.1 Quality Report 2022-2024

The Chair of the Clinical Governance Sub-committee, Ms Richter, provided an update on the SALHN Quality Report 2022-2024 endorsed by the Clinical Governance Sub-committee on 14 April 2022. The Quality Plan sets the direction and key activities required to strengthen the systems to improve the safety and quality of our health care services to our consumers and their families and will be launched in June 2022.

DECISION: Approved the SALHN Quality Plan 2022-2024

DECISION: Noted the intent to invite Board members to an official launch of the Quality Plan 2022-2024 as part of the Clinician Engagement Strategy in June 2022

11.1.2 Board Engagement Opportunities for 2022

The Chair of the Clinical Governance Sub-committee, Ms Richter, provided an update on engagement opportunities for the remainder of 2022 across SALHN to support strategies developed under the Health Care Act. A SALHN Engagement Community of Practice has been created as part of this process, including engagement touchpoints, work priorities, key stakeholders identified for 2022 and awareness days.

The Board discussed, amongst other things:

- Following the engagement opportunities and activities, follow up and feedback should be presented and provided to every Board meeting for noting or appropriate action; and
- How feedback travels through the organisation, connects with the Partnering with Consumers Advisory Group (PwCAG) and to the Board.

DECISION: Noted the current calendar of clinician engagement opportunities and intent to develop a singular engagement calendar to capture awareness days, work priorities and SALHN meetings

DECISION: Board members to be informed by Email on opportunities for engagement strategies

Action: Board members to provide feedback to Ms Helen Tedesco, Acting Executive Director, Governance and Risk, following the engagement opportunities or activities, to ensure follow up and feedback is presented to every Board meeting for appropriate action (Assignees: SALHN Governing Board)

11.1.3 SALHN Integrated Safety and Quality Performance Account for 2021

The Chair of the Clinical Governance Sub-committee, Ms Richter, provided an update on the 2021 SALHN Integrated Safety and Quality Performance Account. All reports are to be endorsed by the SALHN Governing Board before submission.

DECISION: **Approved the Integrated Safety and Quality Performance Account 2021 for submission to the Department for Health and Wellbeing**

11.2 Asset and Infrastructure Sub-committee

This item was discussed as part of in-camera discussions. The Board Chair confirmed that the next Asset and Infrastructure Sub-committee meeting would be moved by two weeks to align with the Federal Election.

DECISION: **The Board noted the Asset and Infrastructure Planning Sub-committee update**

Action: **Asset and Infrastructure Sub-committee to be moved by two weeks to align with the Federal Election (Assignees: Ms Helen Tedesco and Ms Erin Burke)**

11.3 Community Engagement Sub-committee

The Chair of the Community Engagement Sub-committee, Ms Mitchell, provided an update on two items discussed at the 21 April 2022 meeting concerning:

- The method of collecting feedback and information from the wider community and how that information is being used; and
- Consideration of amending the current Terms of Reference to include a broader, integrated engagement approach.

DECISION: **The Board noted the Community Engagement Sub-committee Report**

Action: **Community Engagement Sub-committee to provide an update to the Board on feedback and information collected from the wider community outlining how the information is being used
(Assignees: Ms Julie Mitchell and Ms Helen Tedesco)**

11.4 Audit and Risk Sub-committee

Key discussion items and decisions from the 11 March 2022 Audit and Risk Sub-committee meeting were presented at the 17 March 2022 Board meeting.

DECISION: **The Board noted the Audit and Risk Sub-committee minutes of the 11 March 2022 meeting**

11.5 Nominations and Remuneration Sub-committee

The Board Chair updated the Board on the recruitment process for a Chief Executive Officer and commended Fisher Leadership on their application process.

DECISION: **The Board noted the Nominations and Remuneration Sub-committee Report**

11.6 Demand and Access Sub-committee

The Board Chair updated the Board on the Demand and Access Sub-committee, which was officially dissolved as of 28 April 2022, in favour of establishing an Executive led Monaghan Recommendations Oversight Committee and Working Parties. They will implement the recommendations outlined in the Monaghan Report effectively.

DECISION: **The Board noted the Demand and Access Sub-committee Report**

DECISION: **Noted the minutes of the final Demand and Access Sub-committee meeting held on 28 April 2022, including confirmation of the Sub-committee's dissolution**

12. Items for Noting

12.1 Declarations of Interest Report

DECISION: The Board noted the Interests Report

12.2 Decisions made by Circular Resolution

DECISION: The Board noted the decisions made by circular resolution

12.3 Clinical Incident Briefings

DECISION: The Board noted the Clinical Incident Briefings Report

12.4 Media Report

DECISION: The Board noted the Media Report

12.5 Revised Governing Board Charter

DECISION: The Board noted the Revised Governing Board Charter

13. Correspondence

Items of correspondence sent relating to the Governing Board Chair were noted.

DECISION: The Board noted the correspondence

14. Other Business

14.1 Board | Key Messages

- Board recognises its role in SALHN's efforts to serve our patients, consumers and the community;
- Importance of having an engaged and energised workforce with their health and wellbeing a priority for the Board;
- Board acknowledged the challenges associated with the recruiting and onboarding of new staff;
- Board noted the initiatives highlighted by the Chief Workforce Officer are having a positive impact on staff wellbeing;
- Board looks forward to having a new Chief Executive Officer and filling the other key Executive roles; and
- Board noted the federal election commitments, including Flinders Medical Centre.

Action: Communication to be prepared from the Board to SALHN staff following its meeting
(Assignees: Ms Helen Tedesco)

The Board Chair thanked the work of the Executive, both individually and collectively. They also acknowledged the enormous amount of work by the Executive in preparing the Board meeting papers.

15. Meeting evaluation

16. Next Meeting

The next meeting was confirmed as 16 June 2022 | 08.30 am – 01.30 pm

17. Meeting Close

The meeting was formally closed at 2:35 pm.

The Chair thanked all in attendance for their contribution.



Approved as an accurate record of proceedings
BOARD CHAIR