

# **MINUTES**

## **Riverland Mallee Coorong Local Health Network Governing Board Meeting # 8**

#### Date: Thursday 26 March 2020

#### Time: 1.00 pm – 4.00 pm

### Venue: Video Conference Meeting - Murray Bridge, Berri and Adelaide

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

#### **Apologies:**

Guests: Karen Hollitt, EDON/M for Item 4.1

Secretariat: Jeanette Brown

#### 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                              |
|---|--|--|
| 1. IN CAMERA DISCUSSION                           |  |  |
| 2. MEETING OPENING                                |  |  |
| 2.1 Acknowledgement                               | PJ provided Acknowledgement  |  |
| 2.2 Present and Apologies                         | <ul> <li>PJ, EA, FT, CG, WC, MO, SM, CL, JB</li> <li>Apology: Nil</li> </ul>   |  |
| 2.3 Interests and Conflicts Disclosure            | <ul> <li>Nil conflicts of interest declared.</li> <li>Interests disclosure log updated for FT, MO and CG.</li> </ul>   | The Board update the Interests Disclosure log. |
| 2.4 Confirmation of Minutes from previous meeting | The minutes from the Board Meeting held 27 February 2020     were endorsed.  | The Board endorsed the previous minutes.       |
| 2.5 Review Actions Log                            | <ul> <li>Actions Log Reviewed.</li> <li>Noted that relevant CEO Bulletins to be forwarded to Board members.</li> </ul> |  |

| 3. MATTERS FOR NOTING              |  |   |  |
|------------------------------------|--|---|--|
| 3.1 Chairperson Report             | Report pr  | Report provided summary of Australian Commission on   | Chairperson's Report                       |
|                                    | Safety and<br>and also o                                   | Safety and Quality in Health Care Governance Symposium<br>and also covered current issues and future directions.    | noted.                                     |
| 3.2 Chief Executive Officer Report | <ul> <li>Report highlighted operational issues.</li> </ul> | Report highlighted achievements of RMCLHN and current operational issues.   | CEO Report noted.                          |
|                                    | Noted the response   | Noted the SA Health Integrity Program being implemented in response to the ICAC report on SA Health Governance      |  |
|                                    | although noting tha<br>result of COVID-19.                 | although noting that aspects of the program on hold as a result of COVID-19.  |  |
|                                    | Noted the Departmer  | Noted the opening of the Central Sterilising Services<br>Department (CSSD) at Murray Bridge with work progressing   |  |
|                                    | on demoli  | on demolition of the old administration area in order to  |  |
|                                    | commence<br>Noted that                                     | commence construction of the new emergency department.<br>Noted that the redevelopment does not include funding for |  |
|                                    | Noted that   | an emergency department staffing model.<br>Noted that changes to Renmark emergency services took                    |  |
| 4. PRESENTATION                    |  | errect 20 March 2020.   |  |
| 4.1 COVID-19                       | <ul> <li>In attendal<br/>Midwifery).</li> </ul>            | In attendance Karen Hollitt (Executive Director Nursing and Midwifery).   | The Board noted the update about COVID-19. |
|                                    | WC and k   | WC and Karen Hollitt provided overview of actions to date   |  |
|                                    | and curret   | and current planning in relation to COVID-19 from South   |  |
|                                    | Australia a  | Australia and RMCLHN perspective and discussed potential  |  |
|                                    | projections  | projections and responded to questions.   |  |
|                                    | Ihe aim re     the bealth                                  | I he aim remains to slow the rate to minimise the impact on   |  |
|                                    | who don't  | who don't know they have the virus are the neonle who pose  |  |
|                                    | the greatest risk.   | st risk.  |  |
|                                    | Emergency  | Emergency Management structure noted including Karen  |  |
|                                    | <ul> <li>Potential h</li> </ul>                            | Potential hospital utilisation in Adelaide noted  |  |
|                                    | <ul> <li>Information</li> </ul>                            | nformation related to supply of equipment noted including   |  |
|                                    | personal p   | personal protective equipment (PPE).  |  |
|                                    | <ul> <li>Potential :</li> </ul>                            | Potential service delivery changes to support vulnerable  |  |
|                                    | clients noted.   | .pe   |  |
|                                    | Impact of  | mpact of restrictions to interstate travel on the provision of  |  |
|                                    |  | ocum and agency start noted.  |  |
|                                    | <ul> <li>Noted the staff and m</li> </ul>                  | Noted the impact on staff and GPS and the need to support<br>staff and manage situations flexibly                   |  |
|                                    |  |   |  |

For Official Use Only II-AI Page 2 of 5

| <ul> <li>5. MATTERS FOR DISCUSSION</li> <li>5. MATTERS FOR DISCUSSION</li> <li>5. MATTERS FOR DISCUSSION</li> <li>5.1 RWCLHN NSQHS Accreditation and Aged Care Update</li> <li>5.1 RWCLHN NSQHS Accreditation and Aged Care Update</li> <li>5.1 RWCLHN NSQHS Accreditation and Aged Care Update</li> <li>COVID-19 environment.</li> <li>And acknowledging the work of staff within the current of a separate and Quality Health Care standing in a domain Safety and Quality Health Care standing in a work of staff within the current COVID-19 environment.</li> <li>6.2 Diligent Board Management System</li> <li>6.3 Diligent Board Management System</li> <li>6.3 Other Matters for discussion</li> <li>6.3 Other Matters for discussion</li> <li>6.3 Cher Matters for discussion</li> <li>6.3 Cher Matters for discussion</li> <li>6.3 Cher Matters for discussion</li> <li>7.3 Cher Matters for discussion</li> <li>7.4 Electronic access</li> <li>7.5 Diligent Board Care Cost Care Care Care Cost Care Care Care Care Care Care Care Care</li></ul>   | AT                                   |  | The Board noted the<br>update about NSQHS and<br>ACSQC accreditation. |
|--|--------------------------------------|--|---|
| MATTERS FOR DISCUSSION       Confirmation of National Safety and Quality Health         .1       RMCLHN NSQHS Accreditation and Aged Care Update       Confirmation of National Safety and Quality Health         .1       RMCLHN NSQHS Accreditation and Aged Care Update       Noted that consideration being given to a way of celebia and acknowledging the work of staff within the ct         .1       RMCLHN NSQHS Accreditation and Aged Care Update       Noted that consideration being given to a way of celebia and acknowledging the work of staff within the ct         .2       Diligent Board Management System       Noted that the Aged Care facilities to update and submit he Improvement Plan for Loxfon.         .2       Diligent Board Management System       Discussion about the utilisation of an electronic manage system for the Board and the implementation of the Dil Board Management System       Discussion about the utilisation of an electronic manage system for the Board and the implementation of the Dil Board Management System in other metropolitan regional Local Health Network.         .3       Other Matters for discussion       Discussion about potinon for Solitan regional costs         .3.1 Electronic access       Noted that the Digital Telehealth Network. (DTN experiment Short and short for the Board and the first priority for a medion and be oblicited care.         .3.1 Electronic access       Noted that the Digital Telehealth Network. (DTN experiment Short and short for a medion and on the number of users.  | АТ                                   | -  | The Board noted the<br>update about NSQHS and<br>ACSQC accreditation. |
| <ul> <li>RMCLHN NSQHS Accreditation and Aged Care Update</li> <li>Confirmation of National Safety and Quality Health<br/>Standards (NSQHS) Version 2 accreditation received.</li> <li>Noted that consideration being given to a way of celebil<br/>and acknowledging the work of staff within the cu<br/>COVID-19 environment.</li> <li>Aged Care assessment reports now received.</li> <li>Noted that the Aged Care assessments. These are Quality Comminant<br/>as asked all aged care facilities to update and submit<br/>self-assessments. These are currently being update<br/>acch site along with the Improvement Plan for Loxton.</li> <li>Dilgent Board Management System</li> <li>Discussion about the utilisation of an electronic manage<br/>system for the Board and the implementation of the Di<br/>Board Management System in other metropolitan<br/>regional Local Health Networks.</li> <li>Bibard Maters for discussion</li> <li>Discussion about options for Board members to contin<br/>meet within COVID-19 restrictions.</li> <li>Noted that the Digital Telehealth Network (DTN<br/>experiencing major pressure and the first priority for a<br/>meet vola conting major pressure and the first priority for a</li> </ul>  |                                      |  | The Board noted the<br>update about NSQHS and<br>ACSQC accreditation. |
| <ul> <li>Diligent Board Management System</li> <li>Diligent Board Management System</li> <li>Diligent Board Management System</li> <li>Diligent Board Management System</li> </ul>   |                                      |  | update about NSQHS and<br>ACSQC accreditation.                        |
| <ul> <li>Diligent Board Management System</li> </ul>   |                                      | and acknowledging the work of staff within the current COVID-19 environment.<br>Aged Care assessment reports now received.<br>Noted that the Aged Care Safety and Quality Commission (ACSQC) has ceased site visits in current environment and has asked all aged care facilities to update and submit their self-assessments. These are currently being updated for |   |
| <ul> <li>Diligent Board Management System</li> <li>Diligent Board Management System</li> <li>Diffect Board Management System</li> <li>Diffec</li></ul>   | ••                                   | Aged Care assessment reports now received.<br>Noted that the Aged Care Safety and Quality Commission<br>(ACSQC) has ceased site visits in current environment and<br>has asked all aged care facilities to update and submit their<br>self-assessments. These are currently being updated for  |   |
| <ul> <li>Diligent Board Management System</li> <li>Diligent System</li> <li>Diligent System</li>     &lt;</ul>   | •                                    | Noted that the Aged Care Safety and Quality Commission (ACSQC) has ceased site visits in current environment and has asked all aged care facilities to update and submit their self-assessments. These are currently being updated for   |   |
| <ul> <li>Diligent Board Management System</li> <li>Diligent Board Management System</li> <li>Diffect Board Management System</li> <li>Diffec</li></ul>   |                                      | (ACSQC) has ceased site visits in current environment and<br>has asked all aged care facilities to update and submit their<br>self-assessments. These are currently being updated for  |   |
| <ul> <li>Diligent Board Management System</li> <li>Other Matters for discussion</li> <li>5.3.1 Electronic access</li> </ul>  |                                      | has asked all aged care facilities to update and submit their self-assessments. These are currently being updated for  |   |
| <ul> <li>Diligent Board Management System</li> <li>Other Matters for discussion</li> <li>5.3.1 Electronic access</li> </ul>  |                                      | sell-assessifients. These are currently being updated for  |   |
| <ul> <li>Diligent Board Management System</li> <li>Other Matters for discussion</li> <li>5.3.1 Electronic access</li> </ul>  |                                      | coch cite clone with the Improvidence Dian for Landar  |   |
| Diligent Board Management System Other Matters for discussion 5.3.1 Electronic access  |                                      | -  |   |
| Other Matters for discussion<br>5.3.1 Electronic access  |                                      |  |   |
| 0.11       Control Matters for discussion       In other metropolitan regional Local Health Networks.         • Estimated costs for RMCLHN discussed noting that the will vary depending on the number of users.         • Other Matters for discussion       • Discussion about options for Board members to continue that the Digital Telehealth Network (DTN experiencing major pressure and the first priority for actine that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Noted that teleconferencing is an ontion and also Microw Noted Microw Not |                                      |  | information about the   |
| Other Matters for discussion<br>5.3.1 Electronic access  |                                      | In other metropolitan and  | Ulligent Board  |
| Other Matters for discussion<br>5.3.1 Electronic access  |                                      |  | Management System.  |
| Other Matters for discussion       • Discussion about of meet within COVID         5.3.1 Electronic access       • Noted that the experiencing major needs to be clinica   | •                                    |  | ACTION: JB to organise a  |
| Other Matters for discussion about of meet within COVID meet the experiencing major needs to be clinica more dimination meet the more dimination meet within the telecond method.  |                                      |  | demonstration of the<br>Diligent system.                              |
| meet within COVID     Noted that the     experiencing major     needs to be clinica     Noted that telecon   |                                      | +  |   |
| <ul> <li>Noted that the Digital Telehealth Network (DTN)<br/>experiencing major pressure and the first priority for acce<br/>needs to be clinical care.</li> <li>Noted that teleconferencing is an option and also Micros</li> </ul>   | 5.3.1 Electronic access              |  | ACTION: Microsoft Teams   |
| experiencing major pressure and the first priority for acce<br>needs to be clinical care.     Noted that teleconferencing is an option and also Micros   | •                                    |  | Learning package to be  |
| Ineeds to be clifical care.     Noted that feleconferencing is an option and also Micros   |                                      |  | developed for Board   |
|  |                                      |  | Mernbers.   |
|  | ,                                    |  |   |
| 6. STANDARD AGENDA ITEMS FOR DISCUSSION  | TANDARD AGENDA ITEMS FOR DISCUSSION  |  |   |
| 6.1 Performance Report • The RMCLHN February Performance Reports were noted.   |                                      | -  | The Board noted the   |
| 6.1.1 Finance and FTE Report- PPRC     6.1.1 Finance and FTE Report- PPRC  | 6.1.1 Finance and FTE Report- PPRC   | e -  | RMCLHN Performance  |
| KPI Monthly Performance Report   | 6.1.2 KPI Monthly Performance Report | minimee meeting with all   | Kepolis.  |

For Official Use Only II-AI Page 3 of 5

| <ul><li>6.1.3 People and Culture Report</li><li>6.1.4 Quality and Safety Reports</li><li>6.1.5 Other</li></ul> | <ul> <li>Noted the recommendation from the Finance Committee to commence an escalated approval process for the utilisation of agency staff in aged care.</li> <li>Noted that a specific COVID-19 cost centre established.</li> <li>Discussion about options related to financial performance review noting that RMCLHN remains on quarterly performance meetings with the Department for Health and Wellbeing (DHW) while metropolitan LHNs performance results in more frequent performance meetings.</li> <li>CEO responded to questions in relation to the KPI Report.</li> </ul> | ACTION: Specific briefing<br>to be provided about<br>strategies in relation to<br>Aboriginal self-discharges. |
|--|--|---|
|  | <ul> <li>Noted the update about the RMCLHN Strategic Plan process<br/>including consultation to date about the draft statement of<br/>purpose and values.</li> </ul>   | The Board noted the<br>Strategic Plan process<br>update.  |
| 6.3 Board Consumer and Community Engagement Strategy   | <ul> <li>Discussion about the draft Consumer and Community<br/>Engagement Strategy with minor suggestions about wording.</li> <li>Noted the current COVID-19 environment will impact the<br/>consultation phase.</li> <li>Determined to proceed but then review the Plan in 12<br/>months (and thereafter every three years).</li> <li>Subject to minor changes, the draft Strategy endorsed for<br/>broader consultation.</li> </ul>  | The Board endorsed the<br>draft Consumer and<br>Community Engagement<br>Strategy for consultation.            |
| 6.4 Board Clinician and Workforce Engagement Strategy  | <ul> <li>Discussion about the draft Clinician and Workforce Engagement Strategy with minor suggestions about wording.</li> <li>Noted the current COVID-19 environment will impact the consultation phase with different strategies for providing feedback identified.</li> <li>Determined to proceed but then review the Plan in 12 months (and thereafter every three years).</li> <li>Subject to minor changes, the draft Strategy endorsed for broader consultation.</li> </ul>   | The Board endorsed the draft Clinician and Workforce Engagement Strategy for consultation.                    |
| 7. MATTERS FOR DECISION  |  |   |
| 7.1<br>• MATTEDS FOR MICOMMENDIN   | • Nil  |   |
| 8.1<br>1.0   | Noted the draft Minutes of February 2020.  | The Board noted the draft   |
| 8.2 RMCLHN Board Audit & Rick Committee Minutes  | Meeting deferred to March 2020.  | Minutes.  |
|  |  |   |

# For Official Use Only II-AI Page 4 of 5

|  | ł   |   |
|--|---|---|
| 0.3 CRECKIST FOR INTERIM BOARD Appointments  | <ul> <li>Noted the information from DHW about the management of<br/>any interim LHN Governing Board vacancies and the roles<br/>and responsibilities of the Minister's Office, DHW and the<br/>LHN.</li> </ul>  | The Board noted the<br>information about interim<br>Board vacancies.  |
| 9. ITEMS APPROVED BY CEO FOR NOTING  |   |   |
| 9.1 COVID-19 related changes   | <ul> <li>Noted that RMCLHN has an Emergency Management a structure in place and rapid decisions may be required in relation to service delivery changes to support vulnerable consumers and the community.</li> <li>Noted that some changes may be directives from the Prime Minster, Premier, SAPOL or DHW.</li> <li>Any proposed change that is outside the normal delegations of the CEO will be discussed with the Board Chair</li> </ul> | The Board noted the decision making process associated with COVID-19. |
| 10. CORRESPONDENCE   |   |   |
| 10.1 Incoming  | • Nil   |   |
| 10.2 Outgoing  | • Nil   |   |
| 11. MEETING FINALISATION   |   |   |
| 11.1 Questions / Comments  |   |   |
| 11.2 Review actions to be taken  |   |   |
| <ul><li>11.3 Meeting Evaluation</li><li>11.3.1 Suggestions for next meeting Agenda items</li><li>11.3.2 Board Evaluation process</li></ul> | PJ summarised the meeting.  |   |
| 11.4 Next meeting  | Date: Thursday 30 April 2020  |   |
|  | Time: 11.00 – 2.30 pm   |   |
|  | Location: Mannum (tbc)  |   |
| 11.5 Meeting Close   |   |   |
| Signed:  |   |   |
| Peter Joyner<br>Chair  | $\searrow$  |   |
| Date: So 1 4 20  |   |   |
|  |   |   |

For Official Use Only II-AI Page 5 of 5