

Central Adelaide Local Health Network Governing Board

Meeting: 7 February 2024

MINUTES

Item No.	Item	Discussion	Action No.
	Meeting Opening Acknowledgement of Country	Marni ngadlu tampinhi Ngadlu Kurna yartangka inparrinhi Ngadlu tampinhi Kurna Purkarna kumu Miyurna iya yalaka	
1.1	Welcome Attendance of Board members: In attendance: Invited guests: Apologies:	<p>The meeting commenced at 9.32am with the Chair welcoming all Governing Board members and meeting attendees.</p> <p>Professor Mohamed led a welcome to country sharing her personal connection to the land, followed by a heartfelt tribute to the late Dr Lowitja O'Donoghue following her recent passing. Dr Lowitja O'Donoghue, a Yankunytjatjara woman, strived for social justice, equity and better health outcomes for Aboriginal and Torres Strait Islander peoples. Dr O'Donoghue fought to become the first Aboriginal trainee nurse at the Royal Adelaide Hospital in 1954 (bringing along six of her friends) where she worked for over a decade. Most notably, Dr O'Donoghue was appointed the founding chairperson of the Aboriginal and Torres Strait Islander Commission (ATSIC). A remarkable leader of change, her legacy has left an indelible mark on Australia's history.</p> <p>Mr Raymond Spencer (Chair), Professor Judith Dwyer, Mr Peter Hanlon, Professor Christine Kilpatrick, Professor Janine Mohamed, Mr Rick Perse (Department Treasury and Finance) attended until 12.30, Dr Peter Subramaniam (Observer).</p> <p>Dr Emma McCahon (Chief Executive Officer), Dr Kathryn Zeitz (Deputy Chief Executive Officer), Ms Kellie Schneider (General Counsel), Mr Chris Preston (Executive Director, Finance and Business Services), Ms Michelle Sorensen (Manager, Board and Intergovernmental Relations).</p> <p>Ms Naomi Heinrich (Program Director, Critical Care and Perioperative) and Professor Guy Ludbrook (Professor Anaesthesia - <i>attended for item 2.1</i>), Ms Rachel Kay (Executive Director Operations and Performance – <i>attended for item 6.3</i>).</p> <p>Professor Justin Beilby, Ms Ingrid Haythorpe.</p>	
1.2	Conflict of Interest Disclosures	No conflicts of interest were declared.	



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1.3	Confirmation of Agendas / Any Other Business	Members confirmed the agenda, no other business was raised.	
1.4	Confirmation of Previous Minutes	Members endorsed the minutes from the previous meeting, held 6 December 2023.	
1.5	Action List	The members noted the progress status of several action items. History regarding the December 2022 action item was provided with the plan to discuss further with the new Chief Executive Officer.	
1.6	Welcome / Introduction new CEO	<p>The Chair thanked the Deputy Chief Executive Officer for leading and supporting the organisation throughout the recruitment period and for her dedication and hard work as interim Chief Executive Officer during an extremely busy time. The Chair also acknowledged the well-received ramping presentation recently provided to Health Cabinet Committee on behalf of the metropolitan Chief Executive Officers.</p> <p>The Chair welcomed our new Chief Executive Officer to her first Governing Board meeting, recognising the energy she brings to CALHN and her enthusiasm for new opportunities. The Chief Executive Officer highlighted her busy start to the role with several meetings with the department and Minister over the past week and a half, as well as her attendance at the new Trainee Medical Officer orientation on Monday. Immediate priorities for the Chief Executive Officer centre around clinician engagement and understanding the organisation, requesting some time for a shared vision and plan to be provided to the Board members in the future.</p>	
2	<i>Connection to Purpose</i>		
2.1	SA Health Awards	<p>The Program Director Critical Care and Perioperative Services, and Professor of Anaesthesia attended for this item.</p> <p>The Advanced Recovery Room Care (ARRC) initiative was presented to the Board noting the team were the recent recipients of a SA Health award on 17 November 2023.</p> <p>The ARRC initiative, supported by research-based evidence, has seen a rigid process design implemented to improve the immediate post operative care for medium risk patients who would have previously been taken to the ward post operatively. Data monitoring over the past 18 months shows the ARRC model results in faster hospital and rehabilitation discharge, fewer emergency department presentations or re-admissions and lower mortality. The success of the project has resulted in a sustainable and budgeted 10 bed model freeing approximately 9000 bed days per year across the organisation.</p> <p>The board thanked the team for the excellent presentation recognising the commitment, courage, and persistence taken to drive the implementation of the model.</p>	
3	<i>Chief Executive Officer Report</i>		
3.1	CEO Insights Report	The Deputy Chief Executive Officer thanked the Board for entrusting her over the past five months as the interim Chief Executive Officer, specifically the Chair who has provided both personal and professional support throughout this time.	

		<p>An overview of the report was provided including a summary of CRIPS grants, budget bids, alignment of Specialty Medicine 1 with Heart and Lung Clinical Program following a 14-month project, progress of CALHN's data strategy and the recent trauma verification process which successfully led to the Royal Adelaide Hospital being verified as a Level 1 Trauma Centre.</p> <p>The Deputy Chief Executive Officer reflected on several achievements during her time as interim Chief Executive Officer which, amongst many other things, saw the launch of the Clinical, Research and Consumer strategies, the management of the three major digital incidents and implementing different ways of staff engagement across the organisation. The board recognised the significant effort shown to close the loop on several matters and create a clearer path for the new Chief Executive Officer.</p> <p>The Board chair thanked the Deputy Chief Executive Officer again and informed the Board of an extension to financial delegations for one month to support the transition period for the new Chief Executive Officer.</p>	
4	Strategic Discussion		
4.1	2024-25 Annual Plan	<p>The Executive Director Finance and Business Services spoke to this item.</p> <p>The paper outlines the process and timeline for developing CALHNs 2024-25 annual plan as endorsed by the Financial Performance and Investment Committee (FPIC) in January 2023. The draft plan is due in March and the final plan at the end of June. Whilst the financial components are a large part of the plan, workforce engagement is critical to translating the objectives of the organisation.</p> <p>The Board discussed the improvements made in the planning process last year with executive reporting a much better understanding of and involvement in the process. Despite this, the Board highlighted the need for a longer-term financial strategy to underpin the development of the annual plan/s, requesting that the Board is involved early in setting the key priorities of the organisation.</p> <p>The chair requested the timeline presented in the papers is changed from FPIC to the Governing Board, with an extra-ordinary Board Meeting to occur in May to approve the plan.</p> <p><i>ACTION: An agenda item is added to the April Board meeting to enable the Board and executive to set the organisations key priorities.</i></p> <p><i>ACTION: An extra line is added to the financial planning table between 'Draft plan' and 'Final plan' to include an extra-ordinary Board meeting to occur in May to approve the draft plan.</i></p>	<p>01.</p> <p>02.</p>
5.0	Committee Reports		
5.1	Clinical Governance and Consumer Engagement Committee	<p>The Chair was an apology for the Board meeting. Professor Kilpatrick provided an overview of the core discussions held during the meeting on the 31 January 2024 noting it was the first combined Clinical Governance and Consumer Engagement committee. The Cardiothoracic Surgery Clinical Service plan has been completed with the help of Destravis aligning well with the Clinical Strategy. The plan has several service directions including future growth, responding to indigenous populations to ensure equitable access, and developing highly specialised services including heart transplant and mechanical</p>	

		heart assisted devices not currently undertaken in South Australia. The committee endorsed progression of the plan to the Department of Health and Wellbeing. The Access to Care taskforce will commence closer work with the Mental Health program to better understand access to care delays for mental health consumers. The committee also noted the mandatory training rates were a concerning risk for accreditation.	
5.2	People and Culture	Nil to report	
5.3	Audit and Risk Committee	The Chair was an apology for the Board meeting.	
5.4	SCSS Committee Report	The Chair reported the Minister supports Michael Luchich to take over as Chair of the SCSS Committee from July.	
6.0	<i>Matters for Update and Discussion</i>		
6.1	Finance Report	The Executive Director Finance and Business Services presented the Finance Report as at the end December 2023 highlighting the forecasted end of year adjusted performance against the annual plan. A brief overview of the strategies occurring to address the challenges were provided across several business areas noting detailed presentations were provided by the responsible executive during the Financial Performance and Investment committee the previous week. The Executive Director Finance and Business Services highlighted that a review of the new financial approach is currently occurring to understand lessons learnt. The Board discussed the report and requested scenarios be provided to better understand the performance for the rest of the financial year comparing the current expenditure and activity against the planned uplift activity. <i>ACTION: Scenarios to be provide to the FPIC outlining the projected impact of the current uplift activity.</i>	03.
6.1.3	Financial Performance and Investment Committee (FPIC)	The Executive Director Finance and Business Services provided a summary of the FPIC report noting the discussion was largely as per the two previous finance items (finance report and annual planning report). Acknowledging the significant amount of work that has gone in to improving the data and analytics reporting, a general discussion occurred around providing more insight into the root cause for areas of decline. The board recognised a timely opportunity to re-think how we manage the committee agreeing that the meeting occurrence will remain monthly. The Chair suggested that all Board members be invited to the next committee meeting to facilitate the discussion. <i>ACTION: Invite all Board members to attend the March FPIC.</i>	04.
6.2	Access to Care Taskforce	The Executive Director Operations and Performance attended for this item.	

		<p>The Deputy Chief Executive Officer presented an overview of the work led by the metropolitan Chief Executive Officers to better understand the drivers to ramping since 2018 (as presented to Health Cabinet Committee).</p> <p>The data provided an informative analysis across the state highlighting that while presentations have decreased over time, the length of time spent in the emergency departments has increased likely due to complexity and supported by the increasing numbers of higher triage categories. From a CALHN perspective, similar data analytics is planned for both sites to enable further data interrogation to occur.</p> <p>The Executive Director Operations and Performance provided an overview of the report noting that four of the six core Key Performance Indicators related to the work being led in the Access to Care Taskforce. A review of the workplan in October 2023 identified key projects planned to occur in the next six months falling into three main pillars of focus: Avoid and Redirect, Improving Throughout and Increasing Output.</p> <p>Discussion ensued around an evaluation and planned uplift of the hospital avoidance service and progressing with the Mental Health Co-responder trial with the South Australian Police. Ongoing work continues in the roll out early discharge, noting improvements in length of stay and bed occupancy in December.</p>	
6.3	AusHealth Update	The Executive Director Finance and Business Services provided an overview of the report which was noted by the members.	
7.0	Board Reflections and Conclusion	Board members reflected on the meeting acknowledging the continual benefit of having such empowering connection to purpose presentations. There was a general sense of optimism as we approach the next financial year under the leadership of the new Chief Executive Officer	
8.0	Executive Session	The Board held an Executive Session with the Chief Executive Officer and both the Executive Director Finance and Business Services and the Legal Counsel (for part of the session).	
9.0	Executive Session	The Board held an Executive Session with the Board members only.	
Meeting Close			
10.0		<p><i>Meeting closed at 3:30pm</i></p> <p><i>The next planned Board meeting is scheduled for the 3 April 2024 to occur at The Queen Elizabeth Hospital.</i></p>	

Signed:

Mr Raymond Spencer, Chair

Date: 3 April 2024