

**LIMESTONE COAST LHN
GOVERNING BOARD
MEETING MINUTES**

Meeting Date: 31 May 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: David Kortum, External (Independent) Member of the LCLHN Audit & Risk Committee (DK)
Dr Christopher McGowan, Chief Executive, SA Health (CMc)
Jayel van den Hurk, Acting Director of Governance and Planning, LCLHN (JV)

Secretariat: Emily Baker, Senior Administration Officer, Governance & Planning (EB)

IN CAMERA SESSION		
Item		Discussion
		IN CAMERA SESSION – 11:30am – 12:00pm
1.	MEETING OPENING	
Item		Discussion
1.1	Acknowledgement of Country	GK provided the Acknowledgement of Country.
1.2	Apologies	Nil apologies were provided.

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		It was noted that Dr Christopher McGowan, Chief Executive, SA Health (CMc), and Jayel van den Hurk, Acting Director of Governance and Planning, LCLHN (JV) would be joining the meeting at 2:10pm.
1.3	Introduction	GK provided an introduction to the meeting of the Limestone Coast Local Health Network (LCLHN) Governing Board.
1.4	Director Conflict of Interest Disclosures	Nil Conflicts of Interest disclosed.
1.5	Confirmation of previous meeting minutes and actions	The minutes of the meeting held on 27 April 2021 were noted, and were accepted, via Out of Session approval, as a true and accurate reflection of the meeting held. An update on actions was provided.
2.	BOARD CHAIR REPORT	
2.1	Report from Grant King, Board Chair	<p>GK provided an update in relation to key topics discussed during recent meetings between the various regional Local Health Network (rLHN) Chief Executive Officer's (CEOs) and regional Governing Board Chairs, and with the Minister for Health and Wellbeing (MHW), including:</p> <ul style="list-style-type: none">• The progression of Ministerial Appointments for vacant positions and reappointments of positions to the LCLHN Governing Board, including the anticipated commencement of an Aboriginal Health Expert from 1 July 2021.• Workforce pressures, including the anticipated increase in demand on the Aged Care sector as funding and care models continue to evolve, in line with recommendations from the Royal Commission inquiry into Aged Care.• Investigations into industry planning for regional areas, and the collaborative response between the rLHN's in relation to the ongoing devolution of the Rural Support Service (RSS). <p>An update was provided on the commencement of staff consultation, via online platforms, to support the development of the LCLHN Clinician and Staff Engagement Strategy, and planning in progress for face to face consultations with Governing Board members to visit various health sites across the Limestone Coast in early June 2021.</p>

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3.	LIMESTONE COAST LHN REPORTS	
3.1	<p>CEO Report</p> <p>a) General update</p>	<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 formalising the funding support for the Keith and District Hospital (KDH) by the LCLHN from 1 January 2021 to 31 December 2022, and additionally for the LCLHN to recruit a project lead to support the transition to a Primary Health Care Hub model for the Keith community from 1 January 2023.</p> <p>The Governing Board resolved to continue to collaborate with the KDH Board, and the project lead, to ensure ongoing consultation and engagement with the Keith community throughout the transition process.</p> <p>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:</p> <ul style="list-style-type: none"> • A recent meeting of the MGPH Board, attended by the LCLHN Director of Governance and Planning, to provide a progress update in relation to a review of the recharge schedule. • The purpose of the review of the recharge schedule to ensure clarity and transparency for both parties, and to provide an evidenced-based calculation to support funding discussions. <p>An update was provided in relation to the recent border closures in response to the recent outbreak of COVID-19 in Victoria, and the implications for staff, including:</p> <ul style="list-style-type: none"> • Work progressing in collaboration with SA Police (SAPOL) to ensure that staff who reside within the cross border community zone are able to enter the region for work. • To ensure prioritisation of border exemption applications for LCLHN staff where possible. <p>The COVID-19 Vaccination program was discussed, and progress updates were provided on key areas, including:</p> <ul style="list-style-type: none"> • The transfer of the COVID-19 vaccination clinic from the Mount Gambier and Districts Health Service (MGDHS) to Mount Gambier Central

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		<p>Shopping Centre, providing Pfizer vaccinations for people aged 16-50 years.</p> <ul style="list-style-type: none">• The commencement of a COVID-19 vaccination clinic at the Penola Multi-Purpose Site (MPS), providing AstraZeneca vaccinations for people aged over 50 years, and work progressing to increase clinic opening times. <p>An update was provided in relation to additional key topics, including:</p> <ul style="list-style-type: none">• Staff and employee association negotiations for a new Enterprise Agreement for staff covered by the South Australian Public Sector Wages Parity Enterprise Agreement: Weekly Paid 2017, and the potential interruptions to Business as Usual (BAU) with industrial action.• The recent completion of the audit against the National Disability Insurance Scheme (NDIS) Standards with the LCLHN receiving one recommendation to be addressed, and confirmation provided that an action plan has been completed and returned to support this recommendation.• A recent surveillance accreditation against Aged Care Standards at Sheoak Lodge in Millicent, with all standards met and no recommendations to address. The Positive feedback received from residents at Sheoak Lodge and their families was highlighted.• The success of a recent Cultural Immersion for LCLHN senior leadership staff members, hosted by Uncle Ken in Port MacDonnell on Boandik Country and with planning to host an additional session to be extended to the LCLHN Governing Board underway.• Acknowledgement was provided for the exemplary stewardship provided by Angela Miller, during a recent term in the role of Chief Executive Officer, LCLHN.• A current quality improvement (QI) project, led by Dr Elaine Pretorius, Executive Director of Medical Services (EDMS), LCLHN, for an 8-week period, to address three key areas including:<ul style="list-style-type: none">○ System approach for the medical patient's journey○ Diabetes management○ Coding activity and processes
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		<ul style="list-style-type: none">• Dr John Menzies providing backfill in the position of EDMS during the QI project period, and acknowledgment for his wealth of knowledge and experience in Health was provided.• Attendance by Glenn Brown, Governing Board Member, LCLHN, Ngaire Buchanan, CEO, LCLHN, and Jennie Jacobs, Executive Officer / Director of Nursing (EO/DON) & Aged Care Lead, LCLHN, at a recent Aged Care Strategy Consultation Workshop, hosted by SA Heath, to develop a strategy to address key priority areas in Aged Care over the next 12 months and beyond. <p>An update was provided in relation to the provision of surgical services to the LCLHN by a cohort of general surgeons, with the contract previously managed by Country Health SA, and with new contractual arrangements required for the LCLHN to engage directly with the group.</p>
	b) Performance Reporting Summary March 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 \$2.7m unfavourable to budget.• The EOY forecasted result being inclusive of allowable variances:<ul style="list-style-type: none">○ \$1.8m in relation to COVID-19 net Year to Date (YTD) expenditure.○ \$1.1m in relation to adjustment to the allocation for depreciation of assets for the current budget period.• Taking into account allowable variances, the LCLHN is forecasting a 'breakeven' EOY result.• Planning and preparation for the 2021-2022 Budget Period, including work progressing to address Aged Care budgeting models.• Expenditure relating to Grant Funding received in the 2020-2021 budget period, with a report detailing the utilisation of funds, anticipated for completion in early in July 2021, to be provided to the Governing Board. <p>Confirmation was provided that the LCLHN Interim Financial Statements 2020-2021 had been received and were provided to the LCLHN Audit and Risk Committee (ARC), at the meeting held on 31 May 2021, with the intention for circulation to the Board, following review and approval by the ARC.</p>
	c) Key Performance Indicator (KPI) Summary March 2021	<p>The Key Performance Indicator (KPI) Summary for February 2021 was noted, and key points were discussed, including:</p>

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		<ul style="list-style-type: none">• The potential to improve the presentation of data through further refinement of the existing reporting model.• Common themes identified in Aged Care reporting, including opportunities for improvement relating to training and staff knowledge• Issues with rural and remote sites, and the need to ensure smaller population areas continue to have access to, and are engaging in, services provided by the LCLHN.
	d) Private Hospital Funding Arrangements	An update was provided in relation to a planned meeting between the KDH Board, LCLHN Board members and key LCLHN leadership staff to be held in Keith, to ensure transparency, and to support a collaborative approach, to planning for the transition to a Primary Health Care Hub at the site.
4.	ENGAGEMENT STRATEGIES	
4.1	Engagement Strategy Update	<p>An update was provided on the Clinician & Staff Engagement Strategy (CSES), including confirmation that the initial consultation via online workshops in May had been successful, with the majority of feedback received from non-clinical staff members and management personnel.</p> <p>Confirmation was provided that planning was in progress for further workshops, via face-to-face sessions, with Governing Board members to visit seven key sites throughout the LCLHN in early June, providing an alternate method of engagement in an attempt to capture feedback from more clinicians and other non-administrative staff members, and others who may not prefer to engage by electronic methods.</p> <p>An update was provided in relation to the completion of the Consumer, Carer & Community Engagement Strategy (CCCES), included at Item 8.1 under Matters for Approval.</p>
5.	GOVERNING BOARD COMMITTEE UPDATES	
5.1	Audit & Risk Committee Summary	<p>Highlights from the Audit & Risk Committee meeting, held 31 May 2021, were provided, including:</p> <ul style="list-style-type: none">• New contractual arrangements required for the provision of general surgical services provided to the LCLHN.

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		<ul style="list-style-type: none">• Changes to Integrated Compliance processes for reporting and the establishment of a community of practice, comprising of representatives from each rLHN.• Planning in progress for a workshop to review and update the LCLHN Risk Appetite Statement and discuss outcomes from the recent Committee Evaluation.• Confirmation of committee endorsement for the draft correspondence to escalate the extreme risk posed to the LCLHN by CHIRON to the Chief Executive, SA Health.• The recent Sunrise system issues in relation to medication dosage, with the diligence of nursing staff resulting in no adverse outcomes for the LCLHN.• Receipt of the Interim Financial Statements 2020-21, for review and endorsement from the committee, prior to being disseminated to the Governing Board.
5.2	Clinical Governance Committee Summary	<p>An update was provided by the Clinical Governance Committee (CGC) Chair, including:</p> <ul style="list-style-type: none">• A report provided to the ARC on 31 May 2021, seeking feedback in relation to updated reporting models, including improved scorecard and dashboard reporting.• Issues in relation to credentialing to be included on the agenda for the next meeting of the CGC, to be held in July 2021.• Risk identified in relation to Mental Health demands on Emergency Departments (EDs), and the implications for ED security and reputational risk.• Risk identified in relation to General Practitioner (GP) workforce accountability regarding performance management systems.• The desire of the CGC to seek assurance from the MGPH via a reciprocated Clinical Solvency Statement each quarter.• Positive feedback received in relation to the quality of current LCLHN Scorecard and Dashboard reporting, in particular the format for General Medicine and NDIS scorecard reports, following recent shared learning discussions between LHNs.• Ongoing refinement of Scorecard and Dashboard reporting models.

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		RESOLUTION The Board provided endorsement for correspondence to be drafted from the LCLHN CEO to the MGPH Board, seeking reciprocated quarterly Clinical Solvency Statement's to be communicated between both parties, providing assurance for both entities regarding compliance with all standards in relation to the safe and quality provision of care.
5.3	Finance & Performance Committee Summary	An update was provided by the Finance & Performance Committee Chair, including: <ul style="list-style-type: none">• Anticipation for an overall EOY result that is favourable to budget, taking into consideration the balance for allowable variances and the balance allocated for depreciation of assets.• Current result of more than 1000 National Weighted Activity Units above the Key Performance Indicator (KPI) target for the 2020-2021 budget period.
6.	STRATEGIC PLANNING	
6.1	Strategic Planning Update	A progress update was provided in relation to the development of the LCLHN Strategic Plan 2021-2023, including confirmation that a draft had recently been circulated for feedback by the Governing Board, and by the Executive Leadership team and with a further workshop scheduled on 1 June 2021 to progress the plan.
7.	MATTERS FOR DISCUSSION	
7.1	Governing Board Self Evaluation 2021	The draft LCLHN Governing Board Self Evaluation Survey 2021 was noted. RESOLUTION The Board endorsed the updated Governing Board Self Evaluation Survey for 2021, and supported the Survey to be circulated Out of Session (OOS) for completion via the Diligent Questionnaire portal and with a summary of results to be compiled for discussion at the July meeting of the Governing Board.
7.2	LCLHN Risk Escalation – CHIRON	The extreme risk posed by the legacy system CHIRON, managed by Digital Health SA, as the main patient administration system used by the LCLHN was

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		<p>discussed, and draft correspondence to the Chief Executive of SA Health in relation to the issue was noted.</p> <p>RESOLUTION</p> <p>The Governing Board acknowledged that the risk to the LCLHN posed by CHIRON was outside of the organisation's risk appetite and was beyond the LHNs ability and capacity to mitigate further. The draft correspondence to the Chief Executive, SA Health, seeking to formally escalate the risk was endorsed.</p>
8.	MATTERS FOR APPROVAL	
8.1	LCLHN Consumer, Carer & Community Engagement Strategy 2021-2024	<p>Dr Chris McGowan, Chief Executive of SA Health joined the meeting of the LCLHN Governing Board.</p> <p>An update was provided in relation to the development of the LCLHN Consumer, Carer & Community Engagement Strategy (CCCES) 2021-2024, and an overview was provided in relation to the consultation process undertaken.</p> <p>Consideration for cross border community members during service planning, and engagement activities, was discussed.</p> <p>Dr McGowan provided his support for the CCCES.</p> <p>RESOLUTION</p> <p>GK expressed congratulations to the Engagement Strategy Development Working Group for the work completed to bring together the LCLHN Consumer, Carer & Community Engagement Strategy 2021-2024, on behalf of the Governing Board, and approval was provided.</p>
9.	LCLHN SERVICE IMPERATIVES 2021 – 2024	
9.1	LCLHN 2021-24 Service Imperatives Briefing	<p>An overview was provided in relation to the LCLHN 2021-24 Service Imperatives, and key points from the report were discussed, including:</p> <ul style="list-style-type: none">• A key focus on providing services close to home, leveraging the Hub and Spoke model with Mount Gambier being the 'hub' at the centre, providing

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		<p>services out to the 'spoke' sites in other locations across the Limestone Coast region.</p> <ul style="list-style-type: none">• The desire to provide services for consumers across the continuum of care, reducing the need to transfer patients to metro sites.• Work progressing to investigate the viability of an ambulatory care model, aiming to optimise health outcomes and improve the patient experience whilst reducing healthcare costs.• The Fellowship of the Australasian College for Emergency Medicine (FACEM) consultant led model of care for the MGDHS, and all other health sites in the LCLHN under a GP led model of care arrangement. <p>Dr Chris McGowan provided support for further investigation to understand the number of Limestone Coast residents who access services in metropolitan sites, including via patient transfer or by consumer choice, and to explore options to improve access to services close to home.</p> <p>The need to investigate options to support the MGPH with the provision of services for the Limestone Coast region was discussed, with Dr McGowan offering to connect LCLHN key personnel with subject experts to further explore best practices where private services are co-located with public services.</p> <p>The Governing Board provided acknowledgement of the support provided by SA Health to the various LHNs during the COVID-19 pandemic.</p>
10.	MATTERS FOR NOTING	
10.1	LCLHN Payment Performance Report April 2021	The LCLHN Payment Performance Report April 2021 was noted.
10.2	LCLHN Late Payments of Interest (LPI) April 2021	The LCLHN Late Payments of Interest (LPI) April 2021 were noted.
10.3	Finance & Performance Committee Agenda 31 May 2021	The Finance & Performance Committee Agenda 31 May 2021 was noted.

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10.4	Audit & Risk Committee Agenda 31 May 2021	The Audit & Risk Committee Agenda 31 May 2021 was noted.
10.5	Clinical Governance Committee Minutes 27 April 2021	The draft Clinical Governance Committee Minutes 27 April 2021 were noted.
10.6	Finance & Performance Committee Minutes 27 April 2021	The Finance & Performance Committee Minutes 27 April 2021 were noted.
10.7	LCLHN Audit Mandate & Strategy 2020-21	The LCLHN Audit Mandate & Strategy 2020-21 was noted.
11.	OTHER BUSINESS	
11.1	Governing Board Briefing: Procurement of cleaning wipes by MGDHS	<p>A recent procurement process in relation to the supply of cleaning wipes for the MGDHS was discussed, including recent correspondence received from the local Member of Parliament in support of the previous supplier.</p> <p>RESOLUTION</p> <p>The Governing Board resolved to investigate the situation with the previous provider, to ensure that the process for tender was transparent and equitable.</p>
11.2	Governing Board Briefing: Bordertown Health Hub	<p>An update was provided in relation to a recent meeting attended by the Director of Corporate Services, LCLHN, and the CEO, Tatiara District Council, in relation to the proposed Bordertown Health Hub (BHH), and consideration for co-locating some LCLHN services on the site.</p> <p>Difficulties with integrating a fit for purpose site for Country Health Connect (CHC) staff within the proposed BHH was discussed.</p> <p>RESOLUTION</p> <p>The Governing Board provided endorsement to progress with plans for the construction of a fit for purpose site for Country Health Connect (CHC) on site at the Bordertown Memorial Hospital, utilising the approved grant funding of \$2m for the project.</p> <p>The Governing Board resolved to continue to investigate the viability of integrating future LCLHN services within a Bordertown Health Hub, and to</p>

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		arrange a face to face meeting with representatives from the Tatiara District Council in early June to further discuss the matter.
11.3	Any other business	AM extended gratitude, on behalf of the LCLHN Leadership Team, to the Governing Board for their commitment and investment and the extensive amount of travel to attend meetings that had been completed in the month of May.
12.	MEETING EVALUATION AND CLOSE	
12.1	Meeting Evaluation	HM provided an evaluation of the LCLHN Governing Board Meeting.
12.2	Next Meeting & location	28 June 2021
12.3	Meeting Close	4:00 pm