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**Government  
of South Australia**

**EYRE AND FAR NORTH LOCAL HEALTH  
NETWORK INC  
2021-22 Annual Report**

Eyre and Far North Local Health Network Inc  
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2021-22 ANNUAL REPORT for Eyre and Far North Local Health Network Inc

To:

Hon Chris Picton MP

Minister for Health and Wellbeing

This annual report will be presented to Parliament to meet the statutory reporting requirements of *the Public Sector Act 2009*, *the Public Finance and Audit Act 1987* and *the Health Care Act 2008* and the requirements of Premier and Cabinet Circular *PC013 Annual Reporting*.

This report is verified to be accurate for the purposes of annual reporting to the Parliament of South Australia.

Submitted on behalf of the Eyre and Far North Local Health Network by:

Verity Paterson  
Chief Executive Officer  
Eyre and Far North Local Health Network

Date: 30 September 2022      Signature



Michele Smith  
Chair Governing Board  
Eyre and Far North Local Health Network

Date: 30 September 2022      Signature



## From the Board Chair

The Board and I are very proud of what the Eyre and Far North Local Health Network (EFNLHN) has achieved in 2021-22. In the face of the biggest public health challenge of our lifetime, the COVID-19 pandemic, staff have lived our values of being responsive, caring and accountable to our local communities and consumers.



Our strong relationships with communities, GP's, local leaders and consumers have made such a significant difference, enabling us to adapt and tailor a centralised health response to local needs, guided by the knowledge and connections of our fantastic staff on the ground.

At different times, when COVID reduced our staff on the ground, we have had to temporarily shut Emergency Departments, implement essential visitor programs at aged care facilities, and ramp up our vaccination and swabbing efforts to meet demand, and in all kinds of weather.

On behalf of the Board, I would like to recognise and pay tribute to the work of local staff and contractors, many of whom went well beyond what was asked or expected of them. Thank you.

I would also like to formally thank our State and local partners and stakeholders – including GPs, Pharmacists, local government, Aboriginal health organisations, emergency services, the South Australian Ambulance Service, Royal Flying Doctor Service and SA Pathology - without whom the ability to cover such an enormous geographical area and have access to skilled people, infrastructure, and other supports, would not have been possible.

To patients, consumers, families and carers, a heartfelt thanks for your patience, understanding and support as arrangements changed and at times, families, carers and friends were not able to visit loved ones in person.

While COVID-19 dominated the headlines, the LHN continued to deliver services to remote and rural communities to a high standard and for the second year running, EFNLHN was the best performing of the 10 Local Health Networks that make up SA Health.

The Board wishes to thank our Chief Executive, Verity Paterson, the Executive Team, the Directors of Nursing and the leadership of Community and Allied Health, Aboriginal Health, Mental Health and the corporate functions, for this achievement, which would have been remarkable at any time but has been made even more so by the challenging circumstances of the past year.

I would also like to thank each Member of the Governing Board for your skilled, authentic, community-centred and caring approach throughout the year, with such a

clear focus on protecting the health and wellbeing of both consumers and staff within our Local Health Network.

We have made steady progress this year with putting the architecture in place to achieve a more sustainable medical workforce. This work includes the introduction of a salaried doctors' model at Port Lincoln Hospital and work to set up the training and support arrangements needed for the cohort of salaried junior doctors who will start at Port Lincoln Hospital in February 2023, including the creation of new Clinical Director positions.

Most General Practitioners (GPs) in our region have signed up to the new South Australian Rural GPs Agreement, which offers significantly better remuneration and recognises factors unique to practising in a country setting.

Work is also ongoing both with the Northern Eyre Peninsula Health Alliance, and by the Board itself, to design long-term, sustainable approaches to the provision of GP services and to simplify and improve how doctors are recruited and retained.

A notable area of improvement has been Aboriginal participation in our workforce, meeting and exceeding the target of 4 per cent. Given that people who identify as members of Aboriginal nations make up more than 12 per cent of the Eyre and Far North population, we still have some way to go to ensure our workforce is truly representative of the communities we serve. We have started an LHN-wide cultural awareness program, including a Board immersive cultural experience, as part of continuing to build a culture of tolerance and respect, and a reputation as an employer that welcomes and supports Aboriginal and Torres Strait Islander staff.

This has been a year that has tested the Board and LHN leadership, and we don't underestimate the toll it has taken on staff and their families. As we move into our fourth year, we will continue to listen to staff and prioritise their health and wellbeing, so they, in turn, can support our local communities and consumers.



Michele Smith

**Board Chair**

Eyre and Far North Local Health Network

## From the Chief Executive Officer

I am pleased to present the 2021-22 Annual Report from the Eyre and Far North Local Health Network (EFNLHN).

This has been an immensely challenging year and when I look back, I continue to be in awe of what we have achieved across our organisation.

For the first half of the year, our focus was on COVID-19 prevention and protection, particularly through our comprehensive vaccination program. A small number of positive cases were managed in the community. Then, in November 2021, the State borders re-opened and COVID-19 entered our communities and health facilities. Fear and apprehension in local communities was high.

I cannot praise enough the courage and skill of the EFNLHN workforce, who stepped up and adapted to new ways of working in our hospitals, aged care facilities and in the community, our COVID-19 testing staff working in rain or shine, supporting people, making them feel cared for, informed and safe.

Our Incident Management Team managed the overall local response and did a fantastic job, and my Executive team did an exemplary job over the year.

I particularly want to highlight those local efforts, staff going over and above what was asked of them and acknowledge the impact this had on staff and their families and friends. This commitment and dedication is a hallmark of how EFNLHN responded to the COVID-19 pandemic.

We also received amazing support from our local partners and stakeholders, particularly the Aboriginal Health Services and District and Aboriginal Community Councils, and I thank them for their willingness to assist, sometimes at short notice, and their ability to come up with creative and flexible solutions.

Away from COVID-19, EFNLHN was rated the best performing Local Health Network in South Australia for the second year in a row, with excellent practice recognised as finalists at the SA Health Awards, and through \$5 million in Commonwealth grants awarded to upgrade our aged care facilities (Multi-Purpose Service sites).

I would like to highlight a fantastic piece of work by our Chief Finance Officer, who forensically reviewed our budget and the models and assumptions that underpin it, and through expert advocacy, highlighted opportunities for reform and improvement. The result has been a much-improved Budget for 2022-23.

We continued to work with local communities and consumers to look at local health service needs, finalising a service plan for the Ceduna Hospital and Health Service and starting work on a service plan for Coober Pedy and surrounding communities.



This planning will inform future planning and allocation of resources, based on local feedback.

Significant progress was also made over the year to put in place arrangements to support a more sustainable medical workforce. We started the process of introducing salaried doctors at Port Lincoln Hospital, to work on both the wards and in the Emergency Department and re-engaged with local GPs to provide invaluable support.

We created a medical Director Clinical Education Services role that will oversee a Medical Education Unit to support medical student and junior Doctor training at Port Lincoln, and through rotations through other hospitals and GP practices. In addition, the Director Clinical Services role will strengthen our services through supporting rostering, links with GP surgeries and clinical reviews.

In Nursing, we created and recruited to a Nursing training and development role and have significantly increased our number of trainee nurses in the Transition to Professional Practice Program. We also introduced new senior nursing positions to strengthen emergency and mental health care in the Port Lincoln Emergency Department.

In Community and Allied Health, we recruited a new Executive Director and approved a new management structure to strengthen clinical governance and improve our responsiveness to consumers.

All these initiatives are designed to ensure we can continue to deliver high-quality and safe services to patients and consumers in our hospitals, aged care facilities and in the community.

I am proud of the work we have done this year to support and encourage people who identify as members of Aboriginal nations to come and work for us or consider a career in health and/or aged care. This work is in its early stages and progress is promising, but there are still barriers that we need to address and I am committed to improving the cultural safety of the LHN for both consumers and staff.

Finally, I would like to thank the EFNLHN Governing Board for their wisdom and support. In a challenging year, they have kept a strong focus on staff and consumer safety and wellbeing, provided clear guidance and been flexible and adaptable when circumstances have changed quickly. We have forged a strong partnership and I look forward to working with them to continue to improve how we support the health and wellbeing of our local communities.



Verity Paterson

**Chief Executive Officer**

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## Overview: about the agency

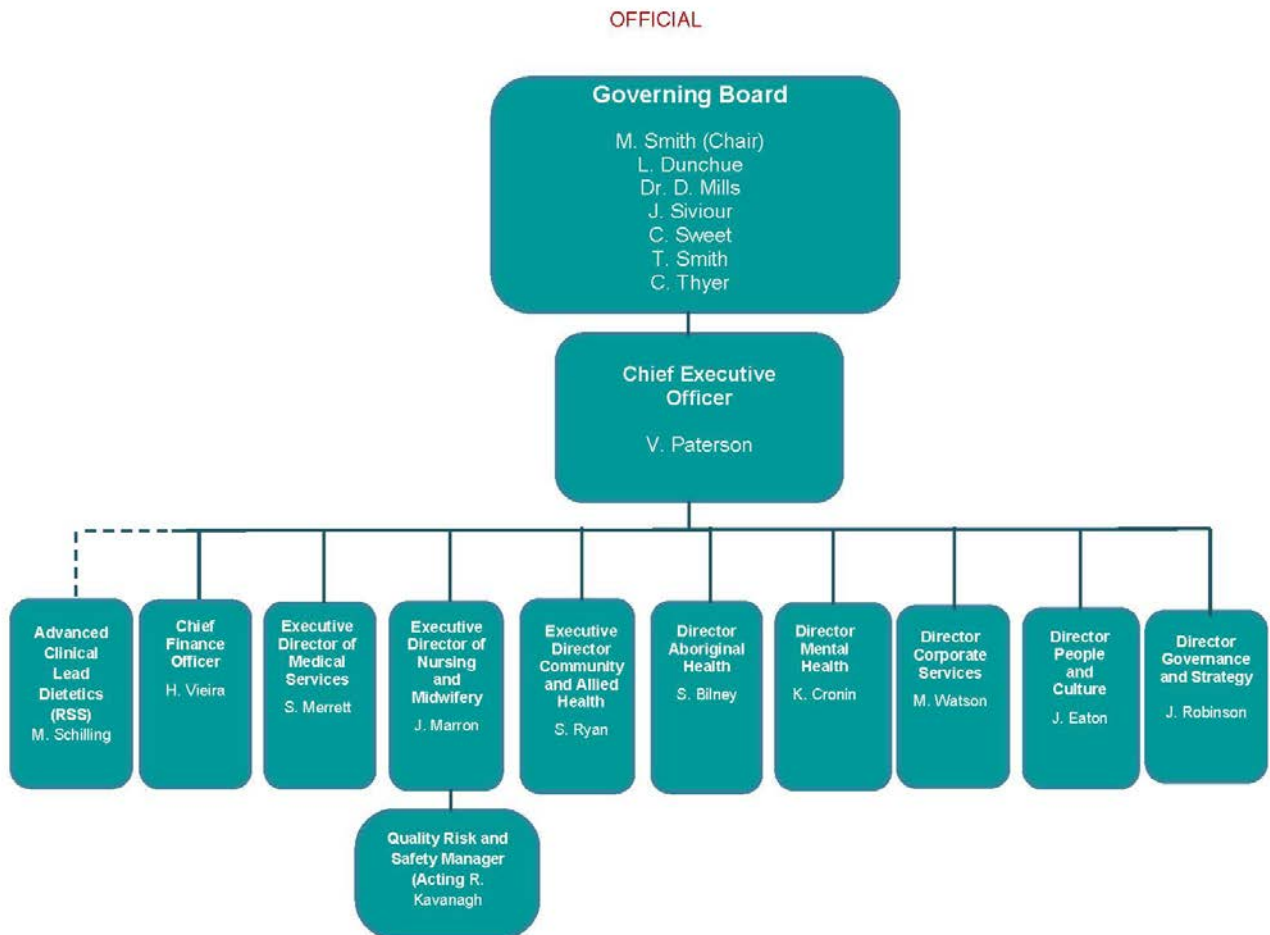
### Our strategic focus

<b>Our Purpose</b>	To drive exceptional health and aged care services across the Eyre and Far North
<b>Our Vision</b>	A trusted provider of accessible, responsive, and innovative health, disability and aged care services to support the wellbeing of our diverse communities
<b>Our Values</b>	Accountability, Connected, Respect, Caring
<b>Our functions, objectives and deliverables</b>	<p>The Eyre and Far North Local Health Network provides hospital and community-based services including aged care, community health, disability and mental health to residents of the Eyre and Far North.</p> <p>The LHN's strategic objectives are:</p> <ul style="list-style-type: none"> <li>• Responsive Service and Care – we will deliver safe, innovative and consumer-focused services and care</li> <li>• Skilled, Supported and Sustainable Workforce – we will develop a positive, inclusive, respectful, and caring culture that supports our workforce to deliver responsive services and care</li> <li>• Aboriginal Health is Everyone's Business – we will better meet the needs of Aboriginal people and prioritise partnerships to progress the health and wellbeing outcomes for Aboriginal communities</li> <li>• Interconnected Mental Health Services – we will be responsive in meeting the need for mental health services and care in our communities</li> <li>• Vibrant Aged and Disability Care – we will provide personalised, accessible, and adaptable aged and disability care</li> </ul> <p>The LHN's key deliverables are:</p> <ul style="list-style-type: none"> <li>• Providing safe, high-quality health, aged care, community and mental health services</li> <li>• Involving consumers, communities and clinicians in the design, planning and improvement of services</li> <li>• Ensuring patient care respects the ethnic, cultural and religious rights, views, values and expectations of all people</li> </ul>

	<ul style="list-style-type: none"> <li>• Ensuring the health needs of Aboriginal people are considered in all health plans and programs</li> <li>• Meeting legislative, regulatory and Department for Health and Wellbeing policies and agreements.</li> </ul>
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**Our organisational structure**

The Eyre and Far North Local Health Network (EFNLHN) is led by a Governing Board which is accountable to the Minister for Health and Wellbeing. The Chief Executive Officer is accountable to the Governing Board and leads an Executive Team as described in the organisation chart below.



**Changes to the agency**

During 2020-21 there were no changes to the agency’s structure and objectives as a result of internal reviews or machinery of government changes.

**Our Minister**

The Hon Chris Picton MP is the Minister for Health and Wellbeing in South Australia.

The Minister oversees health, wellbeing, mental health, ageing well, substance abuse and suicide prevention.



**Michele Smith, Chair of the Governing Board**

Michele is the Chief Executive Officer of the North Eastern Community Hospital and previously spent 11 years as the Regional Director of the Eyre and Far North Region for Country Health SA Local Health Network. Michele maintains registration as a Registered Nurse and is a Fellow of the Australasian College of Health Service Management. She has close family connections to the Eyre and Far North.



**Leanne Dunchue, Governing Board Member**

Leanne is the finance expert on the Board. She is a self-employed Public Accountant living in Streaky Bay, with previous experience in the banking sector. She holds a Bachelor of Commerce, is a Fellow of the Institute of Public Accountants and a Graduate of the Australian Institute of Company Directors.



**Dr David Mills, Governing Board Member**

David is the medical expert on the Board. He has worked as a GP on the Eyre Peninsula since 1988 and is a committed undergraduate and postgraduate teacher. He has worked in the Port Lincoln Aboriginal Health Service, served on the Eyre Regional Health Board and at the time of his appointment, was Associate Professor and Director of the Adelaide Rural Clinical School at the University of Adelaide.



**Jamie Siviour, Governing Board Member**

James is the consumer expert on the Board. He is a self-employed cropping and livestock farmer from Lock on the Centre Eyre Peninsula. He was awarded a Medal of the Order of Australia in 2018 for services to the local community with an emphasis on rural health. Previously he has been involved with the Port Lincoln Hospital Inc Board, the Port Lincoln Health Advisory Council and the Lock Health Centre Advisory Committee. He is a Justice of the Peace and a Graduate of the Australian Institute of Company Directors.



**Chris Sweet, Governing Board Member**


Chris is the legal expert on the Board. He is a partner with Finlayson's law firms, with extensive experience in health professional disciplinary matters, claims management, clinical risk management and coronial inquests. He served as an independent member of the Clinical Risk and Audit Committee of the Women's and Children's Health Network from 2010 to 2018.



**Trevor Smith, Governing Board Member**

Trevor works as a consultant to Regional Development Australia (Eyre Peninsula) and has a long history working in local government, including as Chief Executive Officer of the District Council of Tumby Bay. Trevor was Independent Chair of the Northern Eyre Peninsula Health Alliance (NEPHA) and did not take up reappointment when his term ended late in 2021-22.



<p><b>Christine Thyer, Governing Board Member</b></p> <p>Christine (Chris), a proud Ngarrindjeri woman, is General Manager of the SA Aboriginal Education and Training Consultative Council and previously worked at the Women’s and Children’s Health Network Centre for Education and Training, including on the development and implementation of staff cultural competencies training.</p>	
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**Our Executive team**

<p><b>Chief Executive Officer</b> Verity Paterson is accountable to the Governing Board for the provision, management and administration of health services and achieving the overall performance of the Eyre and Far North Local Health Network.</p>
<p><b>Executive Director, Nursing and Midwifery</b> Julie Marron is responsible for the delivery of Nursing and Midwifery professional services and is Executive lead for residential aged care services and quality, risk and safety.</p>
<p><b>Executive Director, Medical Services</b> Dr Susan Merrett is responsible for the professional leadership of and practice standards for medical services.</p>
<p><b>Executive Director, Allied and Community Health</b> Sharon Ryan is responsible for Allied and Community Health Services which provide a wide range of community, home and hospital-based services covering community health, aged and disability care.</p>
<p><b>Chief Finance Officer</b> Hudson Vieira is responsible for the delivery of comprehensive financial services and reporting, as well as the provision of strategic financial advice and leadership.</p>
<p><b>Director, Aboriginal Health</b> Sharon Bilney is responsible for the management of Commonwealth and State Aboriginal health contracts as well as Aboriginal Health programs and providing strategic advice and leadership.</p>
<p><b>Director, Corporate Services</b> Malinda Watson is responsible for corporate and business services that support the effective and safe operation of health units across the LHN.</p>
<p><b>Director, Governance and Strategy</b> Jane Robinson is responsible for governance, including the operations of the Board and Office of the CEO, and is the Executive lead for strategy, performance, communications, and project management.</p>

**Director, Mental Health Services**

Kathryn Cronin is responsible for the delivery of mental health services within the LHN.

**Director People and Culture**

Joanne (Jo) Eaton is responsible for Human Resources, workforce services and strategies, strengthening culture and leading organisational development within the LHN.

**Manager, Quality Risk and Safety (QRS)**

Rebecca Kavanagh is responsible for the quality, risk and safety function, supporting sites and services to provide safe and quality consumer-focused care that is also compliant with national and state standards and requirements. This position reports to the Executive Director of Nursing and Midwifery.

**Legislation administered by the agency**

Nil.

**Other related agencies (within the Minister's area/s of responsibility)**

Department for Health and Wellbeing

Central Adelaide Local Health Network

Flinders and Upper North Local Health Network

Limestone Coast Local Health Network

Northern Adelaide Local Health Network

Riverland Mallee Coorong Local Health Network

Southern Adelaide Local Health Network

Women's and Children's Health Network

Yorke and Northern Local Health Network

South Australian Ambulance Service



## The agency's performance

### Performance at a glance

In 2021-22 Eyre and Far North LHN achieved key performance areas including:

- Meeting targets for all emergency department 'seen on time' triage categories.
- Meeting targets for emergency department patients who left at their own risk.
- Meeting all elective surgery timely admissions and overdue patient categories.
- Meeting all targets for Safe and Effective Care including SAB and MRSA infection rates.
- Achieving targets in safety and quality performance indicators including hand hygiene compliance rates and hospital acquired complications rates.
- Delivering services tailored specifically to the needs of local Aboriginal populations such as the Aboriginal Family Birthing Program, Trachoma Program and Aboriginal Community and Consumer Engagement Strategy.
- Significantly expanding the delivery of community, in-home and disability services under the Country Health Connect brand.
- All sites accredited under the Australian Council Healthcare Standards.
- All sites accredited under National Disability Insurance Scheme Practice Standards.

### Agency response to COVID-19

EFNLHN's COVID response continued to be managed day-to-day by an Incident Management Team, which responded promptly to changes to State Emergency Management Directions and Commonwealth requirements, like Aged Care COVID responses - additional workforce plans, infection control plans and training requirements.

EFNLHN's vaccination team delivered a vaccination program at clinics in Port Lincoln, Ceduna and Coober Pedy, and through mobile clinics across a vast geographical footprint, taking on board changes and additions to the program, including the introduction of Pfizer vaccinations, additional booster doses, and expansion of the age groups which could be vaccinated. The Port Lincoln Hospital pharmacy stored and dispensed over 30,000 COVID vaccination doses in 2021-22.

In November 2021, the State borders reopened and COVID-19 entered local communities and health services. EFNLHN worked with local partners and stakeholders to communicate extensively messaging about living safely with COVID.

Commonwealth, State and local planning had anticipated the spread of COVID, with most patients planned to be cared for either in Adelaide or by centrally-operated services. Three EFNLHN hospitals were designated for COVID-19 patients (Port Lincoln, Ceduna and Coober Pedy) and supports put in place for the most vulnerable members of local communities to be cared for, including monitoring at home.

However, due to demand, EFNLHN set up a local COVID Care Response Team to ensure a timely local response and provide face-to-face services when required. The deep connections and relationships that EFNLHN staff have to local communities ended up being the key to the LHN's response, enabling a good understanding of challenges, concerns, and family connections.

LHN staff also supported the medi-hotel (Emu Farm) set up at Ceduna.

In aged care, EFNLHN worked with local communities, aged care residents and their families and friends to keep its aged care facilities free of COVID-19 until almost the end of the financial year. Only a small number of facilities ended up having to be locked down; EFNLHN implemented the Essential Visitor Programs to minimise the impact of lockdowns on visits and supported residents and their families to connect in other ways, including using social media platforms.

EFNLHN also ran an extensive testing (swabbing) program, with nursing and support staff out in all weathers, including at sites in Port Lincoln, Ceduna and Coober Pedy, often with staff from Aboriginal Community Controlled Health Services, who played an invaluable role in the LHN's COVID response.

Strong partnerships with General Practitioners, Pharmacists, local councils, emergency services and health partner organisations like the South Australian Ambulance Service, Royal Flying Doctor Service and SA Pathology, were also key to the LHN's COVID response in the Eyre and Far North.



**Agency contribution to whole of Government objectives**

Key objective	Agency's contribution
More jobs	Addition of: <ul style="list-style-type: none"> <li>• Director Clinical Education Services (medical)</li> <li>• Nursing Divisional Director – Workforce Development</li> <li>• Nurse Practitioner – Emergency Medicine</li> </ul>
Lower costs	Costs for consumers were reduced through delivering programs such as: <ul style="list-style-type: none"> <li>• COVID-19 testing at home.</li> <li>• COVID-19 vaccinations close to home.</li> <li>• Timely elective surgery.</li> <li>• Increasing access to Telehealth services, including for specialist consultations.</li> <li>• Home-based chronic disease monitoring.</li> </ul>
Better Services	EFNLHN has delivered: <ul style="list-style-type: none"> <li>• 6.0 per cent increase in Home Care Packages, Aboriginal clients accessing those services remains steady.</li> <li>• Third renal Chair at the Ceduna Renal Unit, and the Aboriginal Health Practitioners Delivering Dialysis Program to support a culturally safe dialysis service at Ceduna.</li> <li>• Salaried medical model at Port Lincoln Hospital with the introduction of a Clinical Director role and development of a Medical Education Unit to support junior doctor training</li> </ul>

**Agency specific objectives and performance**

<b>Agency objectives</b>	<b>Indicators</b>	<b>Performance</b>
Improving access to health services in our community	<ul style="list-style-type: none"> <li>• Specialist nursing and allied health activity service activity</li> <li>• In-Home Support service activity</li> <li>• Potentially preventable admissions for all sites</li> <li>• National Disability Insurance Scheme (NDIS) program activity</li> </ul>	<ul style="list-style-type: none"> <li>• 4,113 clients and 38,217 occasions of service in 2021-22</li> <li>• 1,316 clients and 56,331 occasions of service in 2021-22</li> <li>• 9.1% potentially preventable admissions, in 2021-22; an increase/ from 7.2% in 2020-21</li> <li>• 203 clients and 7,666 occasions of service in 2021-22</li> </ul>
Hospital services	<ul style="list-style-type: none"> <li>• Emergency departments seen on time</li> <li>• Elective surgery (ES) timely admissions</li> <li>• Acute inpatient activity</li> </ul>	<ul style="list-style-type: none"> <li>• Targets met across all triage levels</li> <li>• Targets met across all triage levels</li> <li>• 1,207 ES same day patients, 52 ES overnight patients,</li> <li>• 292 babies delivered (for whole of Eyre and Far North LHN in 2021-22)</li> <li>• 8,199 total acute admitted for whole of Eyre and Far North LHN in 2021-22</li> </ul>
Continuous improvement of quality and safety	<ul style="list-style-type: none"> <li>• Safety assessment code (SAC) 1 and 2 incidents</li> </ul>	<ul style="list-style-type: none"> <li>• 28 SAC 1 and 2 incidents, with 1921 patient incidents reported compared with 2083 the previous year. SAC 1 and 2 incidents accounted for 1.34% of all incidents reported</li> </ul>

	<ul style="list-style-type: none"> <li>• Hospital acquired complications (HAC)</li> </ul>	<ul style="list-style-type: none"> <li>• 0.6% of total overnight episodes where one or more HAC's were present; a decrease from 1.0% on the previous year</li> </ul>
<p>Aboriginal Health</p>	<ul style="list-style-type: none"> <li>• Aboriginal Health – Left ED at own risk</li> <li>• Aboriginal Health – left against medical advice (inpatient)</li> <li>• Aboriginal percentage of workforce</li> <li>• Trachoma</li> <li>• Trichiasis</li> </ul>	<ul style="list-style-type: none"> <li>• 0.8% (target less than 3%); an improvement from the previous year</li> <li>• 7.65% (target less than 4.5%); a decrease from 24.22% the previous year, Port Lincoln site has increased to 5.35% from 2.3% last year.</li> <li>• Target of 4% met, an increase from 3.43% at 30 June 2021</li> <li>• 722 Aboriginal children aged 1 to 14 years old were screened for trachoma in SA, which includes 371 (87%) Aboriginal children aged 5 to 9 years old during 2021</li> <li>• 8 Aboriginal children aged 1 to 14 years old were diagnosed with active trachoma, including 7 (1.9%) Aboriginal children aged 5 to 9 years old</li> <li>• The overall prevalence of active trachoma in Aboriginal children aged 1-14 years screened was 1.1 %.</li> <li>• 1,013 Aboriginal Adults aged 15 years and over living in the communities identified as being “at risk” were screened for</li> </ul>

		<p>trichiasis, including 532 (30%) Aboriginal adults aged 40 and over.</p> <ul style="list-style-type: none"> <li>• 1 Aboriginal adult aged 40 years and over was diagnosed with trichiasis. The patient was referred to the eye specialist.</li> <li>• The prevalence of trichiasis in adults aged 15 years and over was 0.1%</li> </ul>
Improving Mental Health Outcomes	<ul style="list-style-type: none"> <li>• Restraint incidents per 1,000 bed days</li> <li>• Seclusion incidents per 1,000 bed days</li> <li>• Percentage of Mental Health clients seen by a community health service within 7 days of discharge</li> </ul>	<ul style="list-style-type: none"> <li>• Not applicable</li> <li>• Not applicable</li> <li>• Not applicable</li> </ul>
Aged Care	<ul style="list-style-type: none"> <li>• Residential aged care occupancy</li> <li>• Aged Care Assessment Program (ACAP) assessments</li> <li>• Home Care Package occupancy rates</li> <li>• Commonwealth Home Support Program (CHSP) client numbers</li> </ul>	<ul style="list-style-type: none"> <li>• Average occupancy over 2021-22 89.1%</li> <li>• 443 assessments completed</li> <li>• Occupancy rates increased from 168 to 179 between July 2021 and June 2022</li> <li>• 1,408 CHSP clients providing 25,989 occasions of service, enabling older people to remain independent in their own home for longer</li> </ul>

**Corporate performance summary**

The Eyre and Far North Local Health Network achieved key performance outcomes including:

- Highest (Level 1) performance against Department for Health and Wellbeing annual contract achieved and maintained for a second year running.
- Three-year accreditation against National Safety and Quality Health Service Standards at all sites achieved.
- Accreditation against the National Disability Insurance Scheme accreditation standards achieved, the only regional LHN to achieve accreditation with no unmet actions.
- Large number of staff supported to pursue professional development opportunities.

**Employment opportunity programs**

Program name	Performance
Skilling SA	EFNHN supported 7 Aboriginal people in partnership with CEG to undertake Cert III in Health Administration training to provide them with skills and experience to gain employment.
Growing Leaders	EFNLHN supported 6 employees to undertake the Growing Leaders Program.
Manager Essentials	Via the SA Leadership Academy, EFNLHN supported 2 staff to undertake this program.
Enrolled Nurse (EN) Cadets	<p>Cadets commenced at Cleve, Wudinna, Kimba, Ceduna, Elliston and x commenced at Coober Pedy.</p> <ul style="list-style-type: none"> <li>• 2 EN Cadets commenced (1 x Cummins and 1 x Streaky Bay)</li> <li>• 3 EN Cadets completed (2 x Coober Pedy and 1 x Ceduna)</li> </ul>
Transition to Professional Practice Program (TPPP)	<p>14 Registered Nurses and 0 Registered Midwives commenced employment as TPPP's within EFNLHN.</p> <p>2 RNs and 2 RMs commenced at Ceduna</p> <p>4 RNs and 2 RMs commenced at Port Lincoln</p> <p>1 RN commenced at Kimba</p> <p>1 RN commenced at Cowell</p>

1 RN commenced at Wudinna	
2022 TPPP Numbers	
Site	Confirmed TPPPs
Ceduna	3
Cleve	1
Coober Pedy	0
Cowell	0
Cummins	0
Elliston	1
Kimba	2
Port Lincoln	4
Streaky Bay	1
Tumby Bay	1
Wudinna	1
Total	14

**Agency performance management and development systems**

Performance management and development system	Performance
Performance review and development supports continuous improvement of the work performance of employees to assist them to meet the organisation's values and objectives.	<ul style="list-style-type: none"> <li>85.19% of staff had an annual performance review and development discussion.</li> <li>56.71% of staff had a 6-monthly performance review and development discussion.</li> </ul>
EFNLHN has a strong commitment to the recruitment and retention of Aboriginal employees, striving to continue to build	As at 30/06/22, 4.02% of employees within the Eyre and Far North Local Health Network identified as Aboriginal & Torres Strait Islander.

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workforce capacity and capability to achieve a positive impact on the care provided to Aboriginal patients and families within a culturally safe environment.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Health Ancillary (Weekly Paid)</td> <td style="text-align: right;">14</td> </tr> <tr> <td>Non Award</td> <td style="text-align: right;">6</td> </tr> <tr> <td>Nurses Award</td> <td style="text-align: right;">7</td> </tr> <tr> <td>Public Sector Salaried</td> <td style="text-align: right;">23</td> </tr> </table>	Health Ancillary (Weekly Paid)	14	Non Award	6	Nurses Award	7	Public Sector Salaried	23
Health Ancillary (Weekly Paid)	14								
Non Award	6								
Nurses Award	7								
Public Sector Salaried	23								
Mandatory Training Compliance	As at 30/06/22, EFNLHN identified 57% compliance.								
Criminal History & Relevant Screening	As at 30/06/22, EFNLHN identified 97.21 compliance.								
Flu Vax	As at 30/06/22, EFNLHN identified 67% compliance.								
Immunisation Compliance	As at 30/06/22, Immunisation Compliance was: Cat A – 100% Cat B – 100% Cat C – 100%								

**Work health, safety and return to work programs**

Program name	Performance
Prevention and management of musculoskeletal injury (MSI)	EFNLHN recorded 16 new MSI claims in 2021-22, 2 more than in 2020-21, an increase of 14%. MSI claims remained the same as in the previous year. New MSI claims accounted for 53% of new claims submitted.
Prevention and management of psychological injury	1 new PSY claim were received in 2021-22, 6 less than the previous year of 7 claims, a decrease of 86%. PSY claims accounted for 3% of new claims.
Prevention and management of slips, trips and falls (ST&Fs)	9 new STF claim received in 2021-22, 5 more than the previous year. New STF claims accounted for 30% of new claims.

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<b>Workplace injury claims</b>	<b>Current Year 2021-22</b>	<b>Past Year 2020-21</b>	<b>% Change (+ / -)</b>
Total new workplace injury claims	30	32	-6.0%
Fatalities	0	0	0.0%
Seriously injured workers*	0	0	0.0%
Significant injuries (where lost time exceeds a working week, expressed as frequency rate per 1000 FTE)	0 (recalculated on correct LTIF basis for 2022)	0 (restated)	0.0%

\*number of claimants assessed during the reporting period as having a whole person impairment of 30% or more under the Return to Work Act 2014 (Part 2 Division 5)

<b>Work health and safety regulations</b>	<b>Current year 2021-22</b>	<b>Past year 2020-21</b>	<b>% Change (+ / -)</b>
Number of notifiable incidents ( <i>Work Health and Safety Act 2012, Part 3</i> )	0	0	0%
Number of provisional improvement, improvement and prohibition notices ( <i>Work Health and Safety Act 2012 Sections 90, 191 and 195</i> )	0	4	-100%

<b>Return to work costs**</b>	<b>Current year 2021-22</b>	<b>Past year 2019-20</b>	<b>% Change (+ / -)</b>
Total gross workers compensation expenditure (\$)	\$429,630	\$865,820	- 50%
Income support payments – gross (\$)	\$251,992	\$187,862	+34%

\*\*before third party recovery

Data for previous years is available at: <https://data.sa.gov.au/data/dataset/eyre-and-far-north-local-health-network-efnlhn>



**Executive employment in the agency**

<b>Executive classification</b>	<b>Number of executives</b>
SAES1	1
RN6A06	1
MD029G	1

Data for previous years is available at: <https://data.sa.gov.au/data/dataset/eyre-and-far-north-local-health-network-efnlhn>

The [Office of the Commissioner for Public Sector Employment](#) has a [workforce information](#) page that provides further information on the breakdown of executive gender, salary and tenure by agency.

## Financial performance

### Financial performance at a glance

The following is a brief summary of the overall financial position of the agency. Full audited financial statements for 2021-22 are attached to this report.

Statement of Comprehensive Income	2021-22 Budget \$000s	2021-22 Actual \$000s	Variation \$000s	2020-21 Actual \$000s
Total Income	133 058	140 583	7 525	126 438
Total Expenses	137 301	147 639	(10 338)	131 476
<b>Net Result</b>	<b>(4 243)</b>	<b>(7 056)</b>	<b>(2 813)</b>	<b>(5 038)</b>
<b>Total Comprehensive Result</b>	<b>(4 243)</b>	<b>(7 056)</b>	<b>(2 813)</b>	<b>(5 038)</b>

Statement of Financial Position	2021-22 Budget \$000s	2021-22 Actual \$000s	Variation \$000s	2020-21 Actual \$000s
Current assets	0	34 586	0	31 498
Non-current assets	0	136 560	0	141 561
<b>Total assets</b>	<b>0</b>	<b>171 146</b>	<b>0</b>	<b>173 059</b>
Current liabilities	0	36 793	0	30 969
Non-current liabilities	0	11 725	0	12 406
<b>Total liabilities</b>	<b>0</b>	<b>48 518</b>	<b>0</b>	<b>43 375</b>
<b>Net assets</b>		<b>122 628</b>		<b>129 684</b>
<b>Equity</b>		<b>122 628</b>		<b>129 684</b>

### Consultants disclosure

The following is a summary of external consultants that have been engaged by the agency, the nature of work undertaken, and the actual payments made for the work undertaken during the financial year.

#### Consultancies with a contract value below \$10,000 each

Consultancies	Purpose	\$ Actual payment
All Consultancies below \$10,000 each – combined	Various	\$6,707

**Consultancies with a contract value above \$10,000 each**

<b>Consultancies</b>	<b>Purpose</b>	<b>\$ Actual payment</b>
ZED Management Consulting	Develop a proposal to assess the current executive organisation structure and develop a prioritisation framework for workforce allocation.	\$39,850
	Total	\$46,557

Data for previous years is available at: <https://data.sa.gov.au/data/dataset/eyre-and-far-north-local-health-network-efnlhn>

See also the Consolidated Financial Report of the Department of Treasury and Finance for total value of consultancy contracts across the South Australian Public Sector.

**Contractors disclosure**

The following is a summary of external contractors that have been engaged by the agency, the nature of work undertaken, and the actual payments made for work undertaken during the financial year.

**Contractors with a contract value below \$10,000**

<b>Contractors</b>	<b>Purpose</b>	<b>\$ Actual payment</b>
All contractors below \$10,000 each - combined	Various	\$11,466

**Contractors with a contract value above \$10,000 each**

<b>Contractors</b>	<b>Purpose</b>	<b>\$ Actual payment</b>
BDO Advisory (SA) Pty Ltd	Financial Advice/Support Secondment	\$37,996
Port Lincoln Aboriginal Community Council Inc	COVID-19 Testing Clinic	\$18,412
Gaye Oswald	Cooper Pedy Medical Practice - Business Manager	\$12,569

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<b>Contractors</b>	<b>Purpose</b>	<b>\$ Actual payment</b>
Alan Morris Celebrancies and Business Services	Professional services provided to support the LHN'S COVID response at Coober Pedy	\$12,417
	Total	\$92,860

Data for previous years is available at: <https://data.sa.gov.au/data/dataset/eyre-and-far-north-local-health-network-efnlhn>

The details of South Australian Government-awarded contracts for goods, services, and works are displayed on the SA Tenders and Contracts website. [View the agency list of contracts.](#)

The website also provides details of [across government contracts.](#)

## Risk management

### Risk and audit at a glance

EFNLHN’s Governing Board has an Audit and Risk Committee (A&RC) with an external independent Chair to provide advice and support to ensure the Board fulfills its responsibilities regarding risk management, audit and assurance.

The A&RC meets quarterly and considers emerging risks and the effectiveness of management of clinical and corporate risks at each meeting, as well as reviews the LHN’s Risk Management Framework, management of risks, Internal Audit program and External Audit program annually. The A&RC receives audit reports conducted by the Auditor-General’s Department, Department for Health and Wellbeing (DHW), and Internal Audits by the internal audit function shared by the six regional Local Health Networks, based in the Rural Support Service (RSS). That function revised the Internal Audit Charter agreed by the six regional LHNs during the year, to reflect contemporary governance arrangements across those organisations. The Charter provides guidance and authority for audit activities.

EFNHN records and reports on risks using an online tool, Risk Console. The LHN has continued to improve the process of escalating and recording risks raised at site level in response to recommendations from the National Safety and Quality Health Service Standards accreditation process, providing staff with specific guidance on context, identification, analysis, evaluation, treatment, monitoring and communication of risk.

The EFNLHN Governing Board reviews its Risk Appetite Statement (RAS) annually, and in 2021-22, drafted and approved a new Statement to better align with the risk rating criteria used in Risk Console.

### Fraud detected in the agency

Category/nature of fraud	Number of instances
Misconduct	0

*NB: Fraud reported includes actual and reasonably suspected incidents of fraud.*

### Strategies implemented to control and prevent fraud

EFNLHN processes implemented to help control and prevent fraud include the following:

- Quarterly Audit and Risk Committee meetings to provide advice directly to the Governing Board about any instances of fraud reported to the Independent Commission Against Corruption and/or to the Department for Health and Wellbeing’s Risk and Audits Branch.
- Monthly reviews of organisational finances, financial management and performance by an operational (Tier 2) Finance and Performance

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Committee, chaired by the Chief Finance Officer, and reporting monthly to the Board's (Tier 1) Finance and Performance Committee.

- Annual review of Financial Controls Self-Assessment by the Audit and Risk Committee to ensure controls are in place to avoid fraud.
- Annual Declaration of Interests procedure and registers to monitor and report on Conflicts of Interest.
- Regular reporting by Shared Services SA to the EFNLHN Chief Finance Officer detailing any expenditure outside of procurement and approved delegations, reported to the Audit and Risk Committee and to the Board.

Data for previous years is available at: <https://data.sa.gov.au/data/dataset/eyre-and-far-north-local-health-network-efnlhn>

### **Public interest disclosure**

Number of occasions on which public interest information has been disclosed to a responsible officer of the agency under the *Public Interest Disclosure Act 2018*:

0

Data for previous years is available at: <https://data.sa.gov.au/data/dataset/eyre-and-far-north-local-health-network-efnlhn>

Disclosure of public interest information was previously reported under the *Whistleblowers Protection Act 1993* and repealed by the *Public Interest Disclosure Act 2018* on 1/7/2019.

## Reporting required under any other act or regulation

Act or Regulation	Requirement
Nil	

### Reporting required under the *Carers' Recognition Act 2005*

The EFNLHN Governing Board conducted its annual review of the LHN's Consumer and Community Engagement Strategy, looking particularly at the role of consumer representatives on LHN governance committees.

The Strategy is underpinned by the *EFNLHN Consumer and Community Engagement Framework 2020-2023 (CCEF)*, the South Australian Health and Community Services Complaints Commission (HSCC) *Charter for Health and Community Services Rights (2011)* and the *SA Carer Recognition Act (2005)*.

The Strategy supports the seven principles in the SA Carers Charter:

- Carers have choices within their carer role.
- Carers' health and well-being is critical to the community.
- Carers play a critical role in maintaining the fabric of society.
- Services providers work in partnership with carers.
- Carers in Aboriginal and Torres Strait Islander communities need specific consideration.
- All children and young people have the right to enjoy life and reach their potential.
- Resources are available to provide timely, appropriate and adequate assistance to Carers.

It also is consistent with the SA Health Consumer and Community Engagement Strategic Framework (CCESF) 2020-23 Principles of Engagement which include that "consumers, carers and the community must be active in service design and decision making".

EFNLHN's approach is guided by five core enablers:

#### 1: Inclusive of diversity

Strengthening health system participation and partnership with diverse communities and engaging effectively with these diverse groups.

#### 2: Accessible and informed opportunities to participate

Promoting engagement opportunities that are accessible to the broadest range of consumers, carers and community groups to meaningfully participate.

3: Partnering in co-design, planning and evaluation

Partnering with consumers, carers and the community in planning, implementation and evaluation of its service.

4: Systems, strategies and mechanisms for active engagement

Ensuring systems, strategies and mechanisms to actively engage with consumers, carers and the community.

5: Consumer centred best practice

Ensuring consumer, carer and community engagement practices meet national standards and are informed by best practice.

For people with or supporting someone with a mental illness, the Rural and Remote Mental Health Consumer and Carer Participation Program has been created to assist teams to achieve co-design with consumers; this is delivered to teams in a range of ways including through direct contact by the Experts by Experience team.

EFNLHN maintains an Aboriginal Health Experts by Experience Register to assist services to engage with Aboriginal people living in country South Australia. The Register acknowledges the lived experience of Aboriginal people and the wealth of knowledge that comes with their life experience.

EFNLHN also encourages the use of tools like the SA Health *Guide for Engaging with Aboriginal People* to support staff to engage Aboriginal people and their carers in a culturally respectful and effective way.



## Public complaints

### Number of public complaints reported

Eyre and Far North LHN uses the complaints categories as listed in the Safety Learning System (SLS), which provides a single system across SA Health for the management of incidents, consumer feedback and notifications. The use of the SLS allows all staff to see how the LHN compares against the National Safety and Quality Service Standards, as well as informs the South Australian Patient Safety Record.

### Feedback by subject/category

Subject/Category	Complaints
Access	23
Communication	39
Corporate Services	9
Cost	0
Privacy/ Discrimination	1
Professional Conduct	4
Treatment	33

Additional Metrics	Total
Number of positive feedback comments	109
Number of negative feedback comments	107
Total number of feedback comments	227
% complaints resolved within policy timeframes	82%

Data for previous years is available at: <https://data.sa.gov.au/data/dataset/eyre-and-far-north-local-health-network-efnlhn>

Delays in response have been largely due to the requirement of Medical Officer's input into SLS complaints on clinical matters. This has occurred due to changes in key staff in the EFNLHN medical services directorate. Other impacts on response time have been the demands on staff during COVID.

**Service Improvements**

Improvements resulting from feedback:

- Changes to waiting areas (during COVID) to ensure a safe environment for consumers.
- Communication with the general public regarding access during swabbing and vaccination clinics via EFNLHN Facebook, EFNLHN website, regional radio in addition to larger media campaigns.
- Advising clients of possible delays and requirement of home visits during COVID.
- Advising community regarding aged care visiting restrictions during COVID.
- Extension of car parking at the Port Lincoln Hospital.

**Compliance Statement**

Eyre and Far North Local Health Network is compliant with Premier and Cabinet Circular 039 – complaint management in the South Australian public sector	Yes
Eyre and Far North Local Health Network has communicated the content of PC 039 and the agency’s related complaints policies and procedures to employees.	Yes

Data for previous years is available at: <https://data.sa.gov.au/data/dataset/eyre-and-far-north-local-health-network-efnlhn>

**Appendix: Audited financial statements 2021-22**