

LIMESTONE COAST LHN GOVERNING BOARD MEETING MINUTES

Meeting Date: 29 August 2022 11:30am – 2:45pm

Location: 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)	Andrew Birtwistle-Smith (ABS)	Glenn Brown (GB)	
Proxy/Acting Chair: Lindy Cook (LC)	John Irving (JI)	Dr Anne Johnson (AJ)	Dr Andrew Saies (AS)

Members:

Ngaire Buchanan (NB)	Dr Elaine Pretorius (EP)	Dr Darren Clarke (DC)	Akhil Kapoor (AK)
Tjaart van der Westhuizen (TV)	Angela Miller (AM)	Hannah Morrison (HM)	Alex Govan (AG)

Guests: Kelly Borlase (KB), Project Manager Keith and District Hospital Transition, LCLHN

Secretariat: Emily Baker, Senior Administrative Officer, Governance & Planning, LCLHN

1. IN CAMERA SESSION		
		IN CAMERA SESSION – 11:30am – 12:00pm
2. MEETING OPENING		
Item	Topic	Discussion
2.1	Acknowledgement of Country	LC provided an Acknowledgement of Country.
2.2	Apologies	Apologies was provided for Grant King (GK), Governing Board Chair, Limestone Coast Local Health Network (LCLHN), and for Dr Andrew Saies (AS), Governing Board Member, LCLHN. It was noted that Lindy Cook, Acting Governing Board Chair, LCLHN was in attendance as Proxy for GK.
2.3	Introduction	LC provided an introduction to the meeting of the LCLHN Governing Board.
2.4	Director Conflict of Interest Disclosures	Nil Conflict of Interest (COI) disclosures were provided.

2.5	Confirmation of previous meeting minutes and actions	<p>The minutes of the meeting held on 25 July 2022 were noted and accepted as a true and accurate reflection of the meeting held.</p> <p>An update was provided in relation to the progression of action items, including:</p> <ul style="list-style-type: none"> • The development of a quarterly update to improve engagement with consumers and various community groups, including the Health Advisory Council's (HACs), anticipated for release in both print and virtual formats from October 2022. • Planning for improved and meaningful engagement with General Practitioner (GP) service providers across the region. • Progression made with due diligence checks undertaken regarding potential impacts for the LHN, as a result of proposed future changes in governance arrangements for the Keith and District Hospital (KDH).
3. BOARD CHAIR REPORT		
3.1	Report from Lindy Cook, Acting Board Chair	<p>LC provided an update in relation to key activities and meetings held during the reporting period, including:</p> <ul style="list-style-type: none"> • A summary of discussions between key stakeholders for the KDH Transition project, including the Minister for Health & Wellbeing (MHW), the local Member of Parliament (MP), the KDH Board Chair and representatives from the LCLHN. • Confirmation of the receipt of a report undertaken by the South Australian Ambulance Service (SAAS) following the Community Paramedic Program trial in Keith from April to June 2022. • Confirmation was provided the signed General Purpose Financial Statements (GPFS) had been returned to the Auditor and were awaiting certification. • Acknowledgement provided for: <ul style="list-style-type: none"> ○ Ongoing workforce issues being reported across the system. ○ The recent release of the SA Aboriginal Health Promotion Strategy 2022-2030, anticipated to have a positive impact for local services. ○ Recent state-wide industrial action, noting nil impact for the LHN on this occasion. ○ The success of the recent email upgrade, transitioning all LCLHN users to Office 365 and Outlook online. • Upcoming opportunities to nominate staff and to recognise excellence within the LHN nursing cohort with: <ul style="list-style-type: none"> ○ The 2023 Premier's Nursing & Midwifery Scholarships; and ○ The South Australian Nursing and Midwifery (SANM) Excellence Awards.

		<ul style="list-style-type: none"> A summary of discussions held during the In Camera Session at Item 1 on the Agenda, including consideration for member contributions towards key topics for discussion at future meetings.
4.	LIMESTONE COAST LHN REPORTS	
4.1	<p>CEO Report</p> <p>a) General update</p>	<p>The CEO Report – General Update was noted.</p> <p>Updates were provided in relation to key activities for the reporting period including:</p> <ul style="list-style-type: none"> A recent deployment of regional staff from the Quality, Risk & Safety (QRS) and the Governance & Planning teams, as well as regional executive office staff, to assist Aged Care and Nursing teams at the Naracoorte Health Service (NHS) and the Mount Gambier and Districts Health Service (MGDHS) commencing in early August 2022. Approval of the alternative plans for upgrades to the MGDHS Emergency Department (ED), including an additional 6 mental health beds and 6 ED beds. Confirmation of a submission to the SANM Excellence Awards, nominating Sue Carrison for her significant contributions to, and management of, the LCLHNs COVID-19 Immunisation program. Progression of a workshop between the LCLHN and Southern Adelaide LHN (SALHN), to discuss opportunities for collaboration and support and the proposed establishment of a Memorandum of Agreement (MOA). Work progressing to update the Model of Care (MOC) for the proposed Keith Health Hub, expanding the urgent care services to extend operating times after-hours and on weekends. Confirmation of funding for the establishment of an Integrated Cancer Consult Suite, to provide enhanced cancer care services in the region, and with the intention for a holistic approach providing alternative treatments and education sessions to support the provision of clinical care.
	b) Performance Reporting Summary June 2022	<p>The Chief Finance Officer (CFO) provided an overview in relation to the End of Year (EOY) result for the 2021-22 reporting period, including:</p> <ul style="list-style-type: none"> The End of Year (EOY) Net Adjusted Result (excluding revaluations) of \$10.85m unfavourable to budget. It was noted that with consideration for allowable variances, such as costs relating to COVID-19 expenditure, the unfavourable balance to budget for the year was less than \$4 million or 2% of the total budget amount. Acknowledgement was provided for the additional demand experienced throughout the year, with consistent forecasted activity significantly exceeding budgeted levels.
	c) Key Performance Indicator (KPI) Summary June 2022	The Key Performance Indicator (KPI) Summary June 2022 was noted.

		<p>Key results from the report were discussed, including an increase in elective surgeries overdue, with anticipation for further deterioration, as a result of a change in documentation processes, followed by an anticipated uplift in results predicted as changes are embedded.</p> <p>An overview was provided in relation to key activities progressing in relation to Residential Aged Care (RAC) services across the region, including:</p> <ul style="list-style-type: none"> • A revised Plan for Continuous Improvements submitted to the Aged Care Quality & Safety Commission (ACQSC), to provide an update on work progressed at the Millicent RAC site since the accreditation audit undertaken in July 2021. • An update provided in relation to key activities undertaken at the Naracoorte RAC site, including the commencement of resident and family member interviews, with results to be reported to the Governing Board when available. • Ongoing refinement of Aged Care reporting, with the proposed reporting model to be circulated for review and comment prior to implementation and noting the desire of the Governing Board to ensure that robust reporting against Aged Care KPIs is included within the updated reporting model. • Confirmation provided the sanctions imposed at the Naracoorte Moreton Bay House RAC facility in May 2022 had been lifted and accreditation reinstated in late August 2022. • Work undertaken following a recent incident at the Penola RAC facility, and a focus on mitigating future potential risks across sites was discussed.
<p>5. KEITH & DISTRICT HOSPITAL TRANSITION</p>		
<p>5.1</p>	<p>Health Care Hub Transition Plan</p>	<p>Kelly Borlase (KB), Project Manager Keith and District Hospital Transition, LCLHN, joined the meeting to provide an update in relation to the Keith & District Hospital (KDH) Transition Plan.</p> <p>An overview was provided in relation to a recent meeting held between key stakeholders for the KDH transition, with acknowledgement provided by the MHW for the updated MOC and the proposed transition plan, with in principle support provided subject to the completion of due diligence checks, and the assurance of community endorsement.</p> <p>Confirmation was provided for work progressing by the KDH Board to host their Annual General Meeting (AGM) in late September, with a Special Meeting to follow, providing the community with an opportunity to vote on the proposed plans for the transition of the KDH to a health hub within the public system.</p>
<p>5.2</p>	<p>Keith & District Hospital: Due Diligence Report</p>	<p>The Keith & District Hospital: Due Diligence Report was discussed, noting the exclusion of two external reports which had not yet been received, and with the following confirmations provided:</p> <ul style="list-style-type: none"> • The Due Diligence report was tabled at the LCLHN Audit & Risk Committee meeting, held 29 August 2022, and included discussion regarding the process undertaken and the involvement of

		<p>various stakeholders including representatives from the LHN, the DHW including the Legal & Governance team, the Rural Support Service (RSS) and the Crown Solicitor's Office.</p> <ul style="list-style-type: none"> • Recommendations made, noting that nil concerns had been identified to suggest that would hinder the progression of the transition. • The anticipated timeframe for the receipt of the outstanding external reports to be 2-4 weeks, with the intention to progress a motion for consideration by the LCLHN Governing Board, following the public meeting and with consideration for feedback provided by the community. <p>Acknowledgement was provided for the work undertaken to date by the KDH Board, and for the ongoing engagement with the community in relation to the project.</p> <p>It was noted that the report undertaken by SAAS in relation to the recent trial of the Community Paramedic Program (CPP) in the Keith region would be circulated to the membership out of session for noting.</p> <p>Continuation of the CPP in Keith was discussed, with the support of the LHN in collaboration with SAAS confirmed, and with the intention to extend the program until the new MOC is operational.</p>
<p>6. GOVERNING BOARD COMMITTEE UPDATES</p>		
<p>6.1</p>	<p>Audit & Risk Committee Summary</p>	<p>An update was provided in relation to key topics discussed at the recent meeting of the Audit & Risk Committee (ARC), held on 29 August 2022, including:</p> <ul style="list-style-type: none"> • Work progressing in relation to attraction and recruitment of staff, including collaboration with community groups, Universities and other organisations. • Ongoing difficulties experienced in relation to attrition and retention of staff. • Consideration to be made for the consolidation of services between sites, where there are ongoing challenges relating to speciality staffing cohorts. • An in-depth overview provided in relation to various Information Technology (IT) items, including: <ul style="list-style-type: none"> ○ Work progressing with Digital Health SA to increase the mutual understanding of issues and difficulties integrating solutions into existing software platforms. ○ Anticipation of the implementation of rapid impact assessment matrix (RIAM) software, to provide real time auditing against accreditation requirements. • A review of Due Diligence checks undertaken in relation to the proposed transition of KDH, noting the limitations regarding Human Resource (HR) processes over end of year period, and the potential impacts of attempting to transition staff between payroll providers by 31 December 2022. • Progression of recruitment to the position of Coordinator Procurement and Contracts, to support improved governance in this area.

		<ul style="list-style-type: none"> Proposed updates to the Internal Audit Plan (IAP), to bring forward the audit into CHIRON as a priority, and additionally to support adjustments to the IAP in line with the individual needs of the LHN. Confirmation provided regarding the improved capability of the QRS team as a result of recent recruitment to key roles, providing the ARC with assurance of the LHNs ability to progress work relating to various risk and audit recommendations. <p>RECOMMENDATIONS</p> <p>The LCLHN Audit and Risk Committee provided the following recommendations to the LCLHN Governing Board:</p> <ul style="list-style-type: none"> To increase the risk rating in relation to Workforce Attraction & Retention from High to Extreme, and to seek the provision of additional support from the Chief Executive, Department for Health and Wellbeing (DHW). To delay the proposed transition of the KDH from 1 January 2022 to 1 July 2023 to ensure that staff are supported, and to ensure adequate systems are in place to support a smooth transition.
6.2	Clinical Governance Committee Summary	<p>An overview was provided in relation to key topics for the Clinical Governance Committee (CGC), following the previous meeting held on 25 July 2022, including:</p> <ul style="list-style-type: none"> The limited ability of the operational Clinical Governance Committees to progress key pieces of work due to sustained workforce pressures. Work progressed by the Head of Unit at the MGDHS ED with a formal application for the unit to become a training site, improving the ability to attract and support junior medical staff to work in the area. Recent discussions held in relation to challenges with recruitment, and the risk with increased utilisation of agency nursing and locum medical staff.
6.3	Engagement Strategy Oversight Committee	<p>It was noted the last meeting of the Engagement Strategy Oversight Committee (ESOC) was held on 28 June 2022 and an update was provided in relation to key activities progressed, including a recent meeting held to discuss the refinement of reports to the Committee.</p> <p>Acknowledgement was provided for the quality of staff communications developed by the LHN and the recently launched Staff Newsletter 'Across the Coast'.</p>
6.4	Finance & Performance Committee Summary	<p>A summary was provided in relation to key topics discussed at the recent meeting of the Finance and Performance Committee (FPC) on 29 August 2022, including:</p> <ul style="list-style-type: none"> Anticipated delays with the implementation of coding software, and the intention to utilise lessons learned from the experience of other LHNs prior to progressing further. Confirmation of a successful resolution with Bensons Radiology regarding historic and future formal arrangements as they relate to the co-location of services at the MGDHS.

		<ul style="list-style-type: none"> • An update in relation to the 2022-23 Budget process. • Anticipation of the 2021-22 Audited Financial Statements (AFS) and their availability for reporting at the September meeting of the Governing Board. • Acknowledgement provided for the ongoing impact of workforce challenges on performance.
<p>7. MATTERS FOR DISCUSSION</p>		
<p>7.1</p>	<p>LCLHN Aged Care Accreditation</p>	<p>Dr Darren Clarke, Executive Director of Nursing & Midwifery, LCLHN and Hannah Morrison, Regional Quality, Risk & Safety Manager, LCLHN, lead discussion relating to LCLHN Aged Care Accreditation, providing key updates including:</p> <ul style="list-style-type: none"> • Confirmation of accreditation for Moreton Bay House in Naracoorte to 14 October 2023, and the lifting of sanctions which had been imposed in May 2022. • The ongoing focus of the LHN to embed improvements at the Naracoorte site, and to duplicate improvements and ongoing education across the LHNs various other RAC sites. • An overview of the support provided by the regional QRS team who have been deployed to assist with the implementation of improvement works at Naracoorte, and with planning in progress to duplicate this support across all sites in the future, commencing in Bordertown in late 2022. • Feedback received from residents at Moreton Bay House, and their families, showing a high level of satisfaction with services and supporting the focus on improvements for systems and processes. • The anticipation of an unannounced accreditation at Charla Lodge in Bordertown now overdue, with delays attributed to limited availability of the accreditors during the pandemic. • An update provided to the ACQSC regarding work progressing at Sheoak Lodge in Millicent, following the previous accreditation visit in July 2021. • The benefits realised following the engagement of the Nurse Advisor, utilising her expertise to support improvement works in Naracoorte, and the ability to replicate the lessons learned, education and process improvements across all LHN RAC sites. • Work progressing to realign some duties to non-clinical roles, with the intention to alleviate administrative burden for the Nurse Unit Managers (NUMs) and Associate Nurse Unit Managers (ANUMs) and to provide greater capacity for day to day oversight and education activities. • Recruitment progressing for: <ul style="list-style-type: none"> ○ A full time Aged Care Lead, to provide ongoing oversight and aged care governance across the LCLHN. ○ A part time Education role to support the expanded use of LeeCare across all RAC sites.

		Acknowledgement was provided for the ongoing efforts by RAC staff progressing various improvement works, with a continued focus on providing excellent service and high level care to their residents.
7.2	Bordertown Country Health Connect Building Consultation	<p>Angela Miller, Director of Governance & Planning, LCLHN and Tjaart Van der Westhuizen, Director of Corporate Services, LCLHN, lead discussion relating to the Bordertown Country Health Connect (CHC) Building Consultation, including:</p> <ul style="list-style-type: none"> • Consistent themes within feedback received indicating the originally scoped plans may need to be reconsidered to accommodate all CHC staff and services in Bordertown and to consider the increase in material and labour costs. • Consideration for the option to co-locate services with the Tatiara District Council's proposed health hub, to be established adjacent to the existing site, and with confirmation provided a meeting had been scheduled between representatives from the LHN and the Council in early September 2022 to re-open discussions. • The potential to expediate service planning for the Bordertown Memorial Hospital, or to undertake an intermediate process, with a broader view for required works at the site, and with consideration for engaging support from the RSS if progressed. • Various other considerations including: <ul style="list-style-type: none"> ○ Consolidating requirements through implementation of an interdisciplinary approach, including shared office and clinical spaces, and with specialist/breakout spaces. ○ Limitations regarding the use of funding within approved parameters, timeframes and funding. ○ Commercial options for a temporary solution. ○ Potential options to seek additional funding support, with acknowledgement provided for the various competing priorities and required improvements to infrastructure across the LHN. <p>The need for further investigation into the various options for consideration was discussed, including the desire of the Governing Board to understand potential timeframes and cost implications associated with each option, and for assurance that staff and other key stakeholder feedback has been considered.</p>
8. MATTERS FOR NOTING		
8.1	LCLHN Payment Performance Report July 2022	The LCLHN Payment Performance Report July 2022 was noted.
8.2	LCLHN Late Payments of Interest (LPI) July 2022	The LCLHN Late Payments of Interest (LPI) July 2022 were noted.

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8.3	Audit & Risk Committee Agenda 29 August 2022	The Audit & Risk Committee Agenda 29 August 2022 was noted.
8.4	Finance & Performance Committee Agenda 29 August 2022	The Finance & Performance Committee Agenda 29 August 2022 was noted.
8.5	Clinical Governance Committee Minutes 25 July 2022	The Clinical Governance Committee Minutes 25 July 2022 were noted.
8.6	Finance & Performance Committee Minutes 25 July 2022	The Finance & Performance Committee Minutes 25 July 2022 were noted.
8.7	RSS Governance Committee Minutes 29 June 2022	<p>The RSS Governance Committee Minutes 29 June 2022 were noted.</p> <p>LC provided an overview of key topics from the RSS Governance Committee meeting held in June, including:</p> <ul style="list-style-type: none"> • Acknowledgement provided for the meeting location, held at the SA Biomedical Engineering building in Torrensville. • An ongoing focus towards uplifting governance for the regional LHNs, and for continued strengthening of the relationship with Barossa Hills Fleurieu LHN (BHFLHN) as the host LHN. • Work progressing to finalise the Service Agreement, for the provision of services by the RSS to the regional LHNs. • Confirmation of the upcoming RSS Stakeholder Forum planned for late September, and to be held in Port Augusta to align with the annual regional Health Advisory Council Conference.
8.8	LCLHN Compliance Certification 2021-22	The LCLHN Compliance Certification 2021-22 was noted.
9.	OTHER BUSINESS	
9.1	Any other business	<p>An update was provided in relation to upcoming operational leave arrangements for Dr Elaine Pretorius, Executive Director of Medical Service (EDMS), with plans for Dr Philip Reasbeck to backfill the EDMS role during this period.</p> <p>A progress update was provided in relation to recruitment progressing for the ongoing appointment of a deputy Director of Medical Services (DMS) role for MGDHS, including confirmation a number of applications had been received, and with planning to progress interviews in the coming weeks.</p> <p>Andrew Birtwistle-Smith provided confirmation that a locum GP had been secured for the provision of GP services at Pangula Mannamurna Aboriginal Corporation (PMAC), for 7 out of a 9 week predicted vacancy, noting that limitations with GP staffing at the Aboriginal Community Controlled Health Service (ACCHS) could impact the number of consumers presenting to EDs.</p>

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10. MEETING EVALUATION AND CLOSE		
10.1	Meeting Evaluation	Jl provided an evaluation of the LCLHN Governing Board Meeting.
10.2	Next Meeting & location	26 September 2022, Pangula Mannamurna Aboriginal Corporation (PMAC).
10.3	Meeting Close	2:45pm

For more information

Limestone Coast Local Health Network

Governance and Planning

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