

**LIMESTONE COAST LHN
GOVERNING BOARD
MEETING MINUTES**

Meeting Date: 30 March 2020 11.30am - 2.00pm
 Location: Conference Room 4, Mount Gambier Hospital
 Conference Room, Penola Hospital
 Level 1, Meeting Room 2, Rural Support Service
 Teleconference

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) Kerri Reilly (KR)
 Members: Ngaire Buchanan (NB) Kristen Capewell (KC) Dr Elaine Pretorius (EP) Paul Bullen (PB) Hannah Morrison (HM)

Attendees: Pam Schubert, Director of Nursing, Mount Gambier & Penola Hospitals

Secretariat: Angela Miller (AM), Director of Governance & Planning, Limestone Coast Local Health Network

Apologies: Kerri Reilly, Dr Elaine Pretorius, Paul Bullen & Pam Schubert

1.	MEETING OPENING	
Item		Discussion
1.1	Acknowledgement of Country	GK provided the Acknowledgement of Country
1.2	Apologies	An apology was noted for Kerri Reilly, further apologies were noted for Dr Elaine Pretorius, Paul Bullen & Pam Schubert due to their involvement in the Incident

		Management Team for COVID-19.
1.3	Introduction	GK provided an introduction to the meeting of the LCLHN Governing Board in Mount Gambier.
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 24 February 2020 were accepted as a true and accurate reflection of the meeting and an update on actions was provided.
2.	BOARD CHAIR REPORT	
2.1	Report from Grant King, Board Chair	<p>GK acknowledged the unprecedented times and the work of the Limestone Coast Local Health Network (LCLHN) in the current environment. The expertise of the Governing Board to support the Executive team were offered and the support provided to-date was acknowledged.</p> <p>As the media and communications lead relating to COVID-19, an update was provided on the communications and collaboration with Council Mayor's and CEOs, local Members of Parliament and the community highlighting the opportunity to strengthen relationships at this time.</p> <p>GK referenced the work being done by Dr Lydia Twining, General Practitioner Hawkins Medical Clinic, the community pandemic response and the discussions held with the Mayor & CEO of the City of Mount Gambier regarding project development and implementation to support disadvantaged and vulnerable community members and one that will be shared with other Councils. Further acknowledged was the work of AC Care in program development to support the community.</p> <p>A letter of support provided to the District Council of Grant relating to the impact of COVID-19 on Rex Airlines on behalf of the Governing Board was confirmed.</p>

		<p>Attendance at the Naracoorte & Area Health Advisory Council (NAHAC) meeting on 16 March 2020 following their correspondence dated 23 February 2020 was reported including the opportunity to speak with the NAHAC about the role of the Governing Board, strategic planning and Service Planning initiatives throughout the LHN and an opportunity for their involvement. The availability of approved agendas and minutes to support information sharing between the Governing Board and Health Advisory Councils was also discussed at this meeting.</p> <p>GK advised the meeting and workshop scheduled with the Minister for Health & Wellbeing for 18 March 2020 had been postponed due to the impact of COVID-19.</p> <p>The opportunity to elect a Deputy Chair was discussed.</p> <p>ACTION:</p> <p>Information and flight requirements for the LCLHN to assist with flight schedules to be investigated and provided to Rex Airlines.</p> <p>ACTION:</p> <p>Approved minutes of all Governing Board meetings to be sent to all Health Advisory Council Presiding Members for information.</p>
3.	LIMESTONE COAST LHN REPORTS	
3.1	CEO Report a) General update	<p>NB tabled a CEO Report specific to COVID-19 capturing Governance, Planning & Intelligence, Clinical & Technical Advisory, Operations, Logistics, Human Resources, Communications and Risks and the supporting LCLHN Incident Action Plan.</p> <p>The LCLHN focus on COVID-19 and the postponement of the Accreditation revisit scheduled for 7 – 8 April 2020 was confirmed noting that sufficient information had been provided to evidence the LHN was well positioned to meet the recommendations of the survey completed in December 2019.</p> <p>The impact of COVID-19, the Incident Management Team (IMT) and the support being provided to and by SA Pathology and Benson Radiology was noted. Concerns relating to locum's and the inability to source support from interstate</p>

		<p>was noted along with the 14 day isolation period requirement and the roster impacts specific to Mount Gambier and Millicent Hospitals. The support being provided by Dr Hendrika Meyer, Rural Health Workforce Strategy Lead, in relation to the identification of staff across Country and Metro LHNs to support the LCLHN was noted and a further discussion relating to the need to have staff upskilled in airway management to support the Emergency Departments was held.</p> <p>NB spoke to the community response in relation to COVID-19, the generosity and offers of support.</p> <p>The activation of the IMT in mid March, their commitment to timely responses to questions and escalations, the experience of NB in managing this level of health crisis and the role of the Incident Controller was discussed along with the IMT structure within SA Health and the support offered by NB and Wayne Champion, CEO River Mallee Coorong LHN, to assist the State IMT.</p> <p>The recent changes to Category 2 (semi-urgent, 90 day timeframe) & Category 3 (non-urgent, 365 day timeframe) procedures and the impact on deferred patients the private service was discussed.</p> <p>A concern was raised in relation to the availability of Personal Protective Equipment (PPE) for the LHN at this time and confirmation was provided that the LHN had sufficient supply and PPE would be conserved in Australia by the deferral of Category 2 & 3 procedures. The implementation of extra security measures in relation to PPE, antibacterial hand gel and toilet paper were also noted.</p> <p>Unnecessary presentations to outpatient consulting rooms and GPs with the options for Telehealth support and Hospital in the Home for the community including Country Health Connect & Mental Health were discussed.</p> <p>Aged Care was highlighted as a key area of concern and visiting restrictions had been implemented to reduce risk for patients, families and the facility staff.</p> <p>The implementation of temperature testing and entry requirements at all health facilities was confirmed.</p> <p>The LCLHN was commended for the initiatives implemented to reduce presentations, keep the transition down and preserve resources.</p>
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	<p>b) Performance Reporting Summary January 2020</p>	<p>Jl provided an update on performance YTD noting a EOY forecast to meet budget as at January 2020 and as projected by February 2020 reporting. The decline in occupancy in Aged Care was highlighted.</p> <p>The structure of the 2019/20 budget was raised and the opportunity for greater understanding by going through the budget process for 2020/21 was noted.</p> <p>Confirmation was received that, while the 2019/20 budget allows for cleaning 5 days per week, sites are being cleaned 7 days per week and the 2020/21 budget will allow for this provision to make the budget more realistic although the costs of the cleans would not alter.</p> <p>A concern was raised in relation to the delay in clinical coding due to the implementation of Sunrise (Electronic Medical Record). The work of the LCLHN in quantifying the financial impact of this delay was noted.</p> <p>The impacts of COVID-19 on year end results were also noted.</p> <p>HM confirmed the postponement of the Accreditation revisit in April 2020 and the revised information provided to the Governing Board in relation to Severity Assessment Code (SAC) 1 & 2 events confirming that the outcomes of these are monitored and resolved through the Risk Management & Audit Committee. The cross-over between the Clinical Governance Committee and the Risk Management & Audit Committee with the view to refine reporting was noted.</p> <p>HM further confirmed that an Operational Risk for COVID-19 was currently being developed, the opportunity to develop an Operational Risk for LCLHN Attraction & Retention to compliment the Strategic Risk was noted.</p> <p>ACTION:</p> <p>An Operational Risk for LCLHN Attraction & Retention to be developed</p> <p>ACTION:</p> <p>Strategic Risk 'Commonwealth programs Funding – Reforms in a Competitive Market' in relation to the Country Health Connect brand to be reviewed</p>

	c) Key Performance Indicator (KPI) Summary January 2020	The KPI Performance Indicator (KPI) Summary for January 2020 was referenced and confirmation provided that the Service Agreement reference refers to: Mount Gambier (1), Mount Gambier, Millicent, Naracoorte & Penola (2) and Mount Gambier & Naracoorte (3)
	d) Draft SA Health Commissioning Framework	The Draft SA Health Commissioning Framework was noted and confirmation given that KC & JI will be attending an onboarding session on 15 April 2020 to understand the 2020/21 budget process and previous budget assumptions.
4.	ENGAGEMENT STRATEGIES	
4.1	Engagement Strategy Update	AJ provided an update on the Clinician & Staff and Consumer, Carer & Community Engagement Strategies highlighting both strategies were complete and ready for consultation. Confirmation was provided that the LCLHN Strategic Plan and Engagement Strategies were not required to be finalised by 30 June 2020. A Governing Board decision was made to postpone consultations and to revisit the scheduling for this engagement post COVID-19.
5.	GOVERNING BOARD COMMITTEE UPDATES	
5.1	Clinical Governance Committee	AS provided an update on the Clinical Governance Committee and the informal workshop held on 30 March 2020 which covered a review of reporting and development and oversight to ensure a safe, quality and accredited services.
5.2	Finance & Performance Committee	JJ provided an update on the Finance & Performance Committee held on 30 March 2020 including the clarification being sought in relation to the Financial Delegations Procedure evaluation criteria.
5.3	Risk Management & Audit Committee	GB provided an update on the Risk Management & Audit Committee including the review of the Risk Register causes, controls and treatments, the pending move from ERA to the Risk Console system which has no license controls and better reporting. Information relating to the Independent Commissioner Against

		Corruption (ICAC) report in relation to the Private and Public system and the transfer of assets from CHSA to LCLHN was also provided. GB further highlighted emerging risks and the adoption of a new risk for COVID-19.
7	TOPIC OF THE MONTH	
7.1	COVID-19	The COVID-19 update was captured in the CEO report at item 3.1 a).
8.	STRATEGIC PLANNING	
8.1	Strategic Planning Update	Strategic Planning was noted as being on hold until further notice.
9.	OTHER BUSINESS	
9.1	Mount Gambier Private Hospital	An update on the draft project briefing for the external consultant review for Mount Gambier Private Hospital (MGPH) was provided and the impact of COVID-19 on the private service including the deferral of CAT 1 & 2 procedures and the pending Federal and State Cabinet statement was noted. The Governing Board agreed to put a hold the commencement of the external review until advice was received from the Mount Gambier Private Hospital Board regarding their position moving forward. ACTION: Crown Solicitor's Correspondence & draft external consultant project request to be sent to the Governing Board.
9.2	Keith & District Hospital	An update was provided on the project briefing to AsiaAustralis and the commencement of this review on the Keith & District Hospital (KDH). The offer of assistance by the KDH to support the LCLHN with the impact of COVID-19 was noted.
9.3	Any other business	An update was provided on the fundraising for prostate surgery equipment for the LHN. Capital works requirements in relation to Country Health Connect at both Bordertown and Naracoorte and feedback from accreditation was discussed. Positive media in relation to forensic testing and the interview provided by Mr Barney McCusker was noted.
10.	MATTERS FOR APPROVAL	

10.1	LCLHN Financial Delegations Procedure	<p>The LHLHN Financial Delegations Procedure was approved subject to a change being made to the quarterly evaluation criteria and to reflect the Committee is required to review the delegations quarterly and not the compliance against the delegations.</p> <p>ACTION:</p> <p>Amendment to be made to the evaluation criteria in the Financial Delegations Procedure to reflect the Committee is required to review the delegations quarterly and not the compliance against the delegations.</p> <p>DECISION:</p> <p>The LCLHN Financial Delegations Procedure was approved.</p>
10.2	Aged Care Bank Accounts – Refundable Deposits & Bank Accounts	<p>The Aged Care Bank Account – Refundable Deposits and Bank Accounts briefing was discussed noting a determination of priority works was currently underway.</p> <p>ACTION:</p> <p>Aged Care Bank Account briefing to be amended on page 2 to reflect Accounting Support Services <u>will</u> maintain a reconciliation of balance per facility and recommendation 3 c) to read ‘ as recommended by the LHN’</p> <p>DECISION:</p> <p>The Aged Care Bank Account – Refundable Deposits and Bank Accounts briefing was approved.</p>
10.3	Engagement Strategy Oversight Committee Terms of Reference	<p>DECISION:</p> <p>The Engagement Strategy Oversight Committee Terms of Reference was approved.</p>
11.	MATTERS FOR NOTING	
11.1	LCLHN Invoice Payments February 2020	The LCLHN Invoice Payments February 2020 was noted.

11.2	LCLHN Late Payments of Interest (LPI) February 2020	The LCLHN Late Payments of Interest (LPI) February 2020 was noted.
11.3	Finance & Performance Committee Agenda – 30 March 2020	The Finance & Performance Committee Agenda for the meeting 30 March 2020 was noted.
11.4	Finance & Performance Committee Minutes – 20 January 2020	The Finance & Performance Committee minutes for the meeting held on 20 January 2020 were noted.
11.5	Risk Management & Audit Committee Minutes – 30 Sept 2019	The Risk Management & Audit Committee minutes for the meeting held on 30 September 2019 were noted.
11.6	Management Oversight Committee (MOC) Minutes - 24 Feb 2020	The Management Oversight Committee (MOC) minutes of the meeting held on 24 February 2020 were noted.
11.7	Naracoorte & Area Health Advisory Council Correspondence	The Naracoorte & Area Health Advisory Council Correspondence was noted.
11.8	Revised List of Outstanding Capital Works	The Revised List of Outstanding Capital Works was noted.
11.	SUMMARY AND CLOSE	
11.1	Next Meeting & location	Monday 27 April 2020, Mount Gambier
11.2	Meeting Close	2:00 pm

Action List: Meeting 2 September 2019			
No.	Action	Responsibility	Due:
6.1.2	A communication plan to be finalised and communicated following confirmation of the process and options for the Aged Care Bank & Investment Account Communication Plan	KC	On Hold
Action List: Meeting 28 October 2019			
No.	Action	Responsibility	Due:
9.1.2	The revised list of Outstanding Capital Works is to be prioritised to determine the order of works to be completed including priority of funding and level of risk.	PB	Completed
9.1.2	Link issues, establish baseline and possible solutions for Outstanding Capital Works under each heading within the Service Level Agreement.	PB	30 March
Action List: Meeting 25 November 2019			
No.	Action	Responsibility	Due:
9.10	The Security Audit Action Plan is to be revised to include allocation of sustainability funding	PB & JV	27 April
9.10	The Security Audit Action Plan is to be revised to include prioritisation as per the risk matrix.	PB & JV	27 April
Action List: Meeting 24 February 2020			
No.	Action	Responsibility	Due:
3.1	A business case to be drafted for a consultant audit of clinical coding in the LCLHN	NB	27 April 2020
5.2	Aged Care to be added as an agenda item for future Governing Board	AM	27 April 2020

5.2	meetings Gail Harding to be invited to attend the next meeting of the Governing Board on Monday 30 March 2020	AM	On Hold
8.1	Draft a brief to AsiaAustralis to review the Mount Gambier Private Hospital model and current position	GK & AM	In Progress
9.1	Provide a copy of the Governing Board Calendar capturing requirements of the Board Charter and alignment to Board agendas	AM	27 April 2020
Action List: Meeting 30 March 2020			
No.	Action	Responsibility	Due:
2.1	Information and flight requirements for the LCLHN to assist with flight schedules to be investigated and provided to Rex Airlines	NB	ASAP
2.1	Approved minutes of all Governing Board meetings to be sent to all Health Advisory Council Presiding Members for information.	AM	Ongoing/ Completed
3.1 b)	An Operational Risk for LCLHN Attraction & Retention to be developed	P-MF	27 April 2020
3.1 b)	Strategic Risk 'Commonwealth programs Funding – Reforms in a Competitive Market' in relation to the Country Health Connect brand to be reviewed	YA & SF	27 April 2020
9.1	Crown Solicitor's Correspondence & draft external consultant project request to be sent to the Governing Board.	AM	ASAP
10.1	Amendment to be made to the evaluation criteria in the Financial Delegations Procedure to reflect the Committee is required to review the delegations quarterly and not the compliance against the delegations.	KC	ASAP
10.2	Aged Care Bank Account briefing to be amended on page 2 to reflect Accounting Support Services <u>will</u> maintain a reconciliation of balance per facility and recommendation 3 c) to read ' as recommended by the LHN'	KC	ASAP