

**Eyre and Far North Local Health Network  
GOVERNING BOARD MEETING MINUTES**

**Thursday 28 April 2022 3.00pm – 5.00pm  
Via Teams**

<b>Name</b>	<b>Position/Title</b>	<b>Attendance</b>	<b>Item</b>
Michele Smith	Chair	P	All
Leanne Dunchue	Member	P	All
Dr David Mills	Member	P	All
Jamie Siviour	Member	P	All
Chris Sweet	Member	P	All
Christine Thyer	Member	P	All
Trevor Smith	Member	P	All
<b>Attendees</b>			
Verity Paterson	Chief Executive Officer EFNLHN	P	All
Hudson Vieira	Chief Finance Officer EFNLHN	A	
Jane Robinson	Director Governance and Strategy EFNLHN	P	All
<b>Guests</b>			
Julie Marron (JM)	Executive Director Nursing and Midwifery EFNLHN	P	All
Dr Susan Merrett (SM)	Executive Director Medical Services EFNLHN	P	All

P = Present, A = Apology, X = Not Present

We acknowledge and respect the traditional custodians whose ancestral lands we are meeting upon today.  
 We acknowledge the deep feelings of attachment and relationship of Aboriginal people to country.  
 We also pay respect to the cultural authority of Aboriginal people visiting/attending from other areas of South Australia present here.

<b>Eyre and Far North Local Health Network GOVERNING BOARD Meeting Minutes 28/04/2022</b>		
	<b>Agenda Item</b>	<b>Discussion Points</b>
<b>1.</b>	<b>OPENING</b>	<b>Meeting opened at 3.10pm with quorum</b>
	1.1 In Camera Discussion	<ul style="list-style-type: none"> <li>• Session started at 3.10pm, ended 3.15pm.</li> </ul>
	1.2 Welcome and Apologies	<ul style="list-style-type: none"> <li>• Acknowledgement of Country. No apologies.</li> </ul>
	1.3 Interests and Conflicts Disclosure Log	<ul style="list-style-type: none"> <li>• Board members noted that the EFNLHN Chair, M. Smith, had a management plan in place regarding a commercial proposal from a provider, at which she was a Non-Executive Director.</li> <li>• They also noted that Board member, T. Smith, was also Independent Chair of a community organisation that had expressed support for this proposal in a letter to the Minister for Health and Wellbeing, before the Board had formally considered the proposal.</li> <li>• Board members noted that consideration of management of those interests had been discussed at an Out of Session meeting held just before the Board meeting and would be discussed further at Item 4.1.3.</li> </ul>
	1.4 Confirmation of previous Minutes	<ul style="list-style-type: none"> <li>• Minutes seconded by C. Sweet, confirmed and approved for Chair to sign.</li> </ul>
	1.5 Actions from previous Minutes	<ul style="list-style-type: none"> <li>• Reviewed and approved.</li> </ul>
	1.6 Notification of Other Business	<ul style="list-style-type: none"> <li>• The Tier 1 Finance and Performance Committee had referred to the Board, questions about management of planning with Mid-West Health and Aged Care Inc (MWHAC) for the use of Commonwealth infrastructure grants at two Multi-Purpose Service (MPS) sites which EFNLHN owned.</li> </ul>
	1.7 Patient/Consumer Story	<ul style="list-style-type: none"> <li>• The Board noted a patient story highlighting the lack of public dental services on the Eyre Peninsula and the impact on local families, both financially and health-wise.</li> <li>• L. Dunchue to provide patient story at June Board meeting.</li> </ul>
<b>2.</b>	<b>STRATEGIC DISCUSSION</b>	
	2.1 Ministerial Meeting Update	<ul style="list-style-type: none"> <li>• The Board noted an update by the Chair including:                             <ul style="list-style-type: none"> <li>○ that the devolved governance arrangements in health, including the LHN Governing Boards, would stay in place under the new Government.</li> </ul> </li> </ul>

		<ul style="list-style-type: none"> <li>○ that the Chair had invited the Minister for Health and Wellbeing to visit the Eyre and Far North Local Health Network.</li> </ul>
	2.2 COVID-19 Recovery Planning	<ul style="list-style-type: none"> <li>● The Board noted EFNLHN's planning to transition COVID-19 management to business as usual, including that this process could take more time than in other SA regions to ensure that vulnerable people living in remote locations could be well supported.</li> </ul>
<b>3.</b>	<b>MATTERS FOR DECISION</b>	
	3.1 Wudinna GP Practice	<ul style="list-style-type: none"> <li>● The Board discussed a letter from the Wudinna District Council seeking the EFNLHN's assistance with the provision of local GP services.</li> <li>● The Board considered a set of options, including an interim measure to provide services from the EFNLHN-owned medical practices for two years while the District Council continued the search for a GP.</li> <li>● The Board agreed to consider the two-year interim proposal but asked for revised costings before it made a decision and encouraged EFNLHN to explore the provision of an outreach service from the EFNLHN-owned medical practice at Ceduna, on an interim basis.</li> </ul>
<b>4.</b>	<b>MATTERS FOR DISCUSSION</b>	
	4.1 Medical Services Update  4.1.1 GP Contract Negotiations Progress  4.1.2 Port Lincoln Medical Model	<ul style="list-style-type: none"> <li>● The Board noted that EFNLHN expected that GP contracts would be negotiated and signed by the deadline of 30 June 2022, after which, GPs would lose access to a sign-on bonus.</li> <li>● The Board noted progress with implementation of a salaried medical model at Port Lincoln Hospital, including: <ul style="list-style-type: none"> <li>○ planning for the establishment of a Director of Clinical Training position, medical training unit and oversight committee, aligned with accreditation requirements for employed Junior Doctors.</li> <li>○ planning for the establishment of a Clinical Director of the Emergency Department, which had been recommended by an independent review of the Port Lincoln Emergency Department in 2021.</li> <li>○ planning to be able to offer, as part of a Centre of Excellence, local training in Obstetrics, Emergency Medicine and Rural Generalist Anaesthetics, accredited by the Joint Consultative Committee on Anaesthesia (JCCA).</li> <li>○ first rotations of doctors had started from Port Lincoln to Ceduna for obstetrics, the start of development of a regional obstetrics service.</li> <li>○ Ceduna-based GP Anaesthetist was also coming regularly to Port Lincoln</li> </ul> </li> </ul>

4.1.3 RARMS Proposal Update		<p>Hospital to increase their exposure to a range of anaesthetic experiences.</p> <ul style="list-style-type: none"> <li>• The Board was also briefed on high-level strategic planning options for the future of medical services and the three EFNLHN-owned medical practices.</li> <li>• The Board noted a high-level summary of an out of session Board meeting held just before the main Board meeting, relating to a commercial proposal by a provider that the EFNLHN Chair was a Non-Executive Director of, and which had been recommended to the Minister for Health and Wellbeing by another Board member, T. Smith, in his role as Independent Chair of the Northern Eyre Peninsula Health Alliance (NEHPA), before the EFNLHN Board had considered the matter.</li> <li>• The Board agreed that the Chair would be recused from all discussion and not receive documentation about the proposal while it was under consideration, and that T. Smith would provide a written management plan, as required under the Public Sector (Honesty and Accountability) Act, about how he proposed to manage his interests.</li> <li>• The Board also noted that EFNLHN Executive Members, V. Paterson and S. Merrett, were members of the NEPHA Board and had agreed to resign from that Board in order to manage their interests, while continuing to provide advice and guidance to NEPHA, as key stakeholders.</li> <li>• The Board agreed that the 26 May Board meeting would include a workshop on the provision of medical services, with a focus on future options for the three EFNLHN-owned medical practices. M. Smith would recuse herself from participating in that workshop.</li> </ul>
4.2 Aged Care Strategy Update		<ul style="list-style-type: none"> <li>• The Board noted a presentation about the potential impact of national aged care reforms in country South Australia.</li> </ul>
4.3 Chief Executive Officer Report	<p>4.3.1 CEO Report April 2022</p> <p>4.3.2 Performance Report April 2022</p> <p>4.3.2.1 EFNLHN Q2 Performance Minute</p> <p>4.3.2.2 SA Health Performance Framework KPIs Current Performance February 2022</p>	<ul style="list-style-type: none"> <li>• The Board noted the report, including challenges securing accommodation for staff, which was hampering recruitment efforts.</li> <li>• The Board noted the April performance report and a Minute from the Deputy Chief Executive of the Department for Health and Wellbeing, congratulating the LHN for its financial and performance management in a challenging year.</li> <li>• The Board noted that EFNLHN was one of the best performers of all 10 Local Health Networks.</li> </ul>

	<p>4.3.3 EFNLHN Operational Plan Progress Report</p> <p>4.3.4 Executive Committee Summary</p>	<ul style="list-style-type: none"> <li>The Board noted good progress against the Operational Plan.</li> <li>The Board noted the summary.</li> </ul>
	<p>4.4 Finance Report</p> <p>4.4.1 Finance Report (monthly)</p>	<ul style="list-style-type: none"> <li>The Board noted the report.</li> </ul>
	<p>4.5 Board Committees</p> <p>4.5.1 Finance and Performance Committee</p> <p>4.5.2 Clinical Governance Committee</p> <p>4.5.3 Audit and Risk Committee</p> <p>4.5.4 Consumer, Community and Clinical Engagement Committee</p>	<ul style="list-style-type: none"> <li>The Board noted unconfirmed Minutes and a verbal report by Chair, L. Dunchue.</li> <li>The Board noted the confirmed Minutes and sought quarterly reports on EFNLHN's performance as a National Disability Insurance Scheme (NDIS) provider and as a Mental Health service provider.</li> <li>The Board noted the Committee had not met in the preceding month.</li> <li>The Board noted unconfirmed minutes and that the Committee's meeting agenda had been revised, in response to the Committee's annual effectiveness review, to provide more focus on clinician engagement.</li> <li>The Board also noted a verbal report on EFNLHN's Annual Health Advisory Council, which had been held on 1 April, and had been very well received.</li> </ul>
	4.6 Chairperson Update	<ul style="list-style-type: none"> <li>The Board noted the update.</li> </ul>
<b>5.</b>	<b>MATTERS FOR NOTING</b>	
	<p>5.1 Major Correspondence</p> <p>5.1.1 Nil</p>	<ul style="list-style-type: none"> <li>Nil discussion.</li> </ul>
<b>6.</b>	<b>OTHER BUSINESS</b>	
	6.1 Other Business from Item 1.6	<ul style="list-style-type: none"> <li>The Board discussed next steps in terms of engagement with Mid-West Health and Aged Care Inc over the use of Commonwealth grants for infrastructure improvements at two Multi-Purpose Service sites which EFNLHN owned.</li> </ul>
<b>7.</b>	<b>MEETING FINALISATION</b>	
	7.1 Review actions to be taken	<ul style="list-style-type: none"> <li>Noted.</li> </ul>

	7.2 Meeting Evaluation	<ul style="list-style-type: none"><li>• Completed.</li></ul>
	7.3 Agenda items for next meeting	<ul style="list-style-type: none"><li>• Nil.</li></ul>
	7.4 Meeting Close	<ul style="list-style-type: none"><li>• 5.00pm</li></ul>
<b>Next Meeting:</b> <b>Via Teams</b> Thursday 26 May 2022, 4.00pm – 5.00pm  <b>Face to Face</b> 30 June 2022 2.00pm – 5.00pm Cooper Pedy Hospital + Teams		

**Minutes approved**



Michele Smith  
Chair, Eyre and Far North Local Health Network  
30 June 2022