

SALHN GOVERNING BOARD

Minutes of the meeting

4 August 2022

8:00 am – 1:30 pm (ACST)

FMC Boardroom, Level 2, Flinders Medical Centre

INVITEES:

Board Members	SALHN Executive
Mr Mark Butcher (Chair)	Dr Kerrie Freeman, Chief Executive Officer
Ms Virginia Hickey <i>VIA TEAMS</i>	Ms Natalie May, a proxy for the Chief Workforce Officer
Assoc Prof Tamara Mackean <i>VIA TEAMS</i>	Mr Matt Rooney, Acting Chief Finance Officer
Ms Julie Mitchell	Ms Dulcey Kayes, Acting Chief Operating Officer
Ms Jill Noble	Ms Sarah Woon, Executive Director, Governance & Risk
Ms Jenny Richter	Ms Sarah McRae, I/Executive Director, Strategy, Planning & Performance
Prof Judy Searle	Mr Wayne Gadd, Executive Director, Corporate Services & Digital Health
Dr Tony Sherbon <i>VIA TEAMS</i>	
APOLOGIES:	IN ATTENDANCE:
Mr Michael Francese, Chief Workforce Officer	Ms Angie Goodrich <i>Item 7.0</i> Director, Continuous Improvement Unit
	Ms Kerrie-Ann Brown <i>Item 7.0</i> Nurse Unit Manager, Ward 4C
	Ms Carole Lennon, Interim Board Secretariat

8:30 am In-camera discussion

~ The meeting commenced at 9:40 am ~

1. Welcome & Acknowledgement of Country

Mr Butcher recognised the Kurna Acknowledgement of Country.

Mr Butcher welcomed Board members and all those in attendance to the meeting, including new attendees Dr Kerrie Freeman, Chief Executive Officer; Professor Judy Searle, Board Member; Ms Dulcey Kayes, Acting Chief Operating Officer; and Ms Natalie May, a proxy for the Chief Workforce Officer.

Mr Butcher acknowledged that Ms Richter would depart the meeting at 10:30 am but rejoin via teams around noon.

Apologies

The apologies of Mr Michael Francese, Chief Workforce Officer, were noted.

The Board Chair shared decisions from the in-camera discussions with the SALHN Executive attendees:

- Board **endorsed** a refresh of the SALHN Strategic Plan, including the addition of defined organisational values;
- Board **noted** that the Chief Executive Officer would introduce a 'Just Culture' Policy Framework to be tabled at the Board Clinical Governance Sub-committee meeting;

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- Board **noted** that the Chief Executive Officer intended to restructure and refresh the SALHN Executive team and the operational governance framework to create a strategic Executive who can work together as a high-performing team to deliver the Service Agreement and refreshed Strategic Plan;
- Board **requested** the Chief Executive Officer give consideration to the Board's Sub-committee structure in light of the proposed changes and table a paper for discussion at the next Board meeting; and
- Board **approved** the recruitment of a Board Secretary.

DECISION: **Approved the Chief Executive Officer reviewing the Governing Board Sub-committee Terms of Reference and Membership**

Action: **Governing Board Sub-committee Terms of Reference and Membership to be reviewed and recommendations provided to the Governing Board**
(Assignees: Dr Kerrie Freeman and Ms Sarah McRae)

Action: **Include an Evaluation of the Board Meeting on the meeting agenda to support continual improvement in Board functioning**
(Assignees: Dr Kerrie Freeman and Ms Sarah McRae)

Agenda items were reordered to enable the Values Moment to occur first, followed by the 'Spotlight' Integrated Management System Maturity.

~ Ms Angie Goodrich and Ms Kerrie-ann Brown joined the meeting at 9:45 am

7. Values Moment | Integrated Management System Maturity

The Board Chair welcomed Ms Goodrich and Ms Brown to the meeting to discuss progress on the Integrated Management System Maturity as a key enabler of the SALHN Strategic Directions Map, with the key highlights being:

- Building a culture of continuous improvement and an Integrated Management System;
- Connecting staff to the Strategic Directions using local action plans, performance measurement, knowledge capture, problem-solving and sharing through the key domains of Safety, Quality, Delivery, People, and Cost;
- Capturing Key Performance Indicators (KPIs) under each of the five domains;
- Opportunities for staff improvement, problem-solving, and a mechanism for empowerment; and
- Ward 4C staff embracing the Integrated Management System, their engagement, problem-solving, and hard work in addressing the common themes for improvement.

The Board discussed, amongst other things:

- Execution of the Integrated Management System, variability of quality, delivery and value adding;
- Lessons learnt and data maturity at the local level;
- Digitalisation and culture of improvement and motivation; and
- International forum on Safety and Quality in Healthcare and areas where SALHN needed improvement at the local level.

The Chief Executive Officer discussed her observations, including:

- The excellent work of SALHN in delivering the Continuous Improvement Program; and
- Supporting innovation at the local level, which will be complimented with a clear Performance and Accountability Framework.

Mr Butcher thanked Ms Goodrich and Ms Brown for attending the Board meeting and acknowledged their work in continuous improvement at SALHN.

DECISION: **The Board discussed and noted the Integrated Management System Maturity**

Action: **Letter of thanks to Ms Goodrich and Ms Brown for their presentation**
(Assignees: Ms Carole Lennon and Ms Sarah McRae)

~ Ms Goodrich and Ms Brown left the meeting at 10:17 am ~

8. Spotlight | 2022-2023 Budget Presentation

The Board Chair welcomed Mr Matt Rooney, Acting Chief Finance Officer, to discuss the 2022-2023 Budget, with the key highlights being, amongst other things:

- SALHN Service Level Agreement, which is currently with the Minister for Health and Wellbeing for approval;
- Budget allocation and draft commissioned activity received;
- Saving targets will likely be required to facilitate a balanced budget; and
- Challenges with the budget are around activity and services.

The Board discussed, amongst other things:

- National Efficient Price growth costs pressures;
- Elective surgery funding and activity challenges; and
- SALHN Financial Sustainability.

The Chief Executive Officer discussed her observations, including:

- Working with the Department for Health and Wellbeing on financial sustainability in a living with COVID business operating model; and
- Importance of delivering activity within the National Efficient Price.

DECISION: **Noted the 2022-2023 Budget Update**

Action: **Update from the Department for Health and Wellbeing on consistency and alignment of NEP growth; delivering financial sustainability, and non-current funding in the short-term to reduce ramping**
(Assignee: Mr Matt Rooney)

~ Ms Richter left the meeting at 10:29 am ~

3. **Agenda Specific | Undisclosed Declarations of Interest**

Dr Tony Sherbon disclosed a Declarations of Interest, being:

- Appointment as Chair of Calvary/Medibank joint venture, which runs the My Home Hospital Program in South Australia.

4. **Starring of items**

Items starred for discussion:

- Clinical Governance Sub-committee.

5. **Minutes of the previous meeting**

The minutes of 16 June 2022 were approved as a true and accurate record of proceedings.

6. **Actions arising from the previous meeting**

Actions arising from previous meetings were either completed, on track for delivery by the due date, or addressed for discussion in agenda Items.

9. **Patient Journey Collaborative**

The Board Chair welcomed Ms McRae in addressing the Board on the Patient Journey Collaborative, inclusive of the Department for Health and Wellbeing and SALHN Urgent Care Improvement Sprints and COVID-19 Health System Response, with the key highlights being, amongst other things:

- Diagnostics, rapid interventions, key priorities and improvement initiatives over the next three, six and twelve months;
- Addressing the recommendations of the Monaghan Report; and
- Access to timely data at the divisional level to work on specific issues.

The Board discussed, amongst other things:

- Tracking the recommendations of the Monaghan Report; and
- Ramping Taskforce and the work of the Local Health Networks in focussing on the state-wide performance.

The Chief Executive Officer discussed her observations, including:

- The ongoing approach to the Patient Journey Collaborative and weekly meetings chaired by the Chief Operating Officer with a focus initially on the pathway through the Emergency Department to General Medicine and
- Clinical Reference Groups, which will meet three times a week, will inform the work of the Collaborative. A leadership support intervention with the Emergency Department Leadership and the Executive will complement this work.

DECISION: Noted the Patient Journey Collaborative update

Action: Monaghan Report update and progress on the implementation of the recommendations to be provided at the 22 September 2022 Governing Board meeting
(Assignees: Ms Sarah McRae)

Action: Briefing to the Governing Board on Business Intelligence, accountabilities and capabilities
(Assignees: Mr Wayne Gadd)

~ Break 11:20 am to 11:30 am ~

10. Chief Executive Officer (CEO) Report

The Board Chair welcomed Dr Freeman, Chief Executive Officer, to address the Board.

Dr Freeman provided an overview of a number of specific items within her report, namely:

- The intent is to include in the CEO Report how SALHN is progressing with implementing the Strategic Plan;
- SALHN's leadership of the State-wide Voluntary Assisted Dying Navigation Service;
- Emergency Department Leadership;
- Ramping and the significant work to be undertaken around patient flow and accountability;
- Increasing bed capacity at Flinders Medical Centre over the next six to nine months; and
- Increasing Noarlunga Hospital capacity and capability.

The Board discussed, amongst other things:

- Additional rapid bed capacity across SALHN;
- Stage 1 of the Southern Area Health Direction, and work additional required around Stages 2 and 3; and
- Respiratory Procedural Review and governance through the Board Clinical Governance Sub-committee.

DECISION: The Board discussed and noted the content of the CEO Report

Action: SALHN Demand Response, bed capacity, demand, ramping, and interventions to be added to the next meeting agenda with the Minister for Health and Wellbeing
(Assignees: Ms Carole Lennon and Ms Sarah McRae)

~ Ms Richter rejoined the meeting via Teams at 11:51 am ~

11. SALHN Performance

11.1 SALHN Finance Performance Report

Mr Rooney, Acting Chief Finance Officer, provided an analysis of the headline and underlying results for the period, with key highlights including:

- Unfavourable \$3.8m to underlying budget result;
- End of year, SALHN is \$45.6m unfavourable to budget;
- Activity cost pressures related to elective surgery, obstetrics, neonatal, renal and colonoscopy totalling \$6.2m; and
- Savings under achievement \$0.2m.

The Board and Chief Executive Officer discussed:

- Financial sustainability and the work to be undertaken over the coming months to address; and
- The ongoing impact of COVID costs.

DECISION: **Noted the Finance Report**

11.2 SALHN Operational Performance report

The Acting Chief Operating Officer, Ms Kayes, provided an overview of the operational performance report, with the key highlights being, amongst other things:

- Transfer of care issues are being addressed through the Urgent Care Improvement Sprint interventions and will be the focus of work undertaken by the Patient Journey Collaborative; and
- Ongoing Patient Flow Improvement initiatives designed to create system capacity, improve flow and improve Emergency Department access.

The Board acknowledged, amongst other things:

- Access and requirement for a 'live' data dashboard and into the hands of the decision-makers;
- Increase in the rates of restraint and seclusion Mental Health;
- High Nursing Hours Per Patient Day (NHPPD) figures;
- Increase in Perennial Tears;
- Data availability and recording against our peers; and
- Maintaining traction with the actions that are reported to the Clinical Governance Sub-committee.

DECISION: **Noted the Operational Performance Report**

Action: **A review of the timeline of how financial and performance data is provided to the Governing Board**
(Assignees: Mr Matt Rooney and Ms Sarah McRae)

11.3 SALHN Workforce Performance report

Ms Natalie May, a proxy for Mr Michael Francese, Chief Workforce Officer, provided an overview of the quarterly Workforce Performance Report, with the key highlights being:

- 78 employees remain non-compliant with COVID vaccination requirements;
- Over 5635 influenza vaccinations have been administered;
- Performance Review and Development has increased since the last Board meeting, and work continues to address;
- SALHN is exploring options to undertake its own staff survey again, which will be presented to SALHN Executive and the Board for consideration;
- Mandatory Training will be the key focus for the remainder of 2022 in the lead-up to Accreditation;
- Fourteen open misconduct/investigation matters; and
- 2021-2022 saw a 19% reduction in workers' compensation claims.

The Board discussed, amongst other things:

- Non-compliant COVID vaccination staff, their return to work, and the impact and risks on our staff and patients.

DECISION: **Noted the SALHN Workforce Performance Report**

Action: **Progress on Worksite Safety Inspections to be addressed at the 22 September 2022 Board meeting**
(Assignees: Mr Michael Francese)

Action: **Draft Immunisation Policy on mandated vaccinations and recommendations to be provided to Governing Board members**
(Assignees: Mr Michael Francese)

11.4 Review of the Health Care Act 2008 | Governance

The Board Chair discussed the Fran Thorn Report and the governance reforms.

Discussions occurred with the Governing Board and Executive, with the highlights being;

- Three-year commissioning and funding cycle;
- Autonomy and agility to respond to service needs;

- Bi-directional accountability through the Service Agreement; and
- Experience in other jurisdictions.

DECISION: Noted the impacts and opportunities for enhancing the effectiveness of the SALHN governance

DECISION: Noted opportunities to further support the devolved model and improved governance at the Local Health Network level

Action: Shared partnerships, networking and collaboration, and innovation to be added to the next meeting schedule for the Local Health Network Chief Executive Officers and Chairs meeting
(Assignees: Ms Carole Lennon and Ms Sarah Woon)

Action: Ongoing strengthening of the governance model to be included in the covering letter with the Service Level Agreement
(Assignees: Ms Carole Lennon and Ms Sarah Woon)

12. Items from Sub-committees

12.1 Clinical Governance Sub-committee

DECISION: The Board noted the Extraordinary Clinical Governance Sub-committee Minutes of the 21 July 2022 meeting

12.1.1 Accreditation Update

Ms Richter provided an update on SALHN's preparedness for Accreditation, with the key highlights being:

- Recommendation by the Clinical Governance Sub-committee to revise SALHN's Accreditation date to 5 to 9 June 2023; and
- The Clinical Governance Unit is developing an action plan based on the recommendations from the mock assessment by Governance Plus.

DECISION: Approved the planned Assessment date to June 2023

12.2 Asset and Infrastructure Sub-committee

DECISION: The Board noted that the SALHN Board Asset and Infrastructure Planning Sub-Committee had not met since the previous SALHN Governing Board meeting

DECISION: The Board noted that SALHN Executive is progressing the proposed governance arrangements of the election commitments for consideration at the next Sub-Committee meeting

12.3 Community Engagement Sub-committee

DECISION: The Board noted the Community Engagement Sub-committee Update

12.4 Audit and Risk Sub-committee

Ms Hickey provided an update on the Audit and Risk Sub-committee held on 30 June 2022, with the key highlights being:

- Internal Audit and the intent to ensure the remaining FY22 Audits are incorporated into the FY23 plan;
- Annual Compliance Attestation has been reviewed by the Sub-committee and approved;
- Longer-term vision and plan for the Internal Audit program is for three years with an option for an additional two years; and
- SALHN Draft Financial Statements 2021-2022 for consideration.

DECISION: The Board noted the Audit and Risk Sub-committee minutes of the 30 June 2022 meeting

12.5 Nominations and Remuneration Sub-committee

DECISION: The Board noted the Nominations and Remuneration Sub-committee Update

13. Items for Noting

13.1 Statement of Intent with Flinders University

Ms Richter discussed opportunities for the Governing Board and Flinders University to come together to re-establish the relationship.

The Board Chair highlighted that a meeting is currently being scheduled with Professor Colin Stirling, Flinders University.

DECISION: The Board noted the Statement of Intent with Flinders University

13.2 Annual Compliance Attestation

DECISION: The Board noted the Annual Compliance Attestation

13.3 Declarations of Interest Report

DECISION: The Board noted the Interests Report

13.4 Decisions made by Circular Resolution

DECISION: The Board noted the decisions made by circular resolution

13.5 Clinical Incident Briefings

DECISION: The Board noted the Clinical Incident Briefings Report

13.6 Media Report

DECISION: The Board noted the Media Report

14. Correspondence

Items of correspondence relating to the Governing Board Chair were noted.

14.1 Board | Key Messages

- The Board's first meeting with the new Chief Executive Officer;
- The Board supports further service and infrastructure planning to meet demand;
- The Board adopted the recommendation to defer SALHN Accreditation to June 2023;
- The Board will work with the CEO and organisation to refresh the Strategic Plan; and
- The Board seeks improvement measures around culture.

Action: SALHN Communique to be prepared from the Governing Board
(Assignees: Ms Sarah Woon)

15. Next Meeting

The next meeting was confirmed as 22 September 2022 | 08.00 am – 01.30 pm to accommodate the Minister for Health and Wellbeing attendance from 8:00 am to 9:00 am.

16. Meeting Close

The meeting was formally closed at 1:44 pm.

The Chair thanked all in attendance for their contribution.



Approved as an accurate record of proceedings
BOARD CHAIR