



Riverland Mallee Coorong Local Health Network Governing Board Meeting # 17

Date: Friday 29 January 2021

Time: 11.00 am – 2.00 pm

Venue: Board Room, Riverland General Hospital, Berri

In Attendance: Peter Joyner (PJ), Elaine Ashworth (EA), Fred Toogood (FT)(via T/C to 1.30pm), Claudia Goldsmith (CG), Melanie Ottaway (MO), Shane Mohor (SM), Wayne Champion (WC), Craig Lukeman (CL)

Apologies:

Guests: Sharon Perkins, Director Aboriginal Health, RMCLHN

Secretariat: Jeanette Brown (JB)

Acknowledgement:

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

ITEM	DISCUSSION POINTS	OUTCOME / ACTIONS
1. IN CAMERA DISCUSSION		
2. MEETING OPENING		
2.1 Acknowledgement	<ul style="list-style-type: none"> PJ provided Acknowledgement 	
2.2 Present and Apologies	<ul style="list-style-type: none"> PJ, EA, FT (via T/C), CG, MO, WC, CL, JB, SM 	
2.3 Interests and Conflicts Disclosure 2.3.1 Board Disclosure Log	<ul style="list-style-type: none"> Nil conflicts of interest declared. Interests disclosure log noted and updates provided. 	
2.4 Confirmation of Minutes from previous meeting 2.4.1 Notes form Special Meeting 15 January 2021	<ul style="list-style-type: none"> The minutes from the Board Meeting held 26 November 2020 were endorsed. The notes from the Special Meeting held 15 January 2021 regarding Waikerie birthing services were endorsed. 	The Board endorsed the previous minutes and notes from the special meeting.
2.5 Review Actions Log	<ul style="list-style-type: none"> Actions Log Reviewed. Noted that item regarding Director Clinical Innovation key performance indicators to remain on Actions Log. 	

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2.6 December Out of Session item re Rural Support Service	<ul style="list-style-type: none"> Noted that nominations provided to Rural Support Service (RSS) by requested date of 18 December 2020. To date there has been no further information provided. 	
3. MATTERS FOR NOTING		
3.1 Chairperson Report	<ul style="list-style-type: none"> Report provided a summary of current issues including COVID-19, aged care, Emergency Department medical models, service planning and succession planning. 	Chairperson's Report noted.
3.2 Chief Executive Officer Report	<ul style="list-style-type: none"> Report highlighted achievements and current operational issues. Noted the current status regarding COVID-19 including significant planning for the vaccination campaign. Noted the smooth transition of the governance for the coordination of medical staffing for the Riverland General Hospital Emergency Department on 1 December 2020. Noted the implementation of the amended medical model for Murray Bridge Emergency Department with Bridge Clinic providing dedicated medical officers on weekends and public holidays from 1 December 2020. Noted the completion of the Riverland General Hospital Medical Resonance Imaging (MRI) building project. Noted the current status of aged care accreditation. Update provided regarding birthing services at Waikerie Health Service and the recruitment of midwives. Noted that an independent review will also be undertaken. 	CEO Report noted.
4. MATTERS FOR DISCUSSION		
4.1 Executive Director Clinical Innovation KPIs	<ul style="list-style-type: none"> Noted the information about the development of key performance indicators (KPIs) for the Executive Director Clinical Innovation position with the Executive Director Medical Services (EDMS) currently reviewing the draft indicators. 	<p>The Board noted the information about the ED Clinical Innovation KPIs.</p> <p>ACTION: Feedback from the EDMS to be provided to the Board out of session. Board Members to provide feedback and final KPIs to go to the next meeting.</p>
4.2 Disability Clearances in Aged Care	<ul style="list-style-type: none"> Noted the information about the requirements for National Disability Insurance Scheme (NDIS) Worker Screening Clearances in residential aged care effective from 1 February 2021 with a transition period for existing staff until their current clearance expires. Noted that the NDIS clearance is in addition to the National Police Clearance (all staff) and DHW Working with Children Check (if required). 	The board noted the information about NDIS Worker Screening Clearances in residential aged care.
4.3 Costing analysis of environmental improvements	<ul style="list-style-type: none"> Noted the information about the estimated costs associated with implementing environmental improvements such as solar panels and 	The Board noted the information about environmental improvement costs.

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	<p>Light Emitting Diode (LED) lighting in RMCLHN sites.</p> <ul style="list-style-type: none"> • Discussion about the inclusion of broader environmental impacts as part of the Board agenda. 	<p>ACTION: An Environmental Sustainability Report to be provided to the next meeting.</p>
4.4 CSSD Project Consultation Report	<ul style="list-style-type: none"> • Noted the information about the Riverland Central Sterile Supply Department (CSSD) hub and spoke model consultation report. 	<p>The board noted the information about the CSSD hub and spoke consultation report.</p>
4.5 Governing Board Committee Evaluation	<ul style="list-style-type: none"> • Noted the outcomes of the Governing Board Committee evaluation for the Finance Committee and the Clinical Governance Committee. 	<p>The Board noted the committee evaluation report for the Finance and Clinical Governance Committees.</p>
4.6 Commissioning Requests	<ul style="list-style-type: none"> • Noted the budget process where the Department for Health and Wellbeing (DHW) seek Commissioning submissions regarding clinical activity and budget bids regarding non clinical activity from Local Health Networks. • Noted the RMCLHN submissions and bids for 2020-21. • Discussion about the concept for the development of a Riverland Academy of Clinical Excellence and also the development of an Emergency Extended Care Unit for the Riverland General Hospital. 	<p>The Board noted the information about the commissioning submissions and budget bids for RMCLHN for 2021-22.</p> <p>ACTION: Topic to remain as a standing agenda item.</p>
4.7 Governing Board Mandatory Training	<ul style="list-style-type: none"> • Noted the requirements for Governing Board member mandatory training under the three categories of 'mandatory', 'required' and 'additional'. • Discussion about the options for completion of training. 	<p>The Board noted the mandatory training requirements and agreed to undertake online.</p> <p>ACTION: Manager Secretariat to develop Fact Sheets to assist.</p>
4.8 SA Health Aged Care Strategy	<ul style="list-style-type: none"> • Noted the information about the proposed workshop (19 February 2021) about the development of a SA Health Aged Care Strategy. • Noted that all regional LHN Chief Executive Officers involved in the work-streams. • Discussion about the questions posed for the consideration of Governing Boards. 	<p>The Board noted the pre-workshop information about the development of a SA Health Aged Care Strategy.</p> <p>ACTION: A teleconference to be held prior to the workshop to consider suggested discussion questions.</p>
5. STANDARD AGENDA ITEMS FOR DISCUSSION		
<p>5.1 Performance Report</p> <p>5.1.1 Finance and FTE Report-PPRC</p> <p>5.1.2 KPI Monthly Performance Report</p> <p>5.1.3 People and Culture Report</p> <p>5.1.3.1 Review of Claim Trends</p> <p>5.1.3.2 Leave Summary</p>	<ul style="list-style-type: none"> • The RMCLHN December Performance Reports were noted. • Noted that detailed discussion about financial performance reports occurred at the Finance Committee with all Board members now able to attend. • Key Performance Indicators, People and Culture, and Quality Risk and Safety performance reports, including compulsory reporting, were noted. • Discussion about items within the People and Culture report related to Criminal History Screening, mandatory training and work health and safety. 	<p>The Board noted the RMCLHN Performance Reports.</p> <p>ACTION: Director People and Culture to review items identified by the Board for further clarification.</p> <p>ACTION: EA to meet with CEO and QRS Manager to progress the review of QRS reporting to the Clinical Governance Committee and the Board.</p>

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<p>5.1.4 Quality and Safety Reports 5.1.5 Other</p>	<ul style="list-style-type: none"> Noted the review of trends in relation to Workers Compensation claims and the excess annual leave summary report. Discussion about the Quality Risk and Safety report format noting that work to be undertaken to review the detailed reporting that will go to Clinical Governance Committee and the development of a more streamlined report for the Board. Noted that a SAC1 incident occurred in December 2020 with the first RMCLHN Root Cause Analysis (RCA) currently underway. 	
<p>5.2 RMCLHN Strategic Plan Update 5.2.1 Final Strategic Plan 5.2.2 Next Steps – Plans and Priority Projects</p>	<ul style="list-style-type: none"> CEO provided a presentation regarding the status of the final Strategic Plan and the outcomes from the Executive Planning session held 19 January 2021 as a follow up to the 17 December 2020 Board and Executive Workshop. Discussion about the prioritised next level plans, the Executive Leads and timeframes. Noted that the Quality and Safety Plan was not in the top level of priorities (from both workshops) with discussion about whether this should be a higher priority. Discussion about the service planning projects priorities, the Executive Leads and timeframes. Noted that some service planning projects are currently underway with an update provided of progress to date. 	<p>The Board noted the update about the Strategic Plan, the development of subsequent plans, and the development of prioritised service planning projects.</p> <p>ACTION: CEO to liaise with QRS Manager about the potential to raise the priority for the development of the Quality and Safety Plan.</p>
<p>5.3 Barmera Plan for Continuous Improvement</p>	<ul style="list-style-type: none"> Noted the progress of the Barmera Plan for Continuous Improvement, noting that the Board Clinical Governance Committee discussed this in detail 28 January 2021. Noted the site visit undertaken by Board members including meeting with residents. Noted some environmental issues for residents with dementia. 	<p>The Board noted the Barmera Plan for Continuous Improvement.</p> <p>ACTION: Board members to forward opportunities for improvement arising from the Barmera site visit to the CEO.</p> <p>ACTION: More visible name badges to be investigated for use by staff and Board members.</p> <p>ACTION: MO to provide information related to environmental audits designed for residents with dementia.</p>
<p>5.4 Aged Care Internal Audit Report</p>	<ul style="list-style-type: none"> Noted the status of internal audits for Residential Aged Care (RAC) sites, noting that the Board Clinical Governance Committee discussed this in detail 28 January 2021. 	<p>The Board noted the status of RAC internal audits.</p>
<p>5.5 Aged Care External Review Report</p>	<ul style="list-style-type: none"> Noted the January 2021 report from the external consultant regarding RAC compliance, noting that the Board Clinical Governance Committee discussed this in detail 28 January 2021. 	<p>The Board noted the external reviewer RAC compliance.</p>

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6. MATTERS FOR DECISION		
6.1 Clinical Governance Committee Terms of Reference	<ul style="list-style-type: none"> Noted the amended Terms of Reference and the recommendation from the Clinical Governance Committee meeting held 28 January 2021 for the Board to approve the updated Terms of Reference. 	The Board approved the updated Clinical Governance Committee Terms of Reference.
7. MATTERS FOR INFORMATION		
7.1 RMCLHN Board Finance Committee Minutes (Draft)	<ul style="list-style-type: none"> Noted the draft Minutes of 25 November 2020. 	The Board noted the draft Minutes.
7.2 RMCLHN Board Audit and Risk Committee Minutes (Draft)	<ul style="list-style-type: none"> Noted the draft Minutes of 26 November 2020. 	The Board noted the draft Minutes.
8. PRESENTATION		
8.1 Sharon Perkins, Director Aboriginal Health	<ul style="list-style-type: none"> Presentation from Sharon Perkins, Director Aboriginal Health, RMCLHN. The presentation highlighted: <ul style="list-style-type: none"> Aboriginal Health Directorate Team. RMCLHN data including Aboriginal population, Aboriginal inpatient activity, top reasons for admission (Service Related Groups) and self-discharge rates. RMCLHN Achievements. Strategic aims for 2021 for RMCLHN, the Aboriginal Health Directorate and the community. The SA Health initiative to develop an Aboriginal Workforce Network. RMCLHN initiatives such as cultural audits and strategies to increase Aboriginal employment. 	<p>The Board noted the presentation from Sharon Perkins, Director Aboriginal Health.</p> <p>ACTION: A link to a poem by Steven Oliver to be provided out of session.</p>
9. ITEMS APPROVED BY CEO FOR NOTING		
9.1	<ul style="list-style-type: none"> Nil 	
10. CORRESPONDENCE		
10.1 Incoming – Minster Wade re Medical Education and Training Strategic Plan	<ul style="list-style-type: none"> Noted the correspondence about the draft Medical Education and Training Strategic Plan, noting the involvement of both the Executive Director Medical Services and Executive Director Clinical Innovation. 	The Board noted the correspondence.
11. MEETING FINALISATION		
11.1 Questions / Comments	<ul style="list-style-type: none"> Nil. 	
11.2 Review actions to be taken	<ul style="list-style-type: none"> Refer items: 4.1, 4.3, 4.6, 4.7, 4.8, 5.1, 5.2, 5.3 and 8.1. 	
11.3 Meeting Evaluation / Suggestions for next meeting	<ul style="list-style-type: none"> PJ summarised the meeting. Next meeting to review actions from the Board self-evaluation. 	

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11.4 Next meeting	Next Meeting - Date: 25 February 2021 Time: tbc Location: Murray Bridge	
11.5 Meeting Close	2.40 pm	

Signed:

Peter Joyner
Chair
Date: 25/2/21

