



MINUTES

Riverland Mallee Coorong Local Health Network Governing Board Meeting # 15

Date: Thursday 29 October 2020

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), Claudia Goldsmith (CG), Melanie Ottaway (MO), Wayne Champion (WC), Craig Lukeman (CL)

Apologies:

Guests: Shane Mohor (SM), Mark Mudge, Project Manager, Riverland General Hospital Emergency Department Governance Transition

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	• PJ provided Acknowledgement
2.2	Present and Apologies	• PJ, EA, FT, CG, MO, WC, CL, JB; Apology - SM
2.3	Interests and Conflicts Disclosure 2.3.1 Board Disclosure Log	• Nil conflicts of interest declared. • Interests disclosure log noted and updates provided.
2.4	Confirmation of Minutes from previous meeting	• The minutes from the Board Meeting held 24 September 2020 were endorsed.
2.5	Review Actions Log	• Actions Log Reviewed.
3. MATTERS FOR NOTING		
3.1	Chairperson Report	• Report provided a summary of current issues including: <ul style="list-style-type: none"> ○ The ongoing challenges associated with COVID-19. ○ Emergency Department medical staffing. ○ Executive appointments.
		The Board endorsed the previous minutes. Chairperson's Report noted.

<p>3.2 Chief Executive Officer Report</p>	<ul style="list-style-type: none"> • Report highlighted achievements and current operational issues. • Noted the status update regarding the transition project for the Riverland General Hospital Emergency Department. • Noted the official opening of the Murray Bridge Hospital Emergency Department redevelopment. • Noted progress with the Riverland General Hospital Medical Resonance Imaging (MRI) building project. • Noted the current status regarding COVID-19. • Noted the appointments to the positions of: Executive Director Medical Services, Executive Director of Clinical Innovation and Executive Director Community and Allied Health along with the temporary appointment to the Director People and Culture position. • Discussion about the Executive Director Clinical Innovation role. • Discussion about medical imaging services in Murray Bridge and computerised tomography (CT) scanner capacity. 	<p>CEO Report noted.</p> <p>ACTION: Executive Director Clinical Innovation and CEO to develop key performance indicators (KPIs) associated with the role and provide a progress report to the Board in three months.</p>
<p>4. MATTERS FOR DISCUSSION</p>		
<p>4.1 Aboriginal Health</p>	<ul style="list-style-type: none"> • Noted the issues raised at the three Aboriginal Community Forums held in October 2020 at Murray Bridge, Meningie and Berri. • Noted that priorities differed across communities with key themes being mental health, community Aboriginal Health Workers, General Practitioner services and advocacy for community controlled health services (in the Riverland). • Noted that an Action Plan to be developed to address identified issues. • Discussion about the Cultural Respect Workshop undertaken by Board members. 	<p>The Board noted the outcomes from the Aboriginal Community Forums and Board Cultural Respect Workshop.</p> <p>ACTION: Outcomes from Aboriginal Community Forums to remain as a standing agenda item and a quarterly update to be provided.</p>
<p>4.2 Across Government Facilities Management Service Delivery 2020-21</p>	<ul style="list-style-type: none"> • Noted the information about the 2020-21 Preventive Maintenance budget from the Department of Infrastructure and Transport (DIT) in accordance with the Across Government Facilities Management Agreement (AGFMA). • Noted that the budget for 2020-21 from DIT has been calculated utilising the 2019-20 budget allocation plus inflation although the actual expenditure for 2019-20 was significantly less than the budget allocation. 	<p>The Board noted the information about the 2020-21 Preventive Maintenance budget and endorsed the CEO to write to DIT requesting budget allocation based on actual expenditure.</p> <p>ACTION: CEO to write to DIT regarding the 2020-21 budget allocation.</p>
<p>4.3 Funding request to DHW re Emergency Department Medical Models</p>	<ul style="list-style-type: none"> • Noted the Department for Health and Wellbeing (DHW) request for a funding proposal for the change in Emergency Department Medical Models in Riverland General Hospital and Murray Bridge Hospital. • Noted the response to the Service Agreement (refer Item 6.1) regarding the cost pressure associated with the medical models. • Noted that the funding proposal to be submitted by 6/11/2020. 	<p>The Board noted the information about the Emergency Department Medical Model Funding Proposal.</p>

<p>4.4 SA Health Aged Care Strategy</p>	<ul style="list-style-type: none"> Noted the information about the development of a SA Health Aged Care Strategy to set the future vision for sustainable State Government funded aged care services. Noted the allocation of regional LHN Chief Executive Officers to the work-streams. Discussion about strategic directions for regional LHNs being the responsibility of Governing Boards who must be engaged in the development of this strategy and that draft principles need to support Governing Board governance of aged care. 	<p>The Board noted the information about the development of a SA Health Aged Care Strategy and the governance principles for the project.</p>
<p>4.5 Barmera Aged Care Services</p>	<ul style="list-style-type: none"> Discussion about the interim report from the Commonwealth Government Aged Care Quality and Safety Commission (ACQSC) following the unannounced re-assessment of Barmera Aged Care Services 21-25 September 2020. Discussion about the RMCLHN proposed response to the interim report and proposed plan for continuous improvement (PCI). The improvements since 2019 were noted with current findings related to dignity, respect and some aspects of clinical care noted. Discussion about the role of RN2 positions in relation to supervision and auditing. Noted the vacancy in the regional RN4 position and plan to address this. Discussion about the impact of COVID-19 on strategies such as resident and carer meetings with management and potential for Board member involvement in meetings. Discussion about the number of residential aged care (RAC) Identification numbers (IDs) and associated benefits versus costs. 	<p>The Board noted the information about the Barmera Residential Aged Care Services.</p> <p>ACTION Final Barmera response and PCI to be provided to Board members.</p> <p>ACTION: Monthly Board report to be provided against the Barmera PCI.</p> <p>ACTION: Report to be provided detailing accreditation status and progress on any Improvement Plans for each RAC site.</p> <p>ACTION: Monthly Board Report to be provided against the RMCLHN internal audit schedule for all RAC sites and including details of improvement plans arising from the audits.</p> <p>ACTION: RMCLHN to commission external aged care audits for all aged care sites with initial focus on RAC sites with report to be provided to the Board.</p> <p>ACTION: Health Advisory Councils to conduct regular consumer interviews at all RAC sites with initial focus on Barmera and reports to be provided to the Board.</p> <p>ACTION: CFO to investigate rationale for multiple RAC IDs and provide cost benefit analysis.</p> <p>ACTION: Consideration to be given to strengthening Board member interaction with aged care consumers.</p>

<p>4.6 National Disability Insurance Scheme changes for clients in residential aged care</p>	<ul style="list-style-type: none"> Noted the information about the National Disability Insurance Scheme (NDIS) changes related to NDIS clients in residential aged care and the reporting requirements relating to restrictive practices that will come into effect in December 2020. 	<p>The Board noted the information about the NDIS changes for clients in residential aged care. ACTION: Report to be provided to the Board about RMCLHN readiness for NDIS changes and reporting requirements. ACTION: Ongoing restrictive practices report to be provided to Clinical Governance Committee.</p>
<p>4.7 Governing Board Public Meetings</p>	<ul style="list-style-type: none"> Discussion about the Governing Board Public Meetings held 26 October in Berri (with the Berri Barmera Health Advisory Council Annual General Meeting) and 27 October in Murray Bridge (with the Murray Bridge Health Advisory Council Annual General Meeting). 	<p>The Board noted the information about the 2020 Public Meetings. ACTION: Consideration to be given to other strategies for future Public Meetings including the potential for increasing access to all sites and live streaming.</p>
<p>5. STANDARD AGENDA ITEMS FOR DISCUSSION</p>		
<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>5.1.4 Quality and Safety Reports</p> <p>5.1.5 Other</p>	<ul style="list-style-type: none"> The RMCLHN September 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. Noted the information summarising actions implemented following the analysis of the monthly Quality Risk and Safety report. Noted that detailed analysis of the Quality Risk and Safety reports occurred at the Clinical Governance Committee meeting. 	<p>The Board noted the RMCLHN Performance Reports. ACTION: Misconduct matters within the People and Culture Report to be reported by site.</p>
<p>5.2 RMCLHN Strategic Plan Update</p>	<ul style="list-style-type: none"> Noted the Evaluation Report from the RMCLHN Regional Health Advisory Council Conference held 25 September 2020 including the specific consultation session on the draft Strategic Plan. Noted the positive feedback about the conference and desire for RMCLHN conferences to be held annually or six monthly. Noted also the discussion at the conference about a potential statewide HAC Conference as raised by Minister Wade with general support for such a conference to be held every two years. Noted that consultation on the draft Strategic Plan continues to 4 December 2020. 	<p>The Board noted the Regional HAC Conference Evaluation Report including the Strategic Plan consultation session.</p>

6. MATTERS FOR DECISION	
<p>6.1 RMCLHN Service Agreement with the Department for Health and Wellbeing (DHW)</p>	<ul style="list-style-type: none"> Noted the recommendation from the Finance Committee for the Board to endorse the signing of the 2020-21 Service Agreement but noting that RMCLHN will not be able to deliver a balanced budget with the current allocation due to the challenges associated with the emergency department medical models, inpatient medical model and implementation of improvements to aged care services.
7. MATTERS FOR INFORMATION	
<p>7.1 RMCLHN Board Finance Committee Minutes (Draft)</p>	<ul style="list-style-type: none"> Noted the draft Minutes of 24 September 2020. <p>The Board noted the draft Minutes.</p>
8. PRESENTATION	
<p>8.1 Mark Mudge, Project Manager Riverland General Hospital Emergency Department Governance Transition</p>	<ul style="list-style-type: none"> Presentation from Mark Mudge, Project Manager Riverland General Hospital Emergency Department Governance Transition. The presentation highlighted: <ul style="list-style-type: none"> Project approach Projected patient flows Challenges IT systems Managing demand peaks and troughs <p>The Board noted the presentation about the Riverland General Hospital Emergency Department Governance Transition Project.</p>
<p>8.2 MRI Redevelopment</p>	<ul style="list-style-type: none"> Micheal Morris, Senior Environment Officer, Riverland General Hospital & Barmera Health Services, led a tour of the MRI redevelopment project.
9. ITEMS APPROVED BY CEO FOR NOTING	
<p>9.1</p>	<ul style="list-style-type: none"> Nil.
10. CORRESPONDENCE	
<p>10.1 Incoming</p>	<ul style="list-style-type: none"> Noted - Galpins – Aged Care Prudential Compliance Audit Management Letter.
11. MEETING FINALISATION	
<p>11.1 Questions / Comments</p>	<ul style="list-style-type: none"> Nil
<p>11.2 Review actions to be taken</p>	<ul style="list-style-type: none"> Refer items: 3.2, 4.1, 4.2, 4.5, 4.6, 4.7, 5.1 and 6.1
<p>11.3 Meeting Evaluation / Suggestions for next meeting</p>	<ul style="list-style-type: none"> PJ summarised the meeting.

11.4 Next meeting	Date: Thursday 26 November 2020 Time: tbc	
11.5 Meeting Close	Location: Murray Bridge 2.30 pm	

Signed:

Peter Joyner
Chair
Date: 26/11/2020

