



MINUTES

Riverland Mallee Coorong Local Health Network Governing Board Meeting # 22

Date: Friday 30 July 2021
Time: 11.45 am – 3.00 pm
Venue: via MS TEAMS

In Attendance: Peter Joyner (PJ), Elaine Ashworth (EA), Fred Toogood (FT), Claudia Goldsmith (CG), Mel Ottaway (MO)
Wayne Champion (WC), Craig Lukeman (CL), Louis Greenlees (LG)
Apologies: Shane Mohor (SM)
Secretariat: Jeanette Brown (JB)

Guests:

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		
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2. MEETING OPENING		
2.1	Acknowledgement	
2.2	Present and Apologies	• PJ provided Acknowledgement • PJ, EA, FT, CG, MO, WC, CL, LG 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 June 2021 were endorsed. The Board endorsed the previous minutes.
2.5	Review Actions Log	• Actions Log Reviewed. • Discussion re listing of potential future Board members. ACTION: Reminder to be forwarded to Board Chair re potential board members and report to be provided at next meeting.

3. MATTERS FOR NOTING	
3.1 Chairperson Report	<ul style="list-style-type: none"> Report provided a summary of current issues.
3.2 Chief Executive Officer (CEO) Report	<ul style="list-style-type: none"> Report highlighted achievements and current operational issues including. <ul style="list-style-type: none"> Current status of COVID-19. Planning Day held in June 2021 Riverland Academy of Clinical Excellence and the appointment of six interns (to commence February 2022). Extended Emergency Care Unit Midwifery Model of care trial Mental Health Services White Ribbon Accreditation Discussion about the COVID-19 Vaccination rates as discussed at the Clinical Governance Committee held 29 July 2021. Noted that staff working in residential aged care settings are required to be vaccinated by 17 September 2021.
4. MATTERS FOR DISCUSSION	
4.1 Annual Attestation Statement	<ul style="list-style-type: none"> Noted the information about the Annual Attestation Statement required to be submitted to the Australian Commission on Safety and Quality in Health Care (ACSQHC).
4.2 Governing Board and Sub-Committee self-evaluation reports.	<ul style="list-style-type: none"> Noted the summary reports of the Self Evaluation of the Governing Board, Clinical Governance Committee and the Finance Committee. Noted the suggestions for focus areas for the coming year for the Governing Board. Noted the recommendation from both the Clinical Governance Committee and the Finance Committee to clarify membership of both committees. The outcome is for Board Members appointed to the committee to be members, CEO to be ex-officio and staff members to be attendees. Other Board members to continue to attend Finance Committee as other Board member attendees.
4.3 RMCLHN Organisational Development Strategy	<ul style="list-style-type: none"> Louise Greenlees, Director People and Culture in attendance. Noted the draft Organisational Development Strategy that is aligned to the SA Health Leadership and Culture Framework. Discussion about language with some actions to be worded stronger than 'explore' and timeframes to be reviewed with aim to reduce but taking into consideration other priorities. Discussion about planned RMCLHN staff survey and noted the

Chairperson's Report noted.

CEO Report noted

The Board endorsed the Annual Attestation Statement.
ACTION: Signed attestation statement to be forwarded to the ACSQHC.

The Board noted the self-evaluation reports for the Board, Clinical Governance Committee and Finance Committee.
The Board noted the recommendation to clarify membership of committees.
ACTION: CEO and Chair to discuss suggested focus areas and action plan to be provided to the next meeting.
ACTION: Terms of Reference of Board Committees to be amended.

The Board endorsed the Organisational Strategy for implementation with minor amendments.

ACTION: Minor amendments to be made to the Organisational Development Strategy.

	<ul style="list-style-type: none"> recent SA wide survey (refer Agenda Item 4.7). Discussion about reporting implementation progress noting this will be incorporated within the regular Operational Plan Progress Report to commence from August 2021 and outcomes will also be reported in the monthly People and Culture Report. 	<p>ACTION: Implementation progress reporting to be incorporated into the Operational Plan Progress Report to the Board.</p>
4.4 RMCLHN Minor Works Allocation 2021-2022	<ul style="list-style-type: none"> Discussion about the proposed RMCLHN Minor Works allocation for 2021-22 and process to determine priorities. 	<p>The Board endorsed the Minor Works allocation for 2021-22.</p>
4.5 AGFMA 2021-2022 Service Delivery Planning	<ul style="list-style-type: none"> Noted the correspondence from Across Government Services regarding the 2021-22 Preventative Maintenance schedule. Discussion about the RMCLHN proposal to approve the 2021-22 budget based on 2020-21 actual expenditure plus a 2% inflation factor. 	<p>The Board endorsed the 2021-22 budget based on 2020-21 actual expenditure plus inflation.</p>
4.6 SA Rural Medical Fees Agreement Negotiations	<ul style="list-style-type: none"> Discussion about the status of the SA Rural Medical Fees Agreement (SARMFA) negotiations. Noted that the current agreement has expired and negotiations for the new agreement are being led through the Rural Support Service (RSS) with the Rural Doctors Association (SA) and the Australian Medical Association (SA). An external negotiator is currently being considered to assist the process with different payment options being analysed by all parties. Noted that the agreement no longer applies to Riverland General Hospital as they operate under a salaried model and that the Murray Bridge Emergency Department requires a hybrid model (compared to the current agreement). Noted the government processes for approval given the anticipated total value of the agreement. Discussion about recruitment issues for the medical workforce across South Australia and the aim of RMCLHN to develop our own workforce through the Riverland Academy of Clinical Excellence. Noted that regular updates to be provided to the Board. 	<p>The Board noted the update about the SA Rural Medical Fees Agreement negotiations.</p>
4.7 I Work for SA Survey – RMCLHN Results	<ul style="list-style-type: none"> Discussion about the I Work for SA – Your Voice Survey results for RMCLHN, noting that the survey covered all public sector employees in South Australia and was organised through the Office for the Commissioner for Public Sector Employment. Noted the process within RMCLHN to consider results at site level (depending on the response rate) and to develop action plans at both site level and LHN wide to address areas for improvement. Noted the process for a RMCLHN specific survey with timing to be determined. 	<p>The Board noted the information about the I Work for SA – Your Voice Survey results. ACTION: The LHN wide implementation plan to be provided to the October Governing Board meeting.</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>5.1.4 Quality and Safety Reports</p> <p>5.1.5 Other</p>	<ul style="list-style-type: none"> • The RMCLHN June Performance Reports were noted. • Noted that detailed discussion about financial performance reports occurred at the Finance Committee. • Noted the interim full year budget over-run for 2020-21 of \$6.314 million. Following closure at end of June, Period 13 adjustments have resulted in over-run of \$5.8 million. • Key Performance Indicators, People and Culture, and Quality Risk and Safety performance reports, including compulsory reporting, were noted. • Louise Greenlees, Director People and Culture in attendance for the People and Culture report. • Noted that detailed discussion about the Quality and Safety reports occurred at the Clinical Governance Committee. 	<p>The Board noted the RMCLHN Performance Reports</p>
<p>5.2 RMCLHN Planning Update</p> <p>5.2.1 Planning Workshop Report</p>	<ul style="list-style-type: none"> • Noted the summary report of the RMCLHN Planning Workshop held 25 June 2021. • Discussion about facilitation on the day with feedback to be provided to the Secretariat. • Noted the process for the development of the various plans workshopped during the day. 	<p>The Board noted the summary report of the RMCLHN Planning Workshop held 25 June 2021.</p>
<p>5.3 Rural Support Service Governance Committee Report</p>	<ul style="list-style-type: none"> • MO provided an update from the RSS Governance Committee noting that endorsed minutes will be provided in future. Key discussion items included: <ul style="list-style-type: none"> ○ RSS decision making processes and interface with CEO Group and Chairs Group. ○ Future governance arrangements. ○ Presentation from Diabetes Services. ○ Development of an RSS Clinical Governance Framework. • Noted the plan to hold a RSS stakeholder meeting linked to the Health Advisory Council Conference in October. 	<p>The Board noted the update about the RSS Governance Committee.</p>
6. MATTERS FOR DECISION		
<p>6.1</p>	<ul style="list-style-type: none"> • Nil 	
7. PRESENTATION		
<p>7.1</p>	<ul style="list-style-type: none"> • Nil 	
8. MATTERS FOR INFORMATION		
<p>8.1 RMCLHN Board Committee Minutes</p>	<ul style="list-style-type: none"> • Noted the draft Minutes of 24 June 2021. 	<p>The Board noted the draft Minutes.</p>

8.2	RMCLHN Board Governance Committee Minutes	Clinical Minutes	<ul style="list-style-type: none"> Noted the draft Minutes of 23 June 2021. Noted the discussion at the meeting held 29 July 2021 about vaccination rates. 	The Board noted the draft Minutes.
9. ITEMS APPROVED BY CEO FOR NOTING				
9.1			<ul style="list-style-type: none"> Nil 	
10. CORRESPONDENCE				
10.1	Incoming – Directive	Mental Health Bed	Noted the correspondence from the SA Health Chief Psychiatrist.	The Board noted the correspondence.
10.2	Incoming – Authorisation Authority	Instrument – Procurement of	Noted the correspondence from the Chief Executive DHW.	The Board noted the correspondence.
10.3	Incoming – Remuneration for Boards and approved committees	Review into rLHN Governing	Noted the correspondence from the Minister for Health and Wellbeing.	The Board noted the correspondence.
10.4	Incoming – relating to restrictive practices	Important changes to the use of restrictive practices	Noted the correspondence from the Aged Care Quality and Safety Commission.	The Board noted the correspondence.
10.5	Incoming – Level	RMCLHN Performance	Noted the correspondence from the Deputy Chief Executive, Commissioning and Performance, DHW with explanation provided of performance levels.	The Board noted the correspondence.
10.6	Outgoing – Quality Account	Safety and Account 2020-21	Noted the correspondence to DHW and noted discussion also occurred at Clinical Governance Committee.	The Board noted the correspondence.
10.7	Outgoing – Commissioned Casemix Activity	RMCLHN	Noted the correspondence to the Deputy Chief Executive, Commissioning and Performance, DHW.	The Board noted the correspondence.
10.8	Incoming – Agreement	Draft Health Service	Noted the draft DHW Health Service Agreement was forwarded to the CEO during the meeting and that the CFO will undertake an analysis.	The Board noted the correspondence. ACTION: CFO to provide an analysis of the draft Health Service Agreement.
10.9	Incoming – General Purpose Statements	RMCLHN 2020-21 Purpose Financial	<ul style="list-style-type: none"> Noted the General Purpose Financial Statements (GPFS) provided by Financial Accounting, SA Health. Noted that detailed discussion about the GPFS occurred at the Finance Committee. Noted the timeframe requirements: <ul style="list-style-type: none"> 30 July – Feedback to GPFS 4 August – Expected receipt of final Annual Financial Statement (AFS). 5 August – Joint meeting of Finance Committee and Audit and Risk Committee to endorse AFS. 6 August AFS and declaration from CEO and Governing Board Chair to be returned 	The Board noted the correspondence. ACTION: Board Chair to sign the Financial Statements Certification (with CEO) following discussion of the AFS at the joint meeting of the Finance Committee and Audit and Risk Committee.

	<ul style="list-style-type: none"> The Board endorsed the Chair to sign the Financial Statements Certification following discussion of the AFS at the joint meeting of the Finance Committee and Audit and Risk Committee.
11. MEETING FINALISATION	
11.1 Questions / Comments	<ul style="list-style-type: none"> Noted that CG will be an apology for August.
11.2 Review actions to be taken	<ul style="list-style-type: none"> Refer items:
11.3 Meeting Evaluation / Suggestions for next meeting	<ul style="list-style-type: none"> PJ summarised the meeting.
11.4 Next meeting	<p>Next Meeting - Date: 27 August 2021 Time: 11.30 – 3.00 pm Location: TEAMs or Murray Bridge (tbc) 3.00 pm</p>
11.5 Meeting Close	

Signed:

Peter Joyner
 Chair
 Date: 27/8/21

