

MINUTES

Riverland Mallee Coorong Local Health Network Governing Board Meeting # 16

Date: Thursday 26 November 2020

Time: 11.00 am – 2.30 pm Venue: via Microsoft TEAMs

In Attendance: Peter Joyner (PJ), Elaine Ashworth (EA), Fred Toogood (FT), Claudia Goldsmith (CG), Melanie Ottaway (MO),

Wayne Champion (WC), Craig Lukeman (CL)

Apologies: Shane Mohor (SM)

Guests: Lyn Poole, Chief Executive Officer and Mandy McCulloch, General Manager, Rural Doctors Workforce Agency (via TEAMs)

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 (late apology due to COVID-19) 		
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 29 October 2020 were endorsed.	The Board endorsed the previous minutes.	
2.5 Review Actions Log	Actions Log Reviewed.		
3. PRESENTATION			
3.1 Lyn Pool, CEO and Mandy McCulloch, General Manager, Rural Doctors Workforce Agency	 Presentation from Lyn Poole, Chief Executive Officer and Mandy McCulloch, General Manager, Rural Doctors Workforce Agency (RDWA). The presentation highlighted: 	The Board noted the presentation from the Rural Doctors Workforce Agency.	

	 Attraction, recruitment and retention of the General Practitioner (GP) workforce. High school and university programs and support for intern programs, including specific sites in RMCLHN. Locum service for GPs including procedural GPs. SAVES program with expansion in 2020 to 47 sites and now operating 7.00 pm – 7.00 am. Education and training programs to ensure maintenance of credentialing requirements. Professional development activities. Programs to support spouses and engagement with communities. Expansion of programs to broader primary health workforce and needs assessment related to this. Specific focus on Aboriginal and Torres Strait Islander workforce and development of pathways for Aboriginal Health Workers. Scholarship and bursary program and the John Flynn Placement Program supporting medical students on placement. Outreach programs related to maternal health, mental health, ear and eye health and chronic diseases. 	
4. MATTERS FOR NOTING	and by a moduli and amonio discusses.	
4.1 Chairperson Report	 Report provided a summary of current issues including: the ongoing challenges associated with COVID-19; Emergency Department medical staffing; the provision of contemporary aged care services; and planning for the future. 	Chairperson's Report noted.
4.2 Chief Executive Officer Report	 Report highlighted achievements and current operational issues. Noted the focus on engagement with Aboriginal communities including three Aboriginal Community Engagement forums and sponsoring and participating in NAIDOC week celebrations. Executive enjoyed an 'on country' cultural experience at Calperum Station and also agreed to establish four Aboriginal and Torres Strait Islander trainee internship positions. Noted the current status regarding COVID-19 and the restrictions implemented as a result of the community transmission cluster in South Australia. Noted some of the service planning priorities for RMCLHN to be explored at the December workshop. Noted the status update regarding the transition project for the Riverland General Hospital Emergency Department. Noted progress with the Riverland General Hospital Medical Resonance Imaging (MRI) building project. 	CEO Report noted.

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		•	Noted the current status of aged care accreditation. Noted the commencement of Brad Birleson to the position of: Executive Director Community and Allied Health.	
5. MA	TTERS FOR DISCUSSION			
	Barmera Aged Care Plan for inuous Improvement Update	•	Noted the information about the Barmera Residential Aged Care (RAC) Plan for Continuous Improvement developed as a result of the Assessment contact visit by the Aged Care Quality and Safety Commission 21-25 September 2020 and the draft report received in October 2020. Noted that the plan will continue to evolve and implementation will be reported to the Board monthly and also to the Clinical Governance Committee.	The Board noted the information about the Barmera Residential Aged Care Plan for Continuous Improvement. ACTION: Monthly reports to be provided to the Board regarding implementation of the Plan for Continuous Improvement.
5.2	RMCLHN Aged Care Accreditation Summary	•	Noted the information about the current accreditation status for all RAC sites noting that RAC Providers, receiving Australian Government subsidies, are assessed against the Aged Care Quality Standards by the Aged Care Quality and Safety Commission. Accreditation involves three-yearly full audits to assess compliance with the Quality Standards. In addition, the Commission monitors the quality of care and services, by conducting annual visits, and manages any non-compliance with the Quality Standards. All assessments are conducted unannounced.	The Board noted the information about the current accreditation status for all Residential Aged Care sites.
5.3	RMCLHN Aged Care Internal Audit Report	•	Noted that historically, performance monitoring audits developed by the Aged Care Quality Association (ACQA) have been undertaken. These were not meeting the needs of the organisation as they were not aligned to RMCLHN policies and procedures and were not effectively identifying all gaps in clinical practice. A RMCLHN performance monitoring framework for Aged Care was subsequently developed and commenced in July 2020 with Improvement Plans developed against identified areas. Discussion about frequency, scheduling across different sites and sample sizes.	The Board noted the report about the aged care internal audit program. ACTION: Future internal audit reports to incorporate sample size and frequency. ACTION: Internal audit reports to be a regular and ongoing item for Clinical Governance Committee and, in the short term, also for the Board.
5.4	RMCLHN Aged Care External Audit Update	•	Noted that three proposals received for undertaking external reviews of all aged care sites, initially RACs and then Multi Purpose Services. Process to review proposals and determine provider occurring. Program to be established as soon as possible with reports to be provided to Clinical Governance Committee and the Bard. Proposals to be reviewed to determine	The Board noted the information about undertaking external reviews of aged care sites.
5.5	RMCLHN Aged Care Consumer Interviews Report	•	Noted that a report from the Health Advisory Council Presiding Member not yet available and the increased restrictions due to COVID-19 have impacted the timeframes for interviews.	The Board noted the information about consumer interviews in aged care sites.

5.6 RMCLHN Aged Care Identification Numbers	 Noted the historical allocation of identification numbers relating to specific high care and low care facilities with this delineation no longer relevant. Noted the analysis in relation to viability supplements were those sites to be converted to one identification number. 	The Board noted the information about aged care identification numbers.
5.7 Board interaction with aged care consumers	 Noted the proposed 2021 Board meeting schedule incorporated opportunities for Board interaction with aged care consumers during site visits. Schedule subject to any restrictions related to COVID-19. 	The Board noted the information about proposed interaction with aged care consumers in 2021.
5.8 NDIS changes related to residential aged care	 Noted that the National Disability Insurance Scheme (NDIS) Quality and Safeguards Commission requires all aged care services (RAC and MPS) to meet the requirements of the NDIS restrictive practices policies from 1 December 2020. Noted that there are nine NDIS consumers in residential aged care within RMCLHN including Renmark, Loxton, Barmera and Karoonda with none currently having restrictive practices in place, in accordance with the NDIS definition. This will be monitored monthly across the RMCLHN. 	The Board noted the information about restrictive practices policies related to NDIS consumers in residential aged care. ACTION: Director People and Culture to review requirements for Department for Human Services Disability Clearance within residential aged care settings.
	 Discussion about criminal history clearances required under NDIS policies and whether this is applicable within the aged care setting. 	-
5.9 Other matters for discussion 5.9.1 Health Ageing Team	 Noted that the Commonwealth Home Support Program (CHSP) will be expanded with an increase in packages for the RMCLHN. This expansion will require an expansion to the Healthy Ageing Team with no space currently available within the Berri or Murray Bridge sites. A proposal is being developed to consider a rental option in Berri. 	The Board noted the information about the expansion to the CHSP program and the impact on accommodation of the Healthy Ageing Team.
6. STANDARD AGENDA ITEMS FOR DISC	USSION	
6.1 Performance Report 6.1.1 Finance and FTE Report- PPRC	 The RMCLHN October 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. 	The Board noted the RMCLHN Performance Reports.
6.1.2 KPI Monthly Performance Report 6.1.3 People and Culture Report 6.1.4 Quality and Safety Reports 6.1.5 Other	 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. Discussion about falls incidence and definitions and the potential for benchmarking. Noted that further detail incorporated into the People and Culture report related to misconduct matters and an increased emphasis on leave balances that will be included in future reports. 	ACTION: Director People and Culture to review trends in claims per Executive to determine if an increase in employees impacts on the data.

6.2	RMCLHN Strategic Plan Update	•	Discussion about performance review and development data for six months and 12 months. Discussion about the claims statistics per Executive with a trend increase noted that may relate to increased staff. Noted that feedback on the draft Plan open to 4 December 2020 and will be discussed and finalised at the planning session 17 December 2020.	The Board noted the Strategic Plan update.
6.3	Aboriginal Community Forums Report	•	Three Aboriginal Community Forums were held in October 2020 (in Murray Bridge, Meningie and Berri) with a number of Board members attending each forum. The main objectives of the forums were to: Share the draft RMCLHN Strategic Plan with community. Gain feedback and lived experiences in relation to the four main strategic themes within the Strategic Plan. To provide an opportunity for community to express their views on any issue they deemed important regarding Aboriginal Health. Discussion about the key themes emerging from issues raised at the forums. Discussion about the history of the development of the Aboriginal Community Controlled service in Murray Bridge and community discussions in the Riverland. Noted that RMCLHN would support progression to community control but this would need to be led from the community. Potential to facilitate a discussion with key Elders and interested community members to determine interest and capacity for progressing.	The Board noted the report of the 2020 Aboriginal Community Forums. ACTION: A quarterly update report to be provided to the Board about potential community control development in the Riverland.
7. MA1	TERS FOR DECISION			
7.1	RMCLHN Risk Management Framework	•	Noted the RMCLHN Risk Management Framework that was endorsed, in August 2020, by the RMCLHN Audit and Risk Committee pending the inclusion of the Department for Health and Wellbeing (DHW) review and update of the assessment criteria. The Risk Consequence and Likelihood Criteria were endorsed by DHW early November 2020 and now included in the RMCLHN Risk Management Framework. Discussion about the ratings within the alignment of risk tolerance and the risk matrix score and references to a section that is not included.	The Board approved the RMCLHN Risk Management Framework with minor amendments.
7.2	Updated RMCLHN Audit & Risk Committee Terms of Reference	•	Noted the updated RMCLHN Audit and Risk Committee Terms of Reference recommended by the Audit and Risk Committee for the Board's approval. Noted a correction to years of service.	The Board approved the RMCLHN Audit and Risk Committee Terms of Reference.

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8. MATTERS FOR INFORMATION					
8.1 RMCLHN Board Finance Committee Minutes	Noted the draft Minutes of 29 October 2020.	The Board noted the draft Minutes.			
8.2 RMCLHN Board Clinical Governance Committee Minutes		The Board noted the draft Minutes.			
8.3 Workshop on Rural Support Service (RSS) Governance	Noted the facilitated workshop, attended by CEOs and Board Chairs, about the governance structure of the RSS. Noted the proposal to move towards a skills based Board with representation from each LHN as a subcommittee of the Barossa Hills Fleurieu LHN Board.	The Board noted the information about the RSS Governance workshop.			
8.4 RMCLHN Board Schedule 2021	 Noted the proposed draft schedule for Board and Committee meetings for 2021, subject to COVID-19 restrictions, and noting the increase in two day visits to accommodate site visits. 	The Board supported in principle the proposed schedule for 2020-21.			
9. ITEMS APPROVED BY CEO FOR NOTI	NG				
9.1	• Nil				
10. CORRESPONDENCE					
10.1 Governance in Aged Care Webinar	 Discussion about Michael Goldsworthy Webinar scheduled for 28 January 2021. Noted that Board Members and some Executive attended workshop in February 2020. 	The Board noted the information about the aged care webinar. ACTION: EDONM and DON Aged Care to consider attendance.			
11. MEETING FINALISATION					
11.1 Questions / Comments	Discussion about potential for solar panels across RMCLHN noting that panels are part of new developments and quotes have been sought for solar panels and LED lighting to reduce electricity costs.	ACTION: CEO to provide the Board with costings related to implementing solar panels and LED lighting.			
11.2 Review actions to be taken	• Refer items: 5.1, 5.3, 5.8, 6.1, 6.3, 10.1 and 11.1				
11.3 Meeting Evaluation / Suggestions for next meeting	PJ summarised the meeting.				
11.4 Next meeting	Planning Workshop - 17 December 2020 (with Executive) in Mannum				
	Next Meeting - Date: 28 January 2021 Time: tbc Location: tbc				
11.5 Meeting Close	2.50 pm				
Signed: Peter Joyne Chair Date: 29					