

MINUTES | Governing Board Meeting Number 58

Date Thursday 27 March 2025 Location Angaston Hospital, ANGASTON

Member Position	Name	Item ¹	Attendee Position	Name	Item ¹
Chair	Jim Hazel	All	Executive Director, Medical Services	Sharon Morton	All
Deputy Chair	Helena Williams	All	Executive Director, Community and Allied Health	Brett Webster	All
Member	Rosey Batt	All	Executive Director, People and Culture	Natalie May	All
Member	Pru Blackwell	All	Director, Corporate Services	Daniel Panic	All
Member	Greg Russell	All	A/Clinical Director, Mental Health Services	Michelle Hilton	All
Member	Helen Tedesco	Apolog V	Manager Ageing and Disability Reform	Cathy Teager	Item 4.3
Member	Alex Zimmermann	All	Executive Director, Rural Support Service, Rural Support Service	Debbie Martin	Item 5.3
Chief Executive Officer	Bronwyn Masters	All	Secretariat	Tanya Jarvis	All
Executive Director, Operations	Kylie Williams	All			
Executive Director, Finance and Business Development	Rose Dickinson	All			
Executive Director, Nursing and Midwifery	Annie Price	All			
Director, Strategy and Governance	Tania Scally	All			

All resolutions recorded in these minutes were carried unanimously unless stated otherwise.

Item		Discussion	Responsible Member
1	OPENING		
1.1	In-Camera Board Discussion		
1.2	Welcome and Apologies	Noted apologies from Helen Tedesco.	
1.3	Acknowledgement of Country	Rosey Batt made an Acknowledgement to Country.	RB
1.4	Interests and Conflicts Disclosure Log	Noted.	
1.5	Confirmation of Previous Minutes	The Board resolved that the minutes of the previous meeting held on 27 February 2025 were accepted as a true and accurate record.	
1.6	Actions Arising from Previous Meeting	The Board noted the actions arising from the previous meeting.	
1.7	Board Calendar	Noted.	
1.8	Consumer Story	Sharon Morton shared a consumer story about a maternity patient who had a positive experience with the quality of care and service provided by staff at the Mount Barker Hospital Emergency Department.	SM

Item		Discussion	Responsible Member
2	TIER 1 COMMITTEES		
2.1	Clinical Governance (CGC)	 Helena Williams, Chair CGC, presented the 19 March 2025 minutes and in particular, highlighted the CGC concerns regarding identified clinical risks and the agreed actions or additional monitoring that were to be put in place to provide assurance to CGC that appropriate risk mitigation strategies were underway. In particular, the following issues were highlighted: Several clinical risks were not currently within board risk tolerance and CGC noted that the BHFLHN team was undertaking further work to mitigate those risks. NMBH Redevelopment clinical/consumer risks were discussed, including risks and challenges associated with developing new models of care, in particular clinician engagement and leadership for this critical planning process, and current and potential clinical risks related to existing service delivery during the build process, inclusive of risks to consumers navigating the build site to access care. Medical Credentialing – a gap analysis had been undertaken, a decision endorsed by CGC that BHF take on its own medical credentialling, but that further clarity of this, and the future model for credentialling for all regional LHNs, was to be provided to CGC out of session. Kapunda Birthing Sustainability and Q&S Review – CGC flagged significant concerns regarding timeliness of completion of the review, and sought greater assurance to be provided to the CGC and Board of risk mitigation and safety of continuing services. Status of RSS accreditation against PHC Standards A discussion was held regarding the Safety and Quality Report (dashboard), RAG scoring and the monitoring process undertaken for areas requiring improvement. The Board noted the flagged issues, risks and concerns, the agreed next steps for mitigation/reduction of those risks, discussed their significant role and responsibility for clinical governance an	HW
		CGC Secretariat to coordinate with Board members attendance at a future CGC meeting.	AP
3	For Decision		
3.1	Risk Appetite Statement (RAS)	The Board approved the amended Risk Appetite Statement, noting that the RAS will be further reviewed by ARC following completion of a review of BHFLHN's Risk Management Framework.	

Item		Discussion	Responsible Member
		 ACTION The Risk Appetite Statement (RAS) was approved, with further review to be undertaken by ARC. The RAS to be included as a standard agenda item for Governing Board. 	TS
4	Strategic Discussion		
4.1	RSS Realignment Project	The Board noted the RSS Realignment Project Report as tabled.	
4.2	BHFLHN Asset Sustainment	The Board noted the Asset Sustainment Report as tabled and requested a clinical risk assessment be undertaken of assets, with a focus on biomedical assets given the potential for patient harm. The need for long-term planning for BME equipment replacement was also discussed. The Board noted that a review of assets is being undertaken in mid- 2025. ACTION BHFLHN to prepare a clinical assessment report on listed assets for Board consideration by ARC.	KW
4.3	Aged Care	 Commonwealth Aged Care Reform The Board noted the presentation on Commonwealth Aged Care reforms, and changes to the Aged Care Act taking effect from 1 July 2025. ACTION BHFLHN to provide a report outlining the obligations for approved providers, including compliance requirements for BHFLHN and the Governing Board related to Aged Care Reforms and impact on clinical oversight. Identify training requirements for Governing Board in response to reforms. Residential Aged Care reporting templates to reviewed and update provided to Governing Board. A review of Support at Home pricing framework to be undertaken for Governing Board consideration. Feasibility Update – Aged Care Services The Board noted the status of feasibility work currently being undertaken by BHLHN and discussed the strategic alignment of any future service expansion of aged care services within the LHN. ACTION Outcome of feasibility study to be provided to Governing Board. Governing Board to write to the Minister for Health & Wellbeing about future aged care service expansion within BHFLHN. 	AP AP AP BW
4.4	Kapunda Review	The Board noted the Kapunda Q&S Review has commenced. The Board requested the CGC Chair be consulted at key stages of the review, including the initial stakeholder engagement phase. ACTION	4.5
		 Project engagement plan to include consultation with CGC Chair at key stages of review. 	AP

Item		Discussion	Responsible Member
4.5	Workforce - Nursing	 The Board noted the progress update on the Agency Workforce Strategy including: improvements being realised at Mt Pleasant and Strathalbyn. recruitment strategies underway including investigating international and centralised recruitment opportunities. Winter Management Plan being finalised with potential increase in regional repatriation requirements for BHFLHN. AMNF support for a trial 'generational rostering' approach with BHFLHN to be a pilot site. ACTION A report on the review of nurse rostering to be provided to ARC. 	KW
4.6	Continuous Improvement Concepts	The Board noted the update on the Continuous Improvement Program (CIP).	TS
4.7	Accreditation Readiness	The Board noted the update on mock assessments currently being conducted by BHFLHN as part of accreditation readiness activities.	AP
4.8	Commissioning Strategy FY26	The Board noted the presentation on the FY26 Commissioning Process and endorsed the proposed approach to DHW negotiations. ACTION Investigate further efficiency opportunities as part of routine financial reporting to the Governing Board.	RD
4.9	Budget Principles FY26	The Board noted the 2025/26 Budget Principles as presented. The Board discussed its role in negotiating the FY26 budget and raising any concerns with the Department of Health & Wellbeing (DHW) in relation to service delivery impacts and governance risks.	RD
		 ACTION Budget Principles to reflect the removal of an independent chair of RSS. Regional Overheads to be presented to Governing Board prior to budget finalisation. June/July 2025 Board meeting to be rescheduled to allow review of Budget allocation for BHFLHN. 	RD TS
4.10	Strategic Plan 2026-2031	The Board noted DH's consultation approach to deliver the SA Health Strategic Plan 2025 – 2030 by November 2025, including DHW representatives to attend the Governing Board meeting in April 2025. ACTION	
		Paper outlining BHFLHN strategic priorities to developed for the Board to support strategic discussion at April 2025 meeting.	TS
5	FOR NOTING		
5.1	CEO Update	The Board noted the CEO report prepared by B Masters.	ВМ
5.2	Financial Reporting	 The Board noted the Finance Report and discussed the following: HCP changes effective 1 July 2025 Shared Services debtors management to be returned to rLHNs effective 1 July 2025. Report inclusion of table for aged care RAG. 	RD

Item		Discussion	Responsible Member
		 ACTION Community and Allied Health program costings, budget principles, impact, and risks to be presented to Governing Board at a future meeting. 	BW / RD
5.3	Rural Support Service (RSS) Executive Director Report	The Board noted the report from D Martin and discussed the progress of the following: RSS Realignment Review. Medical Credentialing Single Employer Model Trial PATs noting the timely processing improvement.	DM
5.4	Correspondence	The Board noted the correspondence received, addressed to the Board Chair, and sent from the Board Chair in the four-week period.	TS
5.5	Media	The Board noted the media that had occurred in the four-week period relevant to BHFHN.	TS
6	OTHER BUSINESS	Nil	
MEET	ING EVALUATION	Rosey Batt provided an evaluation of the meeting, addressing the appropriateness of agenda items, the sufficiency of information provided, time effectiveness, and the focus of discussions.	
MEET	ING CLOSE		
Next N	Meeting	Meeting closed 3.25pm. The next meeting will be held on Thursday 24 April 2025, with the location yet to be confirmed.	

Draft reviewed

Bronwyn Masters BHFLHN Chief Executive Officer 4 April 2025

(Final to be approved by committee at next meeting)

Approved by Governing Board at their next meeting

Jim Hazel

Chair - BHFLHN Governing Board

24 April 2025