

CALHN Governing Board Minutes

Meeting Date:	Wednesday, 2 October 2024
Meeting Location:	Roma Mitchell House, Level 10, Meeting Room 1, Office of the CEO Boardroom
Members:	Mr Raymond Spencer (Chair), Professor Judith Dwyer (Deputy Chair), Professor Justin Beilby, Professor Christine Kilpatrick, Mr Peter Hanlon, Ms Ingrid Haythorpe, Mr Kevin Cantley, and Professor Janine Mohamed
Observer:	Mrs Vanessa McLoughlin, A/Director, Budget and Performance Branch, Department for Treasury and Finance, and Associate Professor Peter Subramaniam, Chair, Clinical Council
Guests:	Nil
Attendees:	Dr Emma McCahon, Chief Executive Officer (CEO), Ms Catherine Shadbolt, Executive Director, Finance and Business Services, Ms Amanda Clark, Executive Director, Nursing and Patient Experience (Executive Observer), Ms Holly Clark, Director, Office of the CEO and Mr Andrej Knez, Manager, Board and Government Relations (Board Secretariat)
Invitees:	Mr Luke Holland, Partner, Sparke Helmore (item 4.1), Mr Peter Pollnitz, Manager, Work Health Safety and Injury Management (item 4.1), Ms Kathleen Stacey, beyond... (Kathleen Stacey & Associates) Pty Ltd (item 4.2), Ms Rachael Kay, Executive Director, Operations and Performance (item 4.3), Dr Sarah Flint, Interim Executive Director, Medical Services (item 5.3), Ms Michelle Sorensen, A/Director, Safety and Quality (item 5.3), Mr Andrew Collins, A/Group Executive Director, Statewide Clinical Support Services (item 5.4) and Mr Michael Burton, Interim Executive Director, People and Culture (item 5.5)
Proxies:	Nil
Apologies:	Nil
Acknowledgement of Country	We would like to acknowledge this land that we meet on today is the traditional lands for the Kaurna people in the Adelaide region. We respect their spiritual relationship with their country. We also acknowledge that they are the custodians of their regions and that their cultural, linguistic and heritage beliefs are still important to the living Kaurna and Wurundjeri people today.

MINUTES:

No	Agenda Item	Discussion / Decision / Action
Meeting Opening		
1.	1.1 Welcome and Apologies	The meeting commenced at 9:30am. The Chair provided the Acknowledgement of Country and welcomed members and attendees. The Chair welcomed Ms Amanda Clark, Executive Director, Nursing and Patient Experience. An Executive will be invited to attend each CALHN Governing Board ("Board") meeting as an observer and to participate in discussions. <i>There were no decisions or actions for this item.</i>
	1.2 Conflict of Interest	Ms Ingrid Haythorpe as a Principal of Peg Consulting informed members that the Department for Health and Wellbeing (DHW) has engaged Peg Consulting to prepare documentation to support the SA's Donor Conception Register. The contract may include drafting documentation to ensure DHW Policy is complied with relating to the access and searching of records held by The Queen Elizabeth Hospital (CALHN). The Board noted the conflict of interest and requested the contract be captured on the declaration of interests register. The CEO informed members of her recent appointment as a Board Member to the Health Roundtable Board and that a formal conflict of interest will also be registered. No other conflicts of interest were declared. <i>There were no decisions or actions for this item.</i>
	1.3 Confirmation of Agenda/Any Other Business	The agenda was confirmed and the papers in the consent agenda were noted. <i>There were no decisions or actions for this item.</i>
	1.4 Confirmation of Previous Minutes	The minutes of the previous meeting held on Wednesday, 7 August 2024 were confirmed as a true and accurate record. <i>There were no decisions or actions for this item.</i>
	1.5 Action List	The action list was noted. <i>There were no decisions or actions for this item.</i>

No	Agenda Item	Discussion / Decision / Action
Connection to Purpose		
2.	2.1 Patient Story	The CEO provided two patient stories related to her recent visit to the Podiatry (High Risk Foot) Clinic at the Royal Adelaide Hospital (RAH). The clinic focuses on the prevention of foot and lower limb amputations in patients with complex medical conditions and offers a culturally responsive high risk multi-disciplinary Telehealth Foot Service to regional, rural, remote, and isolated locations. One patient, an Aboriginal man, located at Port Augusta was able to receive his ongoing care through this virtual service closer to home, with positive interactions with the clinic and health outcomes for his condition. At the RAH another patient who suffers from insulin dependent diabetes and who had his leg amputated below the knee because of his diabetes was suffering further complications due to the pressures being placed on his other foot. The clinic was working with him to address his health needs; however, he described how a simple digital glucose monitor he had purchased for a low price at a chemist has allowed him to better monitor his glucose levels through his smart phone and enable him to manage his condition and improve his quality of his life. The latter story is an example of how an inexpensive purchase can have good health outcomes and how technology can be adapted for wider use across our service to support and compliment the care we provide to the community.
CEO Session		
3.	3.1 CEO Report	Associate Professor Peter Subramaniam attended via MS Teams at 9:56am. The CEO provided an overview on strategic and high-level operational matters within CALHN and across the health system. The following items were discussed: - Engagement with leaders across CALHN continues to progress well. In August 2024, the first LeadershipSpace Masterclass was held which focussed on the foundations of coaching. Over 50 leaders from across CALHN participated and the Masterclass was well received. The second Masterclass is scheduled in October 2024. A LeadershipSpace week is planned for senior leaders in November 2024. The week will focus on communicating with impact as leaders. This will build on the success of the previous LeadershipSpace week held in May 2024. - Work Health and Safety data for 2023-24 indicates CALHN's new claims have continued to reduce to lower than statewide average, which is a good outcome.

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		• The clinical incidents from the period 1 July 2024 to 31 August 2024 were discussed. There have been four high rated adverse incidents which are under review and four coronial inquests which are in progress. CALHN will examine any learnings and recommendations once the outcomes are available. • An Interim Executive Director, People and Culture has been appointed due to a delayed recruitment process. The CEO re-iterated her appreciation for Mr Michael Burton's commitment and hard work to support the workforce directorate while acting in the role. • CALHN nominations to the 2024 SA Health Awards have been submitted. A targeted approach was adopted this year and the CALHN leadership team has nominated only one nominee per category. The nominees are all of a high calibre and represent the innovation, ingenuity and compassion of our staff across all categories. • The recruitment for the new Chair of the AusHealth Board is in progress, and once finalised recruitment for the remaining Board positions will be undertaken. Further, Professor Guy Ludbrook has been appointed as a Non-Executive Director to the AusHealth Board for a 12-month term. The Board noted the CEO Report and thanked the CEO for her contributions. <i>There were no decisions or actions for this item.</i>
3.2	Health Cabinet Committee Update	The CEO provided an update in relation to a recent appearance at the Health Cabinet Committee in September 2024. The Board noted the Health Cabinet Committee update. <i>There were no decisions or actions for this item.</i>
3.3	CEO Performance Improvement Projects	The CEO provided an update in relation to the Performance Improvement Projects. The independent chairs of the Emergency Access Steering Committee and Mental Health Access Steering Committee have been appointed. A strong response was received from staff to be on these Steering Committees with 24 nominations for each committee. The Steering Committees have met several times, with Terms of Reference, governance and ways of working established. Further, process improvement opportunities that could positively impact system flow are being discussed and once these are finalised and agreed, 30, 60 and 90-day workplans will be developed. The Performance Focus Areas remain the top priority across the organisation, as CALHN remains committed to improving access to care (ramping) and financial performance across the organisation. <i>There were no decisions or actions for this item.</i>

No	Agenda Item	Discussion / Decision / Action
Presentations		
4.	4.1 Work Health Safety Defined Officer Session	The Chair welcomed Mr Luke Holland, Partner at Sparke Helmore Lawyers. Mr Holland presented an overview of the key concepts and principles in the <i>Work Health and Safety Act 2023</i> ('the Act') and subsequent amendments to the Act in 2023. The presentation included the due diligence required of leaders to ensure their obligations under the Act are met and that "<i>the person conducting the business or undertaking complies with that duty or obligation</i>". A series of case studies and legal cases were also presented and discussed. The Chair thanked Mr Holland for his informative presentation and assured him that CALHN operates and ensures Work Health and Safety compliance and has a positive culture to ensure a safe work environment for all staff. <i>There were no decisions or actions for this item.</i>
	4.2 Cultural Safety Session	The Chair welcomed Professor Janine Mohamed (Board Member) and Ms Kathleen Stacey from Beyond... (Kathleen Stacey & Associates) Pty Ltd. Professor Mohamed and Ms Stacey provided an Acknowledgement of Country for their respective local areas and welcomed members and attendees. The session provided a safe space to discuss and understand racism, how dominant culture and whiteness impact on experiences, opportunities and outcomes for First Nations peoples, and an appreciation of the impact of colonisation and dispossession and its effects on Aboriginal Australians. The importance of self-awareness for non-Aboriginal staff to consider how their values and attitudes impact on the experiences of Aboriginal people was acknowledged. Further, equity of outcome and co-producing services to meet the different needs of Aboriginal and Torres Strait Islander peoples were discussed. The Chair advised that the Board has an opportunity to influence and improve our services for First Nations peoples and made a commitment to continue the journey and work with the community to improve workforce participation and deliver equitable culturally safe health and wellbeing services for Aboriginal Australians. The Chair thanked Professor Mohamed for her contributions while a Board member and thanked her and Ms Stacey for their presentation and sharing their personal stories, experiences and perspectives with the Board. <i>There were no decisions or actions for this item.</i> <i>Associate Professor Peter Subramaniam left the meeting at 11:46am.</i>

No	Agenda Item	Discussion / Decision / Action
4.3	Hampstead Rehabilitation Centre	The Executive Director, Operations and Performance was in-attendance and presented an overview of the work that has progressed at the Hampstead Rehabilitation Centre (HRC) in readiness for the Care of the Older Person and Community Transition (CO-ACT) program. It was noted that over 250 patients across the three metropolitan Local Health Networks that have completed their acute hospital admission are experiencing external delays to discharge with around 80% of these awaiting placement in residential aged care. The CO-ACT program will provide a statewide model for these patients. A statewide model of care has been developed and updated post consultation with staff and unions. Despite consulting on a model of care that was akin to residential care and therefore staffed as such changes were required in order to get union support, including increases in nursing hours and skill mix, and a site requirement to have a second junior doctor at night. Due to the urgency of implementation and size of the workforce requirements, DHW approved phasing the service commencement with an interim workforce solution from an external provider to allow time for internal recruitment. The financial implications of the CO-ACT program and go-live readiness were discussed. The Board thanked the CEO, Executive Director, Operations and Performance and team for the considerable effort and work undertaken to successfully deliver the program for the State. The financial implications to CALHN were acknowledged and the Board asked that a letter be prepared to the Minister for Health and Wellbeing in relation to progress, cost of the program and phased implementation to deliver and open the 70 beds by early 2025. ACTION (241002.1): The Secretariat to prepare a letter to the Minister for Health and Wellbeing in relation to the costs associated with the CO-ACT program and an update about the phased implementation at the site to deliver and open 70 beds by early 2025. <i>There were no decisions for this item.</i>
Matters for Update and Discussion		
5.	5.1 Financial Performance	
	5.1.1 Finance Report	The Executive Director, Finance and Business Services reported on CALHN's financial performance as at the end of August 2024. A high-level overview of the Health Performance Agreement budget against CALHN's operational budget allocations was discussed. The impacts of variances and other changes to the budget were also discussed, especially related to Nursing Hours per Patient Day and ongoing costs associated with operational aspects of the hospital and health service sites.

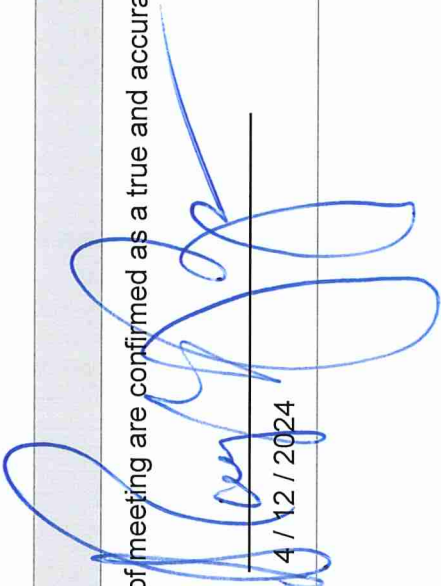
No	Agenda Item	Discussion / Decision / Action
		An efficiency reporting methodology is being developed and will be reported in the 2024 September quarter. The new financial trend report will provide the data for further analytics to be undertaken and discussed, focussed on the actual financial result and the forecast split by clinical programs and non-clinical programs. The Board noted CALHN's financial position as at the end of August 2024 and the proposed new finance report which will allow the Financial Performance and Investment Committee to see the full financial and activity picture on one page and identify major movements and deviations that can be better analysed. <i>There were no decisions or actions for this item.</i>
5.1.2	Financial Recovery Plan	The Executive Director, Finance and Business Services provided an overview of the program of work undertaken to pursue financial recovery and the potential savings from the projects for 2024-25. Further, the structure to be used for the development of the longer 18-month Financial Recovery Plan for CALHN was discussed. <i>There were no decisions or actions for this item.</i>
5.1.3	2024-25 Budget Management Strategies	The Executive Director, Finance and Business Services provided an update on the 2024-25 Budget Management Strategies, including the progress in the areas of Nursing Hours per Patient Day and NWAU uplift projects. <i>There were no decisions or actions for this item.</i>
5.2	CALHN and Statewide Clinical Support Services 2024-25 Service Agreement	This item was deferred.
5.3	National Safety and Quality Health Service Standards Assessment Outcome	The A/Executive Director, Clinical Governance and the A/Director, Safety and Quality were in-attendance. The A/Director, Safety and Quality provided an update on the positive outcome of the recent short notice assessment against the National Safety and Quality Health Service (NSQHS) Standards. The assessors were impressed with the level of staff engagement and enthusiasm through the site visits. A full report has not been received to date. It is anticipated that accreditation against the NSQHS Standards will be awarded within 20 business days of the final assessment in November 2024. In addition, the A/Executive Director, Clinical Governance advised that a plan is being progressed to look at Mandatory Training requirements for medical staff and how to focus and improve in this area. <i>There were no decisions or actions for this item.</i>

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5.4	2024 Annual Public Meeting (APM)	The Director, Office of the CEO advised that planning for the 2024 APM has commenced and it will be held at the RAH on Wednesday, 4 December 2024. The proposed program comprises a <i>year in review</i> which highlights CALHN's achievements in 2023-24, an opportunity to hear from the CEO and her experiences since joining the organisation in January 2024, and an open forum for the community to ask questions and meet the Board and Executive. Further to the event being advertised in the local newspaper and on the CALHN website, alternative promotional avenues will be considered, including social media, and internal communication channels. An invitation will also be sent to CALHN's consumers and stakeholder groups, and partners to attend the event. The Board noted and was supportive of the planning and proposed program for the 2024 APM. <i>There were no decisions or actions for this item.</i>
5.5	Statewide Clinical Support Services	
5.5.1	Annual Compliance Certification 2023-2024	The A/Group Executive Director, Statewide Clinical Support Services (SCSS) was in-attendance and provided an overview of the Annual Compliance Certification 2023-24. DECISION: The Board approved the Statewide Clinical Support Services Annual Compliance Certification 2023-24 and its submission to DHW. <i>There were no actions for this item.</i>
5.5.2	Asset Management Plan	The A/Group Executive Director, SCSS was in-attendance and provided an overview of the asset risks for SA Dental and SA Pathology as identified in the SCSS Asset Management Plan. The Board was concerned at the extreme nature of the asset risks presented due to current infrastructure limitations at SA Dental sites and the potential relocation of SA Pathology in the future. An options paper was requested for each service identifying strategies to either mitigate or offer potential solutions to address them. The A/Group Executive Director, SCSS acknowledged the work undertaken to-date in consultation with DHW in relation to SA Dental, and that further work is required to identify a solution. Further, ongoing discussions are needed in relation to a future SA Pathology site to ensure adequate planning and suitability for the service. The Board noted the SCSS Asset Management Plan, the risks for each statewide service; and that as Strategic Asset Management Plans are developed for statewide services existing plans will be updated, with costs and timeframes further refined.

No	Agenda Item	Discussion / Decision / Action
		ACTION (241002.2): SCSS to develop an options paper and plan to address the asset risk for SA Dental (and provide to the CEO and Chair by 31 October 2024) and present to the Board in December 2024. ACTION (241002.3): SCSS to develop an options paper and plan to address the site risks for SA Pathology (and provide to the CEO and Chair by 31 January 2025) and present to the Board in February 2025. <i>There were no decisions for this item.</i>
5.6	People Matter Employee Survey 2024	The Interim Executive Director, People and Culture was in-attendance and provided an update in relation to the 2024 results from the People Matter Employee Survey. CALHN's overall participation rate in the survey was 26 percent, compared to 29 percent in 2021 when the survey was open for a longer period. It was noted that based on an initial analysis of CALHN's results, emerging priority areas included Leadership, Fostering Connections, Psychological Safety, Respectful Behaviour and Wellbeing. Further, the survey's results will form the key baseline data in relation to employee experiences and perceptions, from which key areas for action will be identified and aligned to the CALHN People First Strategy. The Interim Executive Director, People and Culture advised that the Organisational Development team will work with Programs and Directorates to assist with the interpretation of results and development of localised action plans. <i>There were no decisions or actions for this item.</i>
Committee Reports		
6.	6.1 Clinical Governance and Consumer Engagement	The Chair, Clinical Governance and Consumer Engagement Committee provided an overview of the items discussed at the meetings held between May 2024 and September 2024. An Allied Health Workforce Plan is being progressed and planning towards alignment with current and future demands across the service will be considered. It was noted that CALHN will face allied health recruitment challenges, especially given competitive private and interstate salaries on offer to allied health professionals. It was also noted that this workforce project will be monitored by the People and Culture Committee. The importance of good data governance and practices in the access and use of Artificial Intelligence (AI) to enable areas to use AI as part of their research or healthcare work across CALHN was discussed. The CEO advised that Professor Guy Ludbrook has been approached to coordinate an AI thinktank for the organisation, and a presentation to the Board is planned in December 2024 as an introduction to AI and implications for the future. Further, the changes to the Access to Care Project Board were noted with three CALHN Performance Focus Areas established in the areas of Emergency Access, Mental Health Access and Budget. <i>There were no decisions or actions for this item.</i>

No	Agenda Item	Discussion / Decision / Action
	6.2 Audit and Risk	The Chair, Audit and Risk Committee provided an overview of the items discussed at their recent meeting in September 2024, which included the approval of the Security of Critical Infrastructure Risk Management Program (CIRMP); a process to notify chairs of the other Committees to the Board of relevant audit recommendations for awareness as required, and the implications of cyber threats and importance of a framework or approach to guide the use of AI across the organisation. Further, Mr Kevin Cantley (Board Member) has now joined the Committee. <i>There were no decisions or actions for this item.</i>
	6.3 People and Culture	The Chair, People and Culture Committee provided a general update and noted that the organisation's mandatory training completion rates are now above target, and industrial relations matters continue to progress well. The composition of the CALHN workforce was discussed in terms of staff groups and comparisons with other jurisdictions across Australia. The CEO undertook to provide a breakdown of staff groups, i.e. nursing, medical, allied health and administration/corporate services, and benchmarked with other states for comparison. ACTION (241002.4): Secretariat to coordinate a breakdown of staff groups across CALHN with a comparison of other jurisdictions across Australia. <i>There were no decisions or actions for this item.</i>
	6.4 Statewide Clinical Support Services	The Board noted the SCSS Committee Report for the period July 2024 to August 2024, and the Bi-Annual Risk Report for June 2024. <i>There were no decisions or actions for this item.</i>
Board Reflections and Conclusion		
Executive Session (Governing Board and CEO)		
Executive Session (Governing Board)		

No	Agenda Item	Discussion / Decision / Action
Close of meeting		
	Next Meeting	Date: Wednesday, 4 December 2024 Location: Royal Adelaide Hospital, Boardroom 3B703 and 3B704

MINUTES APPROVAL	
Mr Raymond Spencer Chair, CALHN Governing Board	The minutes of meeting are confirmed as a true and accurate record of proceedings. Signed:  _____ Date: 4 / 12 / 2024