Agenda

BOARD OF DIRECTORS – ANNUAL GENERAL MEETING

Central Highlands Rural Health

Meeting Date:	**Wednesday 23 June, 2021**
Time:	**5:00 – 5:30pm**
Venue:	Zoom: https://zoom.us/j/96548090404?pwd=NVR0WGVzb1c3MjNYZ1ZhZEVBREFCQT09 Meeting ID: 965 4809 0404 Passcode: 114427

Board Directors:	Peter Matthews (Chair)	Kate Redwood	Bronwyn Malignaggi
	Phillip Thomson	Greg Pullen	Karen O'Sullivan
	Mary Delahunty	Jeffrey Zajac	Andrea Driscoll
	Alexander Heriot	Ken Gray	

Public Acceptances	Claire Sharry, Senior Program Advisor, Rural and Regional Health, Department of Health
	Charles Sherlock, Member of Community Advisory Committee
	Phillip Ripper, CEO, Sunbury Cobaw Community Health

Item		Attach	Who
1	**Meeting Business**		
1.1	Acknowledgment of Country *I acknowledge the Traditional Owners of the land on which we are meeting. I pay my respects to their Elders, past and present, and Elders from other communities.*		Chair
1.2	Welcome and overview		Chair
1.3	Attendance, Apologies and Introduction of Directors		Chair
1.4	Declaration of Conflict of Interest All members of the committee are to advise of any agenda items where an actual or perceived conflict may occur.		Chair
2	**Chair's Overview**		
2.1	Overview and highlights of the 2019-20 financial year For full report: https://bit.ly/35Fukbu	✔	PM
3	**Finance Overview**		
3.1	Financial results and audit process for 2019/20 For full report: https://bit.ly/35Fukbu	✔	GP
4	**Board Sub-Committee Report / Update**		
4.1	Audit & Risk Committee	✔	GP
4.2	Clinical Governance committee	✔	AH
4.3	Consumer Advisory Committee	✔	KR
4.4	Governance, Renumeration & Nominations Committee	✔	MD
4.5	Clinical Credentialling Committee	✔	AH
5	**Office Bearers**		
5.1	At the Board meeting held on 19th November, 2020 the following were elected to office: Chair: P. Matthews Deputy Chair: Kate Redwood		
6	**Other Business**		
7	Close of Meeting		

CHAIR'S OVERVIEW

Overview and Highlights of the 2019-2020 Financial Year

Committee	Board of Directors – Annual General Meeting
Meeting Date	23 June 2021
Agenda Number	2.1
Author	Peter Matthews

Prior to its formation in November 2019, Central Highlands Rural Health has a long and proud history as two distinct organisations –Hepburn Health Service and Kyneton District Health. The 2019 – 2020 Annual General Meeting reports on the final months of those two separate health services, as well as serving as the inaugural Annual General Meeting of the new organisation – Central Highlands Rural Health.

The 2019-2020 financial year was a period of immense change and upheaval. Our organisation not only underwent a voluntary amalgamation, but also weathered the fallout of devasting bushfires and a global health pandemic.

However, 2019-2020 wasn't just a time of change for our health service. Every person we serve had to come to terms with new ways of living, working and accessing healthcare. As we worked hard to serve our communities through new and different services and delivery methods, we were overwhelmed and grateful for the outpouring of support from our community. It was truly wonderful for our staff to be acknowledged and thanked for their work by the people they serve through a very tricky year in healthcare.

Before delving into the detail of Central Highlands Rural Health's response to the global pandemic and its other achievements, it's important to note the milestones of the stand-alone organisations in the final months before amalgamation and the onset of COVID-19.

Kyneton District Health was assessed upon and successfully met all criteria required for ongoing Accreditation under the NSQHS National Standard. This was a huge amount of work for the entire team and the Board and Executive extend their congratulations on this achievement. However, despite best efforts, birthing services in Kyneton were suspended, which was a significant loss for our local community. Since then, we have established a strong post-natal care program ensuring women and their families receive at least one visit from a qualified midwife in the first few days at home with their new baby.

At Hepburn Health Services, the organisation was named finalist in two categories in the 2019 Victorian Public Healthcare Awards: the Minister for Equality's Award for supporting LGBTIQ health for work in inclusion and diversity, and the Chief Health Officer's Award for supporting health populations for Hepburn Health's youth program 'The Cook, The Chef and Us'. Funding was also secured from the Department of Health and Human Services for the stage one redevelopment of Creswick Aged Care.

Central Highlands Rural Health was formally gazetted on the 30th November 2019, following two years of extensive community and staff consultation, due diligence assessment and careful consideration of the benefits and issues of an amalgamation.

Throughout the consultation process, we said that the formation of the new organisation would enable us to deliver improved health service for our communities. We promised to strengthen services, enhance quality and deliver more consumer-driven care.

CHAIR'S OVERVIEW

Although we may not have foreseen quite how this would initially roll out, we are proud of the way CHRH continued to look after our local communities through the challenges of the year.

As a healthcare service, we know our workforce are our most valuable asset so staff were invited to attend sessions dedicated to 'Shaping Our Organisation'. These consultation sessions informed the development of our newly formed values and behaviours, which you will find on page 5 of our Annual Report.

Because 82% of the presentations across Central Highlands Rural Health are people over 65 years old, we have prioritised the needs of the older person. We engaged with people who use our services and their families through a series of consultation sessions and surveys, involving them in the development of our future service provision in aged care. This feedback has influenced a new model of care that we call Living Well and we continue to work towards integrating this model of care in all areas of our organisation.

Integration of a different kind continues to be of great importance for our organisation. One of the biggest challenges faced in the practical implementation of our amalgamation was the integration of our IT systems. We are extremely grateful to our IT support team for their ongoing work in this complex area.

As the world reacted to the outbreak of COVID-19, we too responded by commissioning Respiratory Assessment Clinics in Kyneton and Daylesford. Through these clinics we safely tested patients for symptoms of Coronavirus and in the period 21 February 2020 when the first test undertaken until 30th June 2020 we tested close to 5,000 patients. This figure continues to rise and as an organisation, we have now carried out more 28,000 tests. We have only achieved this significant number of tests through the commitment and flexibility of our staff who quickly learnt new roles and gained new knowledge to protect their communities.

Throughout the pandemic, we worked hard to keep our services running in the best way possible and technology has played a huge part in this. Many of our client consultations went from face-to-face contact to telephone and video conferencing. Clinicians were able to run remote telephone and video outpatient clinics from home and patient feedback was largely extremely positive.

Our Community Nursing Team were challenged to respond to the Coronavirus pandemic by caring for a large number of people at home who would otherwise have been in hospital. Our sincere thanks go to our colleagues out on the road each day for their ongoing care of our community in their homes.

Outside of our coronavirus response, our health service continued to grow in other areas as the need for high quality healthcare close to home remained a priority.

Upgrading Creswick Aged Care began in October 2019 and despite Coronavirus restrictions, the build progressed well with only minor delays. The first stage of renovations was complete by the end of 2020 and include 12 resident rooms with ensuite bathrooms, common areas, a central courtyard and upgrades to the heating and cooling systems.

Cancer services were boosted in February 2020 by the launch of the region's first Oncology Chemotherapy Service. Patients who were previously travelling to metropolitan hospitals can now receive a range of treatments in Kyneton, including chemotherapy and other supportive therapies such as blood

transfusion and immunotherapy. The service was put on hold during the peak of the pandemic however has now recommenced.

Home Care Packages were expanded into the Macedon Ranges as part of our organisational promise to deliver more services to our local communities. Home Care packages, funded by the federal government, provide older people access to a variety of services including cleaning, meal preparation, gardening, home maintenance, companionship, personal care and nursing. Both Home Care Packages and Commonwealth Home Support Programs (CHSP) were successfully assessed under the new Aged Care Quality Standards in February 2020.

My thanks go to all our staff who have helped with our ongoing growth and expansion in these areas.

It's important to acknowledge that our healthcare service remains dominated by the Coronavirus pandemic, just as it does for our community. Our colleagues in all areas have been our shining stars however I want to specifically commend our Infection Control staff for their guidance and forbearance as we continue to adapt and learn.

Our organisation is a different place to the way it was a year ago, due not only to the pandemic, but also the amalgamation of services across our combined communities.

We sincerely thank the 556 staff who together to serve our communities with dedication, expertise and empathy through events like no other in the collective 160-year history of Kyneton District Health and Hepburn Health Service.

As a Board and Executive, we are truly proud of the outstanding team at Central Highlands Rural Health who provide quality healthcare service to residents of the Macedon Ranges and Hepburn Shires.

FINANCE OVERVIEW

Financial Results

Committee	Board of Directors – Annual General Meeting
Meeting Date	23 June 2021
Agenda Number	3.1
Author	Greg Pullen, Chair

	Hepburn Health Service		Kyneton District Health	Central Highlands Rural Health	Total - Full year Combined
	01/07/19 - 30/11/19			1/12/19-30/06/20	01/07/19-30/06/20
Overall Result Including Capital	**-183,337**		**-398,523**	**3,839,369**	**3,257,509**
Operating Result	**1,419,611**		**1,025,308**	**-2,444,920**	**0**

Overall Result Including Capital	**Hepburn Health Service**		**Kyneton District Health**	**Central Highlands Rural Health**	**Total - Full year Combined**
Revenue	14,156,036		7,245,874	26,038,568	47,440,479
Expenditure	13,930,020		6,861,165	29,849,187	50,640,372
Other Economic flows	42,678		-13,813	28,750	57,615
Total Result	**-183,337**		**-398,523**	**3,839,369**	**3,257,509**

Operating	**Hepburn Health Service**		**Kyneton District Health**	**Central Highlands Rural Health**	**Total - Full year Combined**
Revenue	14,132,766		7,207,102	24,623,528	45,963,396
Expenditure	12,713,154		6,181,793	27,068,449	45,963,396
Operating Result	**1,419,611**		**1,025,308**	**-2,444,920**	**0**

The above tables provide a summary of the financial position of Hepburn Heath Service (HHS) and Kyneton District Health (KDH) for the period 1st July 2019 to 30th November 2019 and for Central Highlands Rural Health for the period 1st December 2019 to 3oth June 2020.

The figures show that for the first 5 months of the financial year HHS made an operation surplus (which is the Departmental funding line) of just over $1.4m and KDH and operating surplus of just over $1.0m;

The successor organisation (CHRH) showed an operating deficit of just in excess of $2.4m for the balance of the 7 months of the 2019/20 year. When the three results are combined, the operating result for the year was breakeven. The overall result (above) includes depreciation, which is a non-funded item, and there is no Department expectation that a public health service should generate sufficient revenue to cover such non-cash expenditure.

COMMITTEE REPORT

Audit & Risk

Committee	Board of Directors – Annual General Meeting
Meeting Date	23 June 2021
Agenda Number	4.1
Author	Greg Pullen, Chair

Membership

Chair Mr Greg Pullen (CHR Board Director)
Members Ms Bronwyn Malignaggi (CHRH Board Director)
Professor Alexander G Heriot (CHRH Board Director)
Ms Mary Delahunty (CHRH Board Director)
Mr Ken Gray (CHRH Board Director)
Mr Michael Wildenauer (External Member)
Ms Gemma Cameron (External Member)

Attendees Maree Cuddihy (CEO)
Brenda Rooney (Director of Finance)
Phil Catterson (Executive Director of Community Services)
Caroline Kennedy (Risk and Legislative Compliance Manager)
Internal and External Auditors

The Central Highlands Rural Health Audit and Risk Committee comprises of a combination of board directors and independent members.

The role of the committee is to assess the organisations financial statements for completeness, consistency and conformity with Accounting Standards, and regularly review the related financial policies, systems and processes to ensure compliance with the Standing Directions issued by the Minister for Finance under the Financial Management Act.

The committee focuses on those aspects that pose the highest risk to the organisation, and with this in mind utilises the services of an external internal audit provider.

Each year an internal audit program focussing on high risk areas is agreed, and the audit results, together with outcomes and recommendations, are presented to the committee for noting and action. In addition to discretionary audits, there were a number of mandatory audits completed during the year, namely Aged Care Prudential Compliance, Standing Directions, and the VAGO external audit.

The committee takes the opportunity to meet with both the internal and external auditors without the presence of employed staff members being present, on a regular basis.

The integration of the policies and procedures of both Hepburn Health Service and Kyneton District Health has been a significant focus of the latter half of the 2019/20 year. This important work, utilizing the pro forma's and templates produced by Health Services Victoria, will continue into 2020/21. All policies are reviewed according to a regular cycle so as to ensure they are complete, contemporary and accord with all relevant policies, procedures and directions.

My thanks are extended to all members of the CHRH Audit and Risk Committee, the staff who attend and provide information to the committee, and both our external and internal auditors.

COMMITTEE REPORT

Clinical Governance

Committee	Board of Directors – Annual General Meeting
Meeting Date	23 June 2021
Agenda Number	4.2
Author	Professor Alexander G Heriot

Membership

Chair Professor Alexander G Heriot (CHRH Board Director)
Members Professor Jeffrey Zajac (CHRH Board Director)
Professor Andrea Driscoll (CHRH Board Director)
Professor Peter Mathews (CHRH Board Chair)
Phillip Thomson (CHRH Board Director)
Janet Wood (Community member)
Charles Sherlock (Community member)
Attendees Shannon Storey (Executive Director, Clinical Services)
Maree Cuddihy (Chief Executive Officer)
Dr Peter Sloan (Director of Medical Services– Kyneton)
Dr Sophie Ping (Director of Medical Services – Hepburn)
Michelle Oliver (Director of Quality & Safety)
Caroline Kennedy (Risk and Legislative Compliance Manager)

Meeting 23rd April 2020
Meetings undertaken on a 3-monthly cycle with this the first meeting of the Central Highlands Rural Health (CHRH) Clinical Governance Committee

Summary

The first meeting of the CHRH Clinical Governance Committee considered reports of the prior two individual health services (Kyneton District Health (KDH) and Hepburn Health Services (HHS)), and reports of the new amalgamated entity CHRH.

The performance indicator report and the ACHS Indicator report for KDH were both reviewed and noted for Jan 2020 to March 2020.

The Quality and Safety report for HHS was reviewed and the activities and outcomes related to the Clinical Governance Framework domains for HHS noted.

A Clinical Governance Dashboard for CHRH had been developed and was reviewed. This was a development of a dashboard that had been utilised for Kyneton and now incorporated the newly amalgamated health service. The dashboard provided an overview of the performance of CHRH in relation to Best Care Goals (Personal; Safe; Connected; Right) and Clinical Governance Domains (Clinical Practice; Leadership, Planning, and Resources; Consumer Partnerships and Engagement; Effective Workforce; Quality and Risk Compliance, Monitoring, and Management). This dashboard will be refined and is reviewed in all Clinical Governance meetings.

The Clinical Risk Registers of KDH and HHS were noted and are in the process of being amalgamated.

The regular clinical governance committee reports provide the board with a high level of confidence that clinical standards delivered across CHRH consistently meet internal and external regulatory requirements, and that the quality of care delivered at CHRH is of a consistently high standard.

COMMITTEE REPORT

Consumer Advisory Committee

Committee	Board of Directors – Annual General Meeting
Meeting Date	23 June 2021
Agenda Number	4.3
Author	Ms Kate Redwood

Chair Catherine Redwood (CHRH Board Director)

Members
Karen O'Sullivan (CHRH Board Director)
Professor Peter Mathews (CHRH Board Chair)
Bronwyn Malignaggi (CHRH Board Director)
Rhyl Gould (External member)
Susan Craven (External member)
Janet Wood (Community member)
Geoff Barrett (Community member)
Judith Hedstrom (Community member)
Kathy Hendry (Community member)
Christiane Gurner (Community member)
Bill Weidner (Community member)
Charles Sherlock (Community member)
Licia Kokociniski (Community member)
Margaret Hodge (Community member)
Peter Hanrahan (Community member)
Luigi Socco (Community member)
Chrissy Austin (Community member)

Attendees
Maree Cuddihy (Chief Executive Officer)
Phil Catterson (Executive Director – Community Operations)
Helen Edwards (Communications Manager)
Michelle Oliver (Quality & Safety Manager)

Summary
Prior to the amalgamation of Hepburn Health Service and Kyneton District Health to form Central Highlands Rural Health (CHRH) there were two active consumer advisory committees. I would like to commend the work done by the Hepburn and Kyneton CACs and thank the respective chairs, Susan Craven and Rhyl Gould, and the members of the committees for their valuable contribution to their respective health services. Their advice on health needs in the community, and delivery of quality patient-centred care has been greatly valued.

Rhyl Gould said: as the inaugural chair of the Kyneton CAC I am proud of the work undertaken by CAC members over a number of years on patient experiences, community priorities for health services and ensuring consumer representation on clinical and other key hospital committees.

Susan Craven said: the Hepburn CAC was established in 2018 and performed a useful role assisting with community consultation regarding the proposed amalgamation.

Following the establishment of CHRH, Board and Executive members, and past CAC chairs deliberated as to the best arrangements for a new CAC. Consolidated terms of reference were drawn up and it was decided to invite all immediate past members of the two CACs to become members of the new CAC. We were delighted that all accepted.

COMMITTEE REPORT

The first meeting of the new CAC was held at Kyneton Health in March 2020. How lucky we were to be able to get in that first face to face meeting! Our major focus was on research being undertaken locally on best practice models of aged care – both community-based and residential. This has continued to be a central interest given that CHRH is responsible for three residential aged care facilities, and also delivers services to elderly people living at home.

The impact of COVID restrictions from March 2020 has been challenging for the CAC but has not diminished its contribution to CHRH. The Committee has continued to meet regularly by zoom and members have taken up representative roles on other CHRH committees, such as Clinical Governance, and have contributed to a range of research and quality projects. The Committee has received a report at each meeting regarding the impact of COVID and applaud the work of staff in ensuring that all patients and residents, and all staff have been COVID free. The work of staff in ensuring that systems and procedures were in place to best practice standards was commended by the Committee.

At each CAC meeting we shine a light on one of the CHRH campuses – by rotation. In May 2020 we received a presentation on Clunes, and noted the forthcoming presentations on Creswick, Daylesford, Trentham and Kyneton in the subsequent year. Health needs of each community and the issues regarding service delivery are discussed, and if appropriate, acted upon. The Committee is concerned both with the profile of health needs in the community – particularly where there are gaps in service delivery - and in the quality of services provided through CHRH. Members bring a range of relevant experience and expertise to these discussions, and are also provided with a range of current statistical information on health services in Loddon-Mallee and the Grampians Region, and receive presentations on key issues from staff.

I would like to thank the members of CAC for their invaluable contribution to ensuring high standards of health care delivered by CHRH. I would also thank the staff for their support to the CAC – our CEO, Maree Cuddihy, our Deputy CEO, Phil Catterson, our Quality Manager, Michelle Oliver, and our Communications Manager, Helen Edwards. Participation of Board members Bronwyn Malignaggi, Karen O'Sullivan, and our chair, Peter Matthews has been greatly appreciated.

COMMITTEE REPORT

Governance, Renumeration & Nominations

Committee	Board of Directors – Annual General Meeting
Meeting Date	23 June 2021
Agenda Number	4.4
Author	Mary Delahunty, Chair

Membership

Chair Mary Delahunty (CHR Board Director)
Members Karen O'Sullivan (CHRH Board Director)
Andrea Driscoll (CHRH Board Director)
Emeritus Professor Peter Matthews (CHRH Board Chair)
Mr Ken Gray (CHRH Board Director)
Mr Michael Wildenauer (External Member)

Attendees Maree Cuddihy (Chief Executive Officer)

Summary

After the formation of Central Highland Rural Health on 30 November 2019, at the first Board meeting of the new entity, December 2 2019, this Committee was created by the Board of CHRH.

With a focus on governance best practice the Committee set about its task:

- Establishing Committee Work Plan
- Familiarization with Governance Sector Executive Remuneration Panel (GSERP) guidelines
- CEO Contract Renewal
- Annual Performance Appraisal and approval of annual performance goals
- Review Board Sub-Committee Terms of Reference
- Develop & recommend Board Charter to Board
- Developing a Board skills matrix
- Identifying & offering advice to the Board on key amalgamation challenges
- Encouraging Director education and professional development
- Development of CHRH Governance policies for recommendation to the Board- Public Interest Disclosure, Director Conflict of Interest, Director Remuneration& Expenses, Privacy of Health Records
- Leading (with Chair of CHRH) nominations process for new directors
- Orientation of new Directors to the Board and the GRN Committee
- Review Board Sub-Committee Terms of Reference
- Began the thinking around best practice methods of Board Assessment, both internal and external.

The Chair thanks the Committee for its work, and the support of the CEO Maree Cuddihy and Tania Meyer

COMMITTEE REPORT

Clinical Credentialling

Committee	Board of Directors – Annual General Meeting
Meeting Date	23 June 2021
Agenda Number	4.5
Author	Professor Alexander G Heriot

Chair Professor Alexander G Heriot (CHRH Board Director)

Members Professor Jeffrey Zajac (CHRH Board Director)
Professor Peter Mathews (CHRH Board Chair)
Mr Phillip Thomson (CHRH Board Director)

Attendees Shannon Storey (Executive Director, Clinical Services)
Maree Cuddihy (Chief Executive Officer)
Dr Peter Sloan (Director of Medical Services - Kyneton)
Dr Sophie Ping (Director of Medical Services – Hepburn)
Phil Catterson (Executive Director – Community Services)
Tanya Hilgert (People & Culture)

Meeting 23rd April 2020
21rd May 2020
Meetings undertaken on a 3-monthly cycle

Summary
Central Highlands Rural health (CHRH) Clinical Credentialling Committee is responsible for the credentialling of all Doctors working across CHRH. Terms of reference of the new amalgamated committee were discussed and approved. Ongoing business included credentialling of both new and existing doctors working at CHRH.

It was determined that an updated Scope of Practice covering all CHRH services was required and would be undertake by Dr Ping. This would be carried forward into the 2020-2021 financial year due to the scale of the review.

As a result of a Department of Health focus on low value surgical procedures, a decision was made to undertake an audit of these procedures at CHRH.

The Clinical Credentialling Committee provides the Board with a regular, comprehensive report on the credentialling of all the doctors working at CHRH. This provides the Board with a high level of confidence that the doctors working at CHRH are appropriately trained and experienced at all times.