NOTICE OF MEETING

Notice is hereby given that a meeting of the Alwyndor Management Committee will be held in the

Alwyndor Aged Care Meeting Room
Dunrobin Road, Hove

Tuesday 15 May 2018 at 6.30pm

Justin Lynch
CHIEF EXECUTIVE OFFICER
Alwyndor Management Committee Agenda

1. OPENING

The Chairman, Mr D Royans will declare the meeting open at 6.30 pm.

2. KAURNA ACKNOWLEDGEMENT

We acknowledge Kaurna people as the traditional owners and custodians of this land.

We respect their spiritual relationship with country that has developed over thousands of years, and the cultural heritage and beliefs that remain important to Kaurna People today.

3. APOLOGIES

3.1 Apologies received
3.2 Absent

4. DECLARATION OF INTEREST

If a Committee Member has an interest (within the terms of the Local Government Act 1999) in a matter before the Committee they are asked to disclose the interest to the Committee and provide full and accurate details of the relevant interest. Committee Members are reminded to declare their interest before each item.

5. CONFIRMATION OF MINUTES

Motion

That the minutes of the Alwyndor Management Committee held on 17 April 2018 be taken as read and confirmed.

6. REPORTS/ITEMS OF BUSINESS

6.1 People and Culture Update (Report No: 30/18)
6.2 Healthy Living Services Update (Report No: 29/18)
6.3 Operations Update (Report No: 38/18)
6.4 Minutes – Governance and Operations Committee – 1 May 2018 (Report No: 31/18)
6.5 General Manager’s Report (Report No: 32/18)

7. CONFIDENTIAL

7.1 CCTV Upgrade (Report No: 36/18)

Pursuant to Section 83(5) of the Local Government Act 1999 the Report attached to this agenda and the accompanying documentation is delivered to the Alwyndor Management Committee Members upon the basis that the Alwyndor Management Committee consider the Report and the documents
in confidence under Part 3 of the Act, specifically on the basis that Alwyndor Management Committee will receive, discuss or consider:

k. tenders for the supply of goods, the provision of services or the carrying out of works.

7.2 Energy Efficiency Assessment – Solar PV Array (Report No: 37/18)

Pursuant to Section 83(5) of the Local Government Act 1999 the Report attached to this agenda and the accompanying documentation is delivered to the Alwyndor Management Committee Members upon the basis that the Alwyndor Management Committee consider the Report and the documents in confidence under Part 3 of the Act, specifically on the basis that Alwyndor Management Committee will receive, discuss or consider:

k. tenders for the supply of goods, the provision of services or the carrying out of works.


Pursuant to Section 83(5) of the Local Government Act 1999 the Report attached to this agenda and the accompanying documentation is delivered to the Alwyndor Management Committee Members upon the basis that the Alwyndor Management Committee consider the Report and the documents in confidence under Part 3 of the Act, specifically on the basis that Alwyndor Management Committee will receive, discuss or consider:

a. information the disclosure of which would involve the unreasonable disclosure of information concerning the personal affairs of a person or persons (living or dead).

d. commercial information of a confidential nature (not being a trade secret) the disclosure of which could reasonably be expected to prejudice the commercial position of the person who supplied the information, or to confer a commercial advantage on a third party; and would, on balance, be contrary to the public interest.

8. URGENT BUSINESS – Subject to the Leave of the Meeting

9. DATE AND TIME OF NEXT MEETING

The next meeting of the Alwyndor Management Committee will be held on Tuesday 19 June 2018 in the Meeting Room, Alwyndor Aged Care, 52 Dunrobin Road, Hove.

10. CLOSURE

JUSTIN LYNCH
CHIEF EXECUTIVE OFFICER
CITY OF HOLDFAST BAY

Minutes of the meeting of the Alwyndor Management Committee of the City of Holdfast Bay held at Alwyndor Aged Care, Dunrobin Road, Hove on Tuesday 17 April 2018 at 6.30 pm.

PRESENT

Elected Members

Councillor R Aust
Councillor S Lonie

Independent Members

Chairman – Mr D Royans
Ms T Aukett
Mr T Bamford
Dr O Peters
Mr I Pratt

Staff

General Manager Alwyndor – Mr R Kluge
Personal Assistant – Ms R Gordon
Chief Financial Officer – Ms N Andjelkovic

1. OPENING

The Chairman declared the meeting open at 6.32 pm.

2. KAURNA ACKNOWLEDGEMENT

With the opening of the meeting the Chairman stated:

We acknowledge the Kaurna people as the traditional owners and custodians of this land.

We respect their spiritual relationship with country that has developed over thousands of years, and the cultural heritage and beliefs that remain important to Kaurna People today.

3. APOLOGIES

3.1 For Absence - Nil
3.2 Leave of Absence - Ms J Bonnici, Ms J Cudsi, Ms L Wills

4. DECLARATION OF INTEREST

Members were reminded to declare any interest before each item.
5. CONFIRMATION OF MINUTES

Motion

1. That the minutes of the Alwyndor Management Committee meeting held on 20 March 2018 be taken as read and confirmed noting the following corrections:
   • Cr S Lonine was an apology for the meeting
   • Item 7.1 Home Support Services Update (Report No: 19/18) commentary: 'contract with the Southern Health Network has been signed'.

   Moved by Cr Lonie, Seconded by Mr Peters Carried

2. That the minutes of the Alwyndor Management Committee special meeting held on 28 March 2018 be taken as read and confirmed.

   Moved by Mr Peters, Seconded by Cr Lonie Carried

6. CONFIDENTIAL


Exclusion of the Public – Section 90(3)(d) Order

Motion

1. That pursuant to Section 90(2) of the Local Government Act 1999 Alwyndor Management Committee hereby orders that the public be excluded from attendance at this meeting with the exception of the General Manager and Staff in attendance at the meeting in order to consider Report No: 21/18 Monthly Financial Report – March 2018 in confidence.

2. That in accordance with Section 90(3) of the Local Government Act 1999 Alwyndor Management Committee is satisfied that it is necessary that the public be excluded to consider the information contained in Report No: 21/18 Monthly Financial Report – March 2018 on the following grounds:

   d. pursuant to section 90(3)(d) of the Act, the information to be received, discussed or considered in relation to this Agenda Item is commercial information of a confidential nature (not being a trade secret) the disclosure of which could reasonably be expected to confer a commercial advantage on a third party of Alwyndor, in addition Alwyndor's financial position is reported as part of Council's regular budget updates.

In addition, the disclosure of this information would, on balance, be contrary to the public interest. The public interest in public access to the meeting has been balanced against the public interest in the continued
non-disclosure of the information. The benefit to the public at large resulting from withholding the information outweighs the benefit to it of disclosure of the information.

Moved Mr Pratt, Seconded Mr Peters  

Carried

Ms Andjelkovic left the meeting at 6.49pm

Motion

RETAINT IN CONFIDENCE - Section 91(7) Order

5. That having considered Agenda Item 6.1 Monthly Financial Report – March 2018 (Report No: 21/18) in confidence under section 90(2) and (3)(d) of the Local Government Act 1999, the Alwyndor Management Committee, pursuant to section 91(7) of that Act orders that the Attachments and Minutes be retained in confidence for a period of 18 months and that this order be reviewed every 12 months.

Moved Mr Bamford, Seconded Mr Peters

Carried

6.2 Clinical Incident Evaluation – October to December 2017 (Report No: 24/18)  

Exclusion of the Public – Section 90(3)(d) Order

Recommendation – Exclusion of the Public – Section 90(3)(d) Order

1. That pursuant to Section 90(2) of the Local Government Act 1999 Alwyndor Management Committee hereby orders that the public be excluded from attendance at this meeting with the exception of the General Manager and Staff in attendance at the meeting in order to consider Report No: 24/18 Clinical Incident Evaluation - October to December 2017 in confidence.

2. That in accordance with Section 90(3) of the Local Government Act 1999 Alwyndor Management Committee is satisfied that it is necessary that the public be excluded to consider the information contained in Report No: 24/18 Clinical Incident Evaluation - October to December 2017 on the following grounds:

d. pursuant to section 90(3)(d) of the Act, the information to be received, discussed or considered in relation to this Agenda Item is commercial information of a confidential nature (not being a trade secret) the disclosure of which could reasonably be expected to confer a commercial advantage on a third party as they outline operational resources and financial position of Alwyndor.
In addition, the disclosure of this information would, on balance, be contrary to the public interest. The public interest in public access to the meeting has been balanced against the public interest in the continued non-disclosure of the information. The benefit to the public at large resulting from withholding the information outweighs the benefit to it of disclosure of the information.

3. The Alwyndor Management Committee is satisfied, the principle that the meeting be conducted in a place open to the public, has been outweighed by the need to keep the information or discussion confidential.

Moved Cr Lonie, Seconded Mr Bamford  
Carried

Motion

RETAIN IN CONFIDENCE - Section 91(7) Order

2. That having considered Agenda Item 6.2 in confidence under section 90(2) and (3)(d) of the Local Government Act 1999, the Alwyndor, pursuant to section 91(7) of that Act orders that the Report, Attachment and Minutes be retained in confidence for a period of 18 months and that this order be reviewed every 12 months.

Moved Mr Peters, Seconded Cr Lonie  
Carried

6.3 Uniquity Review Update (Report No: 26/18)

Exclusion of the Public – Section 90(3)(a and e) Order

1. That pursuant to Section 90(2) of the Local Government Act 1999 Alwyndor Management Committee hereby orders that the public be excluded from attendance at this meeting with the exception of the General Manager and Staff in attendance at the meeting in order to consider Report No: 26/18 Uniquity Review Update in confidence.

2. That in accordance with Section 90(3) of the Local Government Act 1999 Alwyndor Management Committee is satisfied that it is necessary that the public be excluded to consider the information contained in Report No: 26/18 Uniquity Review Update on the following grounds:

a. pursuant to section 90(3)(a) of the Act, the information to be received, discussed or considered in relation to Report No: 26/18 Uniquity Review Update is information the disclosure of which would involve the unreasonable disclosure of information concerning the personal affairs of any person (living or dead), being Alwyndor staff.
e. pursuant to section 90(3)(e) of the Act, the information to be received, discussed or considered in relation to this Agenda Item is related to matters affecting the security of employees of Alwyndor.

3. The Alwyndor Management Committee is satisfied, the principle that the meeting be conducted in a place open to the public, has been outweighed by the need to keep the information or discussion confidential.

Moved Cr Lonie, Seconded Mr Bamford Carried

Motion

RETAIN IN CONFIDENCE - Section 91(7) Order

3. That having considered Agenda Item 6.3 Uniquity Review Report (Report No: 26/18) in confidence under section 90(2) and (3)(a and e) of the Local Government Act 1999, the Alwyndor, pursuant to section 91(7) of that Act orders that the Report, Attachments and Minutes be retained in confidence for a period of 24 months and/or the Chief Executive Officer is authorised to release the action plan, and retain the Uniquity Review Report and Report No: 26/18 in confidence for a period of 36 months and that this order be reviewed every 12 months.

Moved Cr Lonie, Seconded Mr Bamford Carried

6.4 Confidential Business Proposal (Report No: 28/18)

Exclusion of the Public – Section 90(3)(d) Order

1. That pursuant to Section 90(2) of the Local Government Act 1999 Alwyndor Management Committee hereby orders that the public be excluded from attendance at this meeting with the exception of the General Manager and Staff in attendance at the meeting in order to consider Report No: 28/18 Confidential Business Proposal in confidence.

2. That in accordance with Section 90(3) of the Local Government Act 1999 Alwyndor Management Committee is satisfied that it is necessary that the public be excluded to consider the information contained in Report No: 28/18 Confidential Business Proposal on the following grounds:

d. pursuant to section 90(3)(d) of the Act, the information to be received, discussed or considered in relation to this Agenda Item is commercial information of a confidential nature (not being a trade secret) the disclosure of which could reasonably be expected to prejudice the commercial position of the person who supplied the information contained in the proposal.
In addition, the disclosure of this information would, on balance, be contrary to the public interest. The public interest in public access to the meeting has been balanced against the public interest in the continued non-disclosure of the information. The benefit to the public at large resulting from withholding the information outweighs the benefit to it of disclosure of the information.

3. The Alwyndor Management Committee is satisfied, the principle that the meeting be conducted in a place open to the public, has been outweighed by the need to keep the information or discussion confidential.

Moved Cr Lonie, Seconded Mr Bamford

Carried

Motion

RETAIN IN CONFIDENCE - Section 91(7) Order

2. That having considered Agenda Item 6.4 Confidential Business Proposal in confidence under section 90(2) and (3)(d) of the Local Government Act 1999, the Alwyndor, pursuant to section 91(7) of that Act orders that the report, attachments and minutes be retained in confidence for a period of 24 months and that this order be reviewed every 12 months.

Moved Cr Aust, Seconded Cr Lonie

Carried

7. REPORTS/ITEMS OF BUSINESS

7.1 Cessation of Contract with Resthaven – Transition Plan (Report No: 25/18)

This report outlines the transition plan for the transfer of management of the Commonwealth Home Support Programme (CHSP) contract from Alwyndor to Resthaven at the cessation of the contract on 30 June 2018.

The Committee noted the detailed action plan for the cessation of contract with Resthaven and the General Manager provided an update on the transition process so far. Staff have been understanding and ok with changes. Feedback was provided that future correspondence to clients requires refinement and simplification.

Motion

That the Alwyndor Management Committee receive and note the information outlined in this report and transition plan for the cessation of the CHSP contract with Resthaven.

Moved Cr Lonie, Seconded Mr Bamford

Carried
7.2 Minutes – Governance and Operations Committee – 6 April 2018 (Report No: 23/18)

The minutes of the Governance and Operations Committee meeting held on 6 April 2018 are provided for information.

The Committee noted this as an example of the many improvements going on at Alwyndor.

**Motion**

That the minutes of the Governance and Operations Committee meeting held on 6 April 2018 be noted.

Moved Mr Peters, Seconded Cr Lonie Carried

7.3 Corporate Risk Register (Report No: 27/18)

The Corporate Risk Register, outlining principles, framework and processes, along with a risk matrix is presented to the Alwyndor Management Committee for information and review.

The Register has been updated for each risk and is in-line with Council’s new framework. The General Manager sought feedback from Committee members on whether they believe all necessary risks have been satisfactorily covered. The Committee indicated that the Uniquity review action plan should be included.

The General Manager indicated that a review of the register in October would be an appropriate time to evaluate current risks, with the view of removing some.

It was suggested that risk 10 ‘lack of income diversity’ may need to be adjust to ‘loss of income’ or similar. As it stands, lack of income diversity is an issue but not a risk.

**Motion**

That the Alwyndor Management Committee note the Corporate Risk Register as outlined in Attachment 1 to this report and that the Committee provided feedback and recommendations by 7 May.

Moved Cr Aust, Seconded Mr Peters Carried

7.4 General Manager’s Report (Report No: 22/18)

These items are presented for the information of Members. After noting the report any items of interest can be discussed and, if required, further motions proposed.

The General Manager provided an explanation regarding reports not presented per the task schedule. Traffic light indicators will be included in the WHS attachment from next month. The General Manager also provided an update on SkyTrust. As much of
the same information is required by both SkyTrust and the new finance system, the decision was made to up-date the shared data at the same time, in order to streamline the process.

Motion

1. That the following items be noted and items of interest discussed:
   1. Meeting Dates and Task Schedule
   2. WHS Implementation Plan
   3. Inaugural Dorothy Cheater Award

2. That the General Manager congratulate the recipients of the Dorothy Cheater Award on behalf of the Alwyndor Management Committee.

Moved Cr Lonie, Seconded Mr Bamford  

Carried

8. URGENT BUSINESS – Subject to the leave of the meeting

8.1 Staffing update (verbal)

The General Manager provided an update on a number of staffing matters.

Ms Gordon left the meeting at 8.58
Ms Gordon re-joined the meeting at 9.00pm

The General Manager provided an up-date on an additional review undertaken by an external consultant and expects a report by 20 April 2018. The outcomes of this review will be shared with the Committee.

9. DATE AND TIME OF NEXT MEETING

The next meeting of the Alwyndor Management Committee will be held on Tuesday 15 May 2018 in the Meeting Room, Alwyndor Aged Care, 52 Dunrobin Road, Hove.

10. CLOSURE

The meeting closed at 9.09 pm.

CONFIRMED 15 May 2018
Item No: 6.1

Subject: PEOPLE AND CULTURE UPDATE

Date: 15 May 2018

Written By: Chief People and Culture Officer, Mr B Capes

General Manager: Alwyndor, Mr R Kluge

SUMMARY

This report provides an update on Human Resources (HR) activity for the last two months as well as planned future activity.

RECOMMENDATION

That the Alwyndor Management Committee receive the information provided in the People and Culture Update report.

COMMUNITY PLAN

Community: Building a healthy, active and resilient community
Community: Providing welcoming and accessible facilities
Culture: Providing customer-centred services
Culture: Enabling high performance
Culture: Supporting excellent, efficient operations

COUNCIL POLICY

City of Holdfast Bay (Alwyndor Aged Care) Employee Enterprise Agreement 2016-2019

STATUTORY PROVISIONS

Not Applicable.

BACKGROUND

This report provides an update on Human Resources (HR) activity for the past two months, as well as planned future activity.
REPORT

Operations – current

- Recruitment
  - HR have engaged in significant recruitment over the last four months including:
    - Consumer Consultant
    - Engagement Coordinator
    - Multiple Clinical Nurses
    - Multiple Residential Care Workers
    - Employee Engagement Officer
    - Multiple Community Support Workers
    - Casual Cleaner

- Return to Work
  - HR currently have 7 active worker’s compensation claims

- Industrial Relations
  - 3 Unfair termination applications have been settled in arbitration at the South Australian Employment Tribunal at a total cost of $13,638.68
  - United Voice are continuing to appeal their unsuccessful agreement interpretation dispute around annual leave entitlements. This has progressed to the Full Bench
  - Norman Waterhouse Lawyers continue to manage one case which has been appealed by United Voice.

- HR Administration
  - HR has created a shared calendar with other business units to manage recruitment and terminations. This allows greater efficiencies
  - HR are working with payroll/admin to streamline the administration required for new starters and eliminate some duplication in process

- WHS
  - Alwyndor are continuing with the WHS Plan
  - Alwyndor are continuing to work with Skytrust to implement the on line WHS management system

- Restructures
  - Based upon Anthea LeCornu’s report and recommendations Alwyndor will be progressing with staffing changes
  - Meetings with residential staff have occurred, informing them that Alwyndor have accepted the recommendations and will be proceeding with structural changes
  - The formal change process will commence the week starting 7 May 2018
  - Implementation of new EN and Care rosters are intended for 2 July 2018
  - Alwyndor will continue to work consult with staff and their representatives on an ongoing basis around changes
**Operations - future**

- **HR Plan**
  - An HR Plan has been formulated to contemplate broad objectives over the next 6 months
  - The plan will meet operational requirements and address issues identified by the Uniquity report
  - The plan will be refined over the next month to timeline events

- **WHS**
  - WHS will continue in line with the WHSMS Gap Analysis Action Plan
  - Skytrust will commence following implementation of the new payroll system

**People**

An Employee Engagement Officer (EEO) will be engaged on a full time basis for 12 months. This role will assist with change management, cultural and return to work activities. Employees will be advised that the EEO will serve as a staff advocate and counsellor. This has been identified as a current concern for staff.

A .6 HR Officer and .6 WHS Officer will continue in their roles for the next 8 months. The two Rostering Officers have transited to Admin/Finance. The HR structure will be reviewed in 8 months.

**Risk/Quality/Safety**

The HR Department’s improvements to induction, WHS and administration will significantly reduce Alwyndor’s risk of failing to meet contractual and legislative requirements.

**BUDGET**

Not Applicable.

**LIFE CYCLE COSTS**

Not Applicable.
Item No: 6.2
Subject: HEALTHY LIVING SERVICES UPDATE
Date: 15 May 2018
Written By: Active and Healthy Living Manager, Mr S Drew
General Manager: Alwyndor, Mr R Kluge

SUMMARY

This report provides an overview of the activity in the Healthy Living (Therapy) Services department between January and March 2018.

RECOMMENDATION

That the Alwyndor Management Committee receives and notes the information provided in this report.

COMMUNITY PLAN

Community: Building a healthy, active and resilient community
Community: Providing welcoming and accessible facilities
Culture: Providing customer-centered services
Culture: Being financially accountable
Culture: Supporting excellent, efficient operations

COUNCIL POLICY

Not Applicable.

STATUTORY PROVISIONS

Not Applicable.

BACKGROUND

Not applicable.
REPORT

Major achievements for the last quarter include the following:

- CHSP Funding Grant Extended to 1 April 2020 for the value of $1.47M;
- Community self-assessment action plan on schedule for the accreditation on the 26 and 27 June. Specific details regarding the body of work pertaining to the action plan can be provided upon request, e.g. focus group for community consultation;
- HICAPS implemented;
- Transition away from paper based booking schedules to Home Care Manager in the Healthy Living Department has neared completion;
- Transition plan underway for all therapy bookings to occur via the Customer Liaison Team rather than by Therapy Assistants; will create time for TA's to be involved in Healthy Ageing initiatives;
- Council 'Early Intervention' program: three participants with only one day of loss time due to injury; program for review in June;
- Early Intervention Working Party: fortnightly meetings embedded in practice with approx. 14 residential participants;
- UniSA Health Promotion students conducting Healthy Ageing Project: Communication to residents and staff re: ‘What does Healthy Ageing mean to you’;
- UniSA Physiotherapy Students commenced for 2018 – TCP;
- 33 Podiatry procedures drafted and awaiting to be endorsed at Clinical Governance;
- Carer ‘Work Group Lists’ aligned with linen and ACFI directive 3 allocations: received well by Carers but not EN’s;
- Healthy Living Department orientation folder containing business rules and work instructions near completion – providing transparency and guidance to all therapists;
- Active & Healthy Living Manager part of the R-ACFI task force to ascertain the impact of the new ACFI tool on operational funding;
- Active & Healthy Living Manager leading the Residential iCare Working Party: developing action plan for the re-designing of all clinical assessment and care plans;
- Podiatry Medicare item 731 (Chronic Disease Management) from Residential commenced: requires refinement from a back-office process perspective; and
- Casual Physiotherapist hired due to waiting list demands; priority is to fill their schedule with CDC clients versus CHSP.

On-going operational and business development activities:

- Healthy Living Marketing Plan: to be operationalised with budget constraints;
- Podiatry contract due for completion May – investigating in-house Podiatrist (casual);
- Aligning Dentist Service with residential operational requirements; initial meeting conducted with Dentist and Dental SA; awaiting insurance certificate of currency and NPC for compliancy reasons and will then draft a contract with the assistance of the CFO;
- Unable to employ an in-house massage therapist; alternative solution - referrals will be treated by casual physiotherapist;
- Investigating the direct debiting of clients for group sessions to secure positions and also mitigate financial losses if consumer does not attend: WIP;
- Service Agreement for Therapy Clients with lawyers;
• Service contract with Flinders University re: ‘Inspiring Health’; and
• Project Plan for GP services: preliminary phase of investigation; has been stalled due to competing priorities.

Continuous Improvement
1. Back in Action: New physio program to educate clients with chronic back pain, improve management and suitable exercise prescription – Implemented and CLOSED.
2. Care of Older Persons with Dementia (COPE): Evidence-based programs to improve the wellbeing of people with dementia and their carers: Implementing COPE (Care of Older Persons with Dementia in their Environment) in the Australian health context.
3. Family Focus Group: Support structure for family members of new residents, dealing with loss of caring role, guilt etc. – Implemented and CLOSED.
4. Podiatry Project: Review of clinical operations in the Podiatry clinic with focus against the NHMRC guidelines for infection control.
5. Therapy Policies & Procedures Project: Development of an Orientation Folder for the allied health services offered in the Healthy Living Department; contains work instructions, procedures and business rules.

Operations

Deed Outputs (end of March 2018):
• 95% compliance against Government targets YTD (3% increase since last reporting period)
• Increase in 1217 hours compared with the same reporting period for last financial year (an increase in 809 hours since previous quartile report)
• An 11.5% increase on CHSP outputs from same time last year.

Therapist Utilisation:

<table>
<thead>
<tr>
<th>Month</th>
<th>Senior PT KPI 75%</th>
<th>PT KPI 80%</th>
<th>PT KPI 80%</th>
<th>OT KPI 80%</th>
<th>OT KPI 70%</th>
<th>SW KPI 70%</th>
<th>SP KPI 80%</th>
<th>Pod KPI 90%</th>
<th>Pod KPI 95%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan</td>
<td>73</td>
<td>81.5</td>
<td>n/a</td>
<td>73.25</td>
<td>71</td>
<td>72</td>
<td>83</td>
<td>95</td>
<td>90</td>
</tr>
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<td>Feb</td>
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<td>75</td>
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<td>84</td>
<td>61</td>
<td>84</td>
<td>100</td>
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<tr>
<td>March</td>
<td>66</td>
<td>70</td>
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<td>75</td>
<td>74</td>
<td>70</td>
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</tr>
<tr>
<td>Total</td>
<td>69%</td>
<td>75.5%</td>
<td>78.5%</td>
<td>77%</td>
<td>69%</td>
<td>75%</td>
<td>94%</td>
<td>92%</td>
<td>93%</td>
</tr>
</tbody>
</table>

Team KPI: 80% (measure of overall performance); KPI achieved for the quarter

Variances:
Therapist utilisation takes into account annual and sick-leave periods but not meetings (team meeting - 1.5 hours/month; seniors’ meeting - 1.5 hours/month; TCP meeting - 1 hour/week; 3 hours of PT meetings in September; planning day with entire team).
Utilisation can be affected by DNA’s and cancellations at short notice. We are unable to quantify this measure at present due to the nature of the booking system. Adjusted figures can be presented upon request.

**Analysis:**
KPI’s have been re-set for all therapists in order to encourage efficiencies within the team and align with budget. A reduction in PT utilisation due to 1. new auditing schedule which hasn’t been included in the current utilisation report but will be inclusive from next month 2. Casual PT and the building of their clientele base. Overall team KPI of 80% met for the period.

**People**

- All staff PDR’s have been conducted, nil outstanding.
- Nil positions vacant with full complement of staff.

**Leave: January to March**

<table>
<thead>
<tr>
<th>Hours</th>
<th>Sick Leave</th>
<th>Annual Leave</th>
<th>Long-service</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>3rd quartile</td>
<td>284</td>
<td>189</td>
<td>65</td>
<td>538</td>
</tr>
</tbody>
</table>

**Analysis:**
Nil concerns regarding the management of workforce against leave entitlements.

The hiring of a casual massage therapist was investigated but abandoned and a secondary strategy has been implemented with the increased utilization of the casual physiotherapist.

**Risk, Quality, Safety**

- Therapy Group Audits conducted for the quarter with 100% compliance.
- Residential physiotherapy care plan reviews approximately 80 for the quarter with 100% compliance achieved.
- Podiatry Action Plan remains in-situ with approximately 20 outstanding procedures to be written in alignment with the NHMRC guideline. Project plan has been added to the CI log.
- Monthly auditing schedule of client files in-situ with increased sample size and sensitivity.

**Audit analysis:**
The introduction of a more robust auditing schedule of client files has yielded areas of improvement with individualised corrective action plans for each of the allied health senior, i.e. physiotherapy, occupational therapy, social work, speech pathology and podiatry. A monthly list of corrective actions is provided to the entire team and results are discussed as a standing agenda item at the monthly Healthy Living Department meeting. Nil concerns with regards to risk and pending accreditation of services in June.
Feedback

**Figure 1.** The Healthy Living Department has received 48 forms of feedback YTD.

**Figure 2.** The breakdown of feedback is 8.33% suggestions and 91.67% compliments. No complaints YTD.

**Figure 3** Response time KPI’s for all compliments, suggestions and complaints have been met at 100%
BUDGET

Figure 1  Income split: a. 75% CHSP ($553K), b. 25% Private Fees ($184K and predominately CDC)

Profit YTD $3,565
Budget Variance + $86,997

LIFE CYCLE COSTS

Not Applicable.
SUMMARY

This report summarises the activities of the Operations department over the past 6 months and provides some insights into initiatives that have been in development or are planned for development over the next 6 months.

RECOMMENDATION

That the Alwyndor Management Committee receive and note Operations business unit update.

COMMUNITY PLAN

Community: Building a healthy, active and resilient community
Community: Providing welcoming and accessible facilities
Culture: Providing customer-centred services
Culture: Enabling high performance
Culture: Supporting excellent, efficient operations

COUNCIL POLICY

Not Applicable.

STATUTORY PROVISIONS

Not Applicable.

REPORT

Website

Alwyndor launched a much needed new and improved, responsive and feature rich website. Key new features of the website include:

- A look and feel that compliments the premium Alwyndor brand.
• A live Chat engine that is manned by our customer service agents during office hours for immediate interaction and assistance. This engine allows customer service agents to engage in live chat sessions and assist visitors or clients with general consultation or simply navigating the website. Providing our current and future community with the ability to provide personalise service and assistance for all aged services by a real person at Alwyndor, in the comfort of their own home.
• Hosts a full site HD virtual tour complete with capabilities.
  o This innovative tour has virtual reality (VR) and augmented reality (AR) capabilities and can also host interactive information and general marketing material. Interactive information and marketing material will be activated later in the year.
• A comprehensive accommodation pricing calculator.

Currently being designed in-house:
• A Staff secure zone for:
  o a centralise single communication point that will host policies, procedures, memos (in the form of an ongoing chronological news feed to assist with staff with reading up on important information after a period of leave) and meeting minutes.
  o Links to "My pay portal" for electronic delivery of rosters and payslips (from CareSystems).
  o Links to the Aged Care Channel Online Training.

Other web-based initiatives:
• Launched an Alwyndor LinkedIn profile.
• Increased Facebook activity and added a Facebook feed to the website.
• Launched an Instagram page.

**Phone System Upgrade**

In-line with the 2017/18 capital budget, Alwyndor has now upgraded its telephony infrastructure. In doing so Alwyndor can now accommodate the growing needs of both the business and residents. The new infrastructure provides a more modern and stable business platform with additional futures to grow into and at the same time provide a better service to the residents of Alwyndor. All current and future residents can now avoid the stressful and convoluted process of moving phone lines over to the NBN and enjoy a smooth transition over to Alwyndor as a service provider.

Residents will enjoy a hotel like service at a much lower price point than any available product in the telco market place and at the same time Alwyndor will generate some additional revenue stream. Resident key benefits include:
• A telephone in every room pre-programmed with internal extensions such as; café, reception, hairdresser, taxi, hospitality services, etc.
• An internal extension number for inter-room calling.
• Full technical support.
• No connection delays.
• No Telco contracts.
• No more contact with Telco call centres.
• No set-up fees.
• No cancellation fees.
• No per minute call charges.
• No data usage costs.
• No extra costs.

Energy Audit

The energy audit was eventually received in late March, 3 months after its original due date. Unfortunately, the energy audit failed to deliver on its promise to bring the projected value and new innovative insights to energy saving strategies at Alwyndor. As such Alwyndor is now in negotiation with the engineers to come to a mutually acceptable outcome.

What the Audit did identify is that several measures already proposed and/or being undertaken by Alwyndor are supported as worthy investments, this is also backed by our YTD energy statistics, see below.
The above 8.77% reduction in energy use YTD can be attributed to Alwyndor's commitment to improving our energy efficiency, whilst this is a minor reduction this is predominantly due to these internal initiatives:

- Adjust temperature controls in the server/communications room.
- Reprogramming AC time schedules across the site.
- Decommissioning of the last fresh air heat exchange unit on Riddle and replacing with individual slit system units.
- Adjusting set point limits of A/C's.
- Removing auto as a run option and/or setting auto off timers.
- Deploying sleep and shutdown policies for desktop pc.
- Some LED lighting upgrades.

In total the annual spend savings of an 8.77% reduction in consumption energy realising approximately in savings $14,000 YTD.

Further savings can be expected within the coming month as an application back in February to SA Power Networks to reduce our billed demand from 466KVA to 350KVA was approved on Thursday 3rd May, this is expected to reduce our network charges by approximately $1500 per month.

- Network charges are based on what is referred to as stepped demand, SA Power Networks will take the peak import load over a 12-month period and bill based on this load requirement for a minimum of 12 months. At the end of the 12 months organisations may apply to have the demand reduced, these applications take months to process which result in Alwyndor being charged at higher that required rates for 15-16 months at a time, costing us 10's of thousands each year.
  - The installation of a large-scale Solar PV array would have permanent impact on reducing our network charges and prevent them from stepping up each year.

Information Systems

Development highlights:
• Business Intelligence through Microsoft Power BI, currently being used to analyse and monitor in real-time:
  o Nurse call statistics.
  o Feedback.
  o Clinical incidents (residential)
    - This has however identified the need to significantly improve the way in which we use iCare.
    - Has made clear how flawed and inconsistent the previous data has been and why.
    - Has revealed how to build effective forms and assessments to capture data accurately and in real time.
• Renegotiated Alwyndor agreement with Subnet reducing cost by almost $1000 per month and increasing our security efforts by including 6 monthly vulnerability and penetration tests.
• Upgraded firewall to include a sandbox for added protection against crypto lockers and zero-day attacks.
• Increased our backup schedule and tape rotation.
• Currently working with Subnet on updating the Holdfast bay data breach response plan to include GDPR compliance coming into effect on the 25 May 2018.
• Alwyndor’s nurse call has reached End of Life (EOL) and support, parts and upgrades will soon cease to be available. Currently looking at a low-cost solution that will run on existing hardware and planning has commenced for an imminent changeover.
  o Additional works have been carried out to improve our RTLS capabilities to track potential absconders, however due to limitations of the existing and no longer supported nurse call, RTLS development will be more effective when the new generation nurse call is in place as it comes complete with full integration.
• Moved RTLS head end over to our production server to be included in the back up and disaster recovery.
• Testing a new program call WalkMe. [https://www.walkme.com/](https://www.walkme.com/)
  o A very powerful digital adoption platform that will assist with change management, how to manuals and general day to day support for internal and external stakeholders.

BUDGET

Not Applicable.

LIFE CYCLE COSTS

Not Applicable.
Item No: 6.4
Subject: MINUTES – GOVERNANCE AND OPERATIONS COMMITTEE – 1 MAY 2018
Date: 15 May 2018
Written By: General Manager, Mr R Kluge
General Manager: Alwyndor, Mr R Kluge

SUMMARY

The minutes of the Governance and Operations Committee meeting held on 1 May 2018 are provided for information.

RECOMMENDATION

That the minutes of the Governance and Operations Committee meeting held on 1 May 2018 be noted.

COMMUNITY PLAN

Community: Building a healthy, active and resilient community
Community: Providing welcoming and accessible facilities
Culture: Providing customer-centred services
Culture: Enabling high performance
Culture: Supporting excellent, efficient operations

COUNCIL POLICY

Not Applicable.

STATUTORY PROVISIONS

Not Applicable.

BACKGROUND

At the meeting held on 21 November 2017, the Alwyndor Management Committee considered changes to the corporate governance structure at Alwyndor (via Report No: 59/17), and moved that:
Motion

1. That the Alwyndor Management Committee agree to the new governance committee structure, with minor adjustments.

2. That the General Manager develop a framework, policy, and terms of reference for the new governance committee structure and present to the Alwyndor Management Committee for review in 6 months.

Moved Mr Peters, Seconded Mr Bamford Carried

The Governance and Operations Committee role is to oversee the following:

- Governance (Standard 8);
- Consumer Engagement;
- Accountability, Monitoring and Assessment;
- Organisational Wide Systems:
  - Compliance
  - Continuous Improvement (CI)
  - Risk Management
  - Information Systems;
- Service Development;
- Operational Performance; and
- Strategic Priorities.

REPORT

This report presents the minutes for the May 2018 meeting of the Governance and Operations Committee.

Refer Attachment 1

BUDGET

Not applicable.

LIFE CYCLE COSTS

Not applicable.
A meeting of the Governance and Operations Committee was held in the Board Room on

Wednesday, 2 May 2018 at 10.30am

Our Vision

Active and Healthy Lives for Older Adults
To enable a vibrant, healthy and inclusive community where people are supported in maintaining a fulfilling lifestyle with grace, dignity and purpose.
Governance and Operations Committee Minutes

STAFF PRESENT

Chairperson – General Manager – Mr R Kluge
Chief Operations Officer – Mr T Hill
Chief Financial Officer – Ms N Andjelkovic
Healthy Living Manager – Mr S Drew
Home Support Services Manager – Ms N Jeffery – 10.38am
Chief People & Culture Officer – Mr B Capes
Residential Services Manager - Ms S Wirth – 10.42am
Personal Assistant – Ms R Gordon

1. OPENING
The Chairperson, Mr R Kluge declared the meeting open at 10.34 am.

2. KAURNA ACKNOWLEDGEMENT

We acknowledge Kaurna people as the traditional owners and custodians of this land.

We respect their spiritual relationship with country that has developed over thousands of years, and the cultural heritage and beliefs that remain important to the Kaurna People today.

3. APOLOGIES

3.1. Apologies received - nil
3.2. Absent

4. CONFIRMATION OF MINUTES

Minutes of the meeting held on 6 April 2018 be taken as read and confirmed.

5. MINUTES OF SUB COMMITTEES

Minutes of the Care Services meeting held on 13 April 2018 will be circulated out of session for noting.

6. STANDING ITEMS

6.1. Procedures and policies for adoption
   6.1.1. CHSP fee policy
   6.1.2. Internal purchasing policy
   6.1.3. Internal tendering policy
   6.1.4. Procurement policy
   6.1.5. Gifts & benefits reporting procedure

   • Gap identified when reviewing CHSP policies. Council’s policy aligns with our business needs therefore recommend that this is adopted by Alwyndor, without alteration.
   • Alwyndor needs to have own statement of intent for fee discounts or waivers.
   • Procurement, tender and purchasing statement of intent indicating exclusion of 3.9 as this item is Council specific and not relevant.
• What is the education and communication process once new policy or procedure is adopted? Need a clear process. Will be incorporated into document management framework.
• Customer Liaison team to be responsible for monthly collation and provision of collated list to Council.
• Manager to approve and use discretion re: retention or allocation of gifts and benefits under the gifts and benefits policy.
• **Committee agreed to accept and adopt:**
  - Council’s CHSP fee policy.
  - Council’s policies for internal purchasing, internal tendering, and procurement, with the statement of intent indicating exclusion of 3.9 (as this item is Council specific and not relevant).
  - Council’s new Gifts & Benefits reporting procedure and form.

Ms Wirth left the meeting at 10.57am

• **ACTION:** Statement of intent required for CHSP therapy fee policy. (SD)
• **ACTION:** Review Council’s fee policy and request it be documented that Alwyndor fees and charges are separate to Councils, if not already the case. (NJ/NA)
• **ACTION:** Advise everyone who has a delegation of adoption of procurement, purchasing and tendering policies. (NA)
• **ACTION:** Circulate a notice of change to staff. (Policy owners: NJ, NA, BC)
• **ACTION:** Draft a policy on policies. (BC)
• **ACTION:** HR to circulate new gifts and benefits (incl. changes to Code of Conduct) to all staff. (BC)

Mr Capes left the meeting at 11.10am

6.2. Clinical Incident Report

• **ACTION:** distribute quarterly clinical incident report, as presented to the AMC, to Committee members. (RG)
• **ACTION:** Incidents to be reported for all department each month, via Care Services Committee. (ALL)

6.3. Feedback Report

• A new feedback report format was tabled by Chief Operations Officer.
• The period of reporting was considered and the Committee decided that reports will be presented showing quarterly data.
• **ACTION:** Committee to consider the current Continuous Improvement process for review at the next GOC meeting. (ALL)

6.4. Regulatory Compliance Register

• Register was provided to the Committee for information. This register will be the responsibility of the Business Improvement and Innovation Coordinator position, once the person commences.
• Legislative updates, how they affect us, and how we manage these updates will be one of the first things the Coordinator will review.
• **ACTION:** Committee members to review register and provide updates and feedback to GM. (ALL)
6.5. Corporate Risk Register

- The GM advised that at its April meeting, the AMC approved the matrix and SAC rating.
- **ACTION**: Committee members to review register ahead of detailed discussion at the next GOC meeting. (ALL)

7. EMERGING ISSUES

7.1. Operational Review

- Consultation meeting scheduled for this afternoon, 2 May 2018.
- Staff meeting scheduled for Thursday, 3 May 2018.

7.2. Home Care self-assessment

- Home Care assessment will occur on 26 and 27 June.
- Review of policies in L and M drives had been undertaken. Next step is to update according to the master list.
- Residential TCP and Home Support TCP audits will be conducted on 3 May 2018.
- **ACTION**: All HR policies and procedures are due for review. (BC/NJ)

8. ACTION ITEM REVIEW

- Training of Customer Liaison Team for therapy bookings is underway. Podiatry bookings being taken by Customer Liaison Team will commence in the next two weeks. MAC portal has been taken over by Customer Liaison Team Leader. Therapy staff have started using Home Care program.
- Communication going out from Uni SA students soon regarding healthy aging model.
- Data breach legislation review is underway.
- CHSP transition and approach is slow and steady.
- Review of policies and procedures is underway and ongoing.
- Implementation of finance system and customer service model on-going and on-track.
- Phone system change-over delayed. Technicians need to work through over a decade of messy configuration to get the back-end right and ensure the front-end transition is relatively seamless. Looks like it will be more disruptive than we had hoped, but aiming to transition on or around Tuesday, 8 May.

9. URGENT BUSINESS

10. NEXT MEETING

- **Date**: 5 June 2018
- **Time**: 1.00pm
- **Location**: Board Room
- **Apologies**: Nil

11. MEETING CLOSURE

The General Manager closed the meeting at 12.01pm
Item No: 6.5

Subject: GENERAL MANAGER’S REPORT

Date: 17 April 2018

Written By: General Manager

General Manager: Alwyndor, Mr R Kluge

SUMMARY

These items are presented for the information of Members.

After noting the report any items of interest can be discussed and, if required, further motions proposed.

RECOMMENDATION

That the following items be noted and items of interest discussed:

1. Meeting Dates and Task Schedule
2. WHS Implementation Plan
3. Recruitment of Members to the Alwyndor Management Committee

COMMUNITY PLAN

Community: Building a healthy, active and resilient community
Culture: Providing customer-centred services
Culture: Enabling high performance
Culture: Supporting excellent, efficient operations

COUNCIL POLICY

Not applicable

STATUTORY PROVISIONS

Not applicable

REPORT

1. Meeting Dates and Task Schedule

The register of meeting dates with attendance and annual governance task schedule listing are attached for reference.
2. **WHS Implementation Plan**

A monthly progress report on WHS is provided for information.

Refer Attachment 2

This is a standing item in the General Manager’s Report.

3. **Recruitment of Members to the Alwyndor Management Committee**

The General Manager will provide a verbal update on the recruitment process for the appointment of members to the Alwyndor Management Committee.
Attachment 1
### ANNUAL GOVERNANCE TASK SCHEDULE

#### SCHEDULED REPORTS

<table>
<thead>
<tr>
<th>Scheduled Reports</th>
<th>By</th>
<th>J</th>
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<td>General Managers Report</td>
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<td>Monthly Finance Statements</td>
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<td>Residential Services Report</td>
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<td>Home Support Services Report</td>
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<td>Governance Report</td>
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<td>People Report</td>
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<td>Consumer Engagement Report</td>
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<td>Minutes – Governance &amp; Operations Committee</td>
<td>GM</td>
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#### Key Reviews/Events

- Service Business Plans: ALL  X
- AAC Workforce Plan: CPSO  X
- AAC Budget Adoption: AMC  X
- AAC Marketing Plan: COO  X
- AMC Office Bearers Election: AMC  X
- Delegations Instrument Review: AMC  X
- Corporate Risk Register Review: AMC  X
- Strategic Planning Workshop: AMC  X
- Audited Financial Statements: CFO  X
- Investment Management Strategy: CFO  X

### ALWYNDOR MANAGEMENT COMMITTEE MEETING DATES FOR 2018

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<tr>
<th>Member</th>
<th>Term Start</th>
<th>Term Expires</th>
<th>16 Jan</th>
<th>20 Feb</th>
<th>20 Mar</th>
<th>17 Apr</th>
<th>15 May</th>
<th>19 Jun</th>
<th>17 Jul</th>
<th>21 Aug</th>
<th>18 Sept</th>
<th>16 Oct</th>
<th>20 Nov</th>
<th>18 Dec</th>
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<td>Cr. R. Aust</td>
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<td>Nov 2018</td>
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<td>L. Wills</td>
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<td>I. Pratt</td>
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<td>J. Bonicci</td>
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<td>J. Cudsi</td>
<td>Mar 2017</td>
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<td>T. Aukett</td>
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Attachment 2
### WHS Management System Gap Analysis 2018 – Timeline for Implementation

(Progress Report)

<table>
<thead>
<tr>
<th>Item</th>
<th>Goal</th>
<th>Target (EOM)</th>
<th>Status</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. May 2017 (Theme: Planning)</strong></td>
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<tr>
<td>1.1</td>
<td>Development of the Alwyndor WHS Management System</td>
<td>May</td>
<td>System completed</td>
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<tr>
<td>1.2</td>
<td>Older versions of the Alwyndor Hazard Profile collated, revised and updated into the new Alwyndor Hazard and Risk Profile Register. Drafted and ready for consultation</td>
<td>May</td>
<td>Completed.</td>
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<tr>
<td>1.3</td>
<td>Suite of Alwyndor specific ‘One Page Procedures’ based on the CHB/Alwyndor shared WHS Procedures and CHB ‘One Pages’. First drafts completed and ready for consultation</td>
<td>May</td>
<td>Completed. Releasing in stages</td>
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<tr>
<td>1.4</td>
<td>Commencement of induction and training related actions. Working parties established</td>
<td>February 2018</td>
<td>Completed</td>
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<td><strong>2. June 2017 (Theme: Consultation, and Hazard and Risk Management)</strong></td>
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<td>2.2</td>
<td>Review of how WHS &amp; RTW performance information is presented to the Alwyndor HSC and SMT completed. Objectives and goals (KPI’s) for the 2017/18 financial year implemented</td>
<td>December 2018</td>
<td>To be revisited post-WHSMS implementation.</td>
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<td>2.3</td>
<td>Revised Corrective and Preventative Action accountability process implemented into HSC proceedings</td>
<td>June</td>
<td>Completed. Included in new terms of reference (see item 2.1).</td>
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<td>2.4</td>
<td>Revised WHS Contractor Management process enters final draft phase. Contractor Management training sourced for key staff</td>
<td>June</td>
<td>Process Completed. Contractor WHS management process consolidated into WHSMS one-pager. Inconsistent delivery identified. Will be working with CHB to refine processes.</td>
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<td>2.5</td>
<td>Process for Document and Records Management (based on CHB/Alwyndor shared procedures)</td>
<td>June</td>
<td>Completed. See item 1.3.</td>
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<td>2.6</td>
<td>Risk assessment program enters active phase</td>
<td>July 2017</td>
<td>Risk assessment program entered active phase during the first week of July 2017.</td>
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<td><strong>3. August 2017 (Theme: Induction and Training)</strong></td>
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<tr>
<td>3.1</td>
<td>Draft frameworks and process for: • Tiered induction programs (incorporating CHB requirements), • Organisation-wide training needs analysis, • Individualised training plans, and • Position description consistency and control Completed and ready for consultation and implementation.</td>
<td>February 2018</td>
<td>Completed</td>
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<td><strong>4. September 2017 (Theme: Implementation, and Management Review (Continual Improvement))</strong></td>
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<td>4.1</td>
<td>Risk assessment program complete. Documents (assessments, SOPs, SWIs, SWMS etc.) and registers complete</td>
<td>December</td>
<td>Completed</td>
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</tbody>
</table>
### WHS Management System Gap Analysis 2018 – Timeline for Implementation
(Progress Report)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>December 2018</th>
<th>Ongoing</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.2</td>
<td>Final consultation phase: Alwyndor WHS Management System implementation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.3</td>
<td>Hazard management and Alwyndor WHS Management System training – program rolled out to all staff</td>
<td>July 2108</td>
<td>Currently in place. Will transition to Skytrust post new payroll system</td>
</tr>
<tr>
<td>4.4</td>
<td>Internal audit process implemented</td>
<td>December 2018</td>
<td>On track.</td>
</tr>
<tr>
<td>4.5</td>
<td>Alwyndor continual improvement plan put into planning stages</td>
<td>September 2018</td>
<td>On track.</td>
</tr>
</tbody>
</table>

**Complete | Commenced – On Track | Delayed | Not Yet Started**