



Alwyndor Management  
Committee

## 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 19 June 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 16 January 2018 be taken as read and confirmed.**

### 6. CONFIDENTIAL

6.1 Monthly Financial Report – April and May 2018 (Report No: 43/18)

*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:*

- 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.

6.2 CCTV Upgrade - Revised Business Case (Report No: 41/18)

*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. REPORTS/ITEMS OF BUSINESS**

- 7.1 Home Support Services Quarterly Update (Report No: 40/18)  
7.2 Minutes – Governance and Operations Committee – 5 June 2018 (Report No: 42/18)  
7.3 General Manager’s Report (Report No: 39/18)

**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 17 July 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 15 May 2018 at 6.30 pm.**

### **PRESENT**

#### **Elected Members**

Councillor R Aust

#### **Independent Members**

Chairman – Mr D Royans

Ms T Aukett

Mr T Bamford

Ms J Cudsi

Dr O Peters

#### **Staff**

General Manager Alwyndor– Mr R Kluge

Personal Assistant – Ms R Gordon

### **1. OPENING**

The Chairman declared the meeting open at 6.37 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, Cr S Lonie, Mr I Pratt, Ms L Wills

### **4. DECLARATION OF INTEREST**

Members were reminded to declare any 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.**

Moved by Cr Aust, Seconded by Mr Peters

**Carried**

## 6. REPORTS/ITEMS OF BUSINESS

### 6.1 People and Culture Update (Report No: 30/18)

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

*The General Manager provided the Committee with an update on various HR matters. The General Manager advised that recent staff briefings were received well and processes were explained/re-iterated in these sessions by Anthea LeCornu and that a reflection tool is being implemented in Residential. The General Manager advised that the commencement of the structural changes process was delayed by one week with a letter sent to staff today, 15 May.*

### Motion

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

Moved Ms Cudsi, Seconded Cr Aust

**Carried**

### 6.2 Healthy Living Services Update (Report No: 29/18)

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

*The Committee noted that the YTD profit and KPIs are encouraging and that all activity seems very positive. The General Manager advised that a submission made to Medibank late last year for rehabilitation in the home services has resulted in an invitation to move to the next stage. The Committee indicated a desire to see comparison data for sick leave (year-on-year) in the future. The General Manager informed the Committee that the flu vaccination process has changed this year whereby staff have received a voucher to go to a pharmacy at their convenience for their vaccination, instead of providing the service on-site.*

### Motion

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

Moved Ms Cudsi, Seconded Mr Bamford

**Carried**

**6.3 Operations Update (Report No: 38/18)**

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.

*The Committee acknowledge that the new website is a great improvement on the previous iteration.*

*The Committee sought clarification on how Alwyndor can provide the wide ranging services with the new phone system without charging a set-up fee? The General Manager advised that NBN changes means we will lose all our lines and therefore had to transition to a new system. The cost to residents will be \$1.50/day or \$2.50/day if including wi-fi access.*

*The General Manager provided the Committee with a summary of Walk-Me and the benefits this may have as a platform for staff to access the information they need when they need it.*

*The General Manager identified that the issue with system reporting for clinical incidents is close to being ironed out. The General Manager also elaborated on Nurse Call being at its end-of-life and identified that Alwyndor may be able to get another 5 years out of the system with an updated server.*

*It was also noted by the Committee that there is a 1% increase in expenditure for energy and an 8.77% decrease in usage. The General Manager confirmed that the energy report failed to deliver on the required elements and that was being worked through with the audit provider.*

**Motion**

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

Moved Mr Bamford, Seconded Cr Aust

**Carried**

**6.4 Minutes – Governance and Operations Committee – 1 May 2018 (Report No: 31/18)**

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

*The General Manager confirmed that the Governance and Operations Committee is occurring on a monthly basis, with an informal discussion occurring mid-cycle of the schedule. The Care and Support Services Committees only started in March due to the change-over of staff and the General Manager would like to delay the review of this structure to August.*

*The General Manager also acknowledged there is a significant action list of continuous improvement initiatives.*

*The Committee noted that the installation of the phone system was delayed but has now occurred.*

**Motion**

**That the minutes of the Governance and Operations Committee meeting held on 1 May 2018 be noted and a review of the structure be scheduled for August 2018.**

Moved Ms Aukett, Seconded Ms Cudsi

**Carried**

**6.5 General Manager's Report (Report No: 32/18)**

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 update on WHS contractor management which is scheduled for completion in June. All contractors are inducted however, ensuring their documentation compliance needs improvement. Anticipated completion date will be August or September.*

*The Deputy Chairperson provided an update to the Committee on the recruitment of members for the Alwyndor Management Committee. The Deputy Chairperson advised that 34 applications were received and 4 people were interviewed. Recommendations will be presented to Council on 22 May.*

**Motion**

**That the following items be noted:**

- 1. Meeting Dates and Task Schedule**
- 2. WHS Implementation Plan, and supports the change of date for contractor management to September 2018.**
- 3. Recruitment of Members to the Alwyndor Management Committee.**

Moved Cr Aust, Seconded Mr Peters

**Carried**

**7. CONFIDENTIAL**

**7.1 CCTV Upgrade (Report No: 36/18)**

**Exclusion of the Public – Section 90(3)(k) 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: 36/18 CCTV Upgrade 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: 36/18 CCTV Upgrade on the following grounds:
  - k. pursuant to section 90(3)(k) of the Act, the information to be received, discussed or considered in relation to this Agenda Item are tenders for the supply of goods to upgrade Alwyndor's CCTV system.
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 Mr Bamford, Seconded Cr Aust

Carried

#### Motion

#### RETAIN IN CONFIDENCE - Section 91(7) Order

2. That having considered Agenda Item 7.1 CCTV Upgrade (Report No: 36/18) in confidence under section 90(2) and (3)(k) of the Local Government Act 1999, the Alwyndor, pursuant to section 91(7) of that Act orders that the Report and Minutes be retained in confidence for a period of 12 months and/or the Chief Executive Officer is authorised to release the documents when the CCTV upgrade is complete and that this order be reviewed every 12 months.

*This order is subject to section 91(8)(b) of the Act which provides that details of the identity of the successful tenderer must be released once Alwyndor has made a selection. In addition, section 91(8)(ba) of the Act requires details of the amount(s) payable by Alwyndor under a contract for the provision of cleaning services must be released once the contract has been entered into by all concerned parties.*

Moved Ms Aukett, Seconded Cr Aust

Carried

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

At the request of the General Manager this item has been withdrawn from the Alwyndor Management Committee agenda.

**7.3 Uniquity Report Update – Cost Proposal for Implementation of Action Plan (Report No: 33/18)**

**Exclusion of the Public – Section 90(3)(a)(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: 33/18 Uniquity Report Update – Detailed Cost Proposal for Implementation of Action Plan 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: 33/18 Uniquity Report Update – Detailed Cost Proposal for Implementation of Action Plan 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: 33/18 Uniquity Report Update – Detailed Cost Proposal for Implementation of Action Plan 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.**
  - 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 and that this information may prejudice the costing as the financial details and resources will be disclosed.**

**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 Ms Cudsi, Seconded Mr Bamford

**Carried**

**Motion**

**RETAIN IN CONFIDENCE - Section 91(7) Order**

5. That having considered Agenda Item 7.3 Uniquity Report Update – Detailed Cost Proposal for Implementation of Action Plan (Report No: 33/18) in confidence under section 90(2) and (3)(a)(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 36 months and that this order be reviewed every 12 months.

Moved Cr Aust, Seconded Ms Aukett

**Carried**

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**

The meeting closed at 8.55 pm.

**CONFIRMED 19 June 2018**

**CHAIRMAN**

Item No: 7.1  
Subject: HOME SUPPORT SERVICES UPDATE  
Date: 19 June 2018  
Written By: Home Support Services Manager, Ms N Jeffery  
General Manager: Alwyndor, Mr R Kluge

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## **SUMMARY**

This report provides a summary of the activity undertaken by the Home Support Services Department for the provision of home support services to consumers of Alwyndor throughout February, March and April 2018.

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## **RECOMMENDATION**

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

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## **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**

Aged Care Act 1997.

## **BACKGROUND**

The Home Support Services Department provides in-home support services within the local and extended community.

**REPORT**

**Operations**

**Home Care Packages**

There has been an increase of 19 Home Care Packages since end February 2018, which has resulted from a concerted effort to manage Alwyndor’s My Aged Care portal. Additionally, with the transition of the Resthaven Commonwealth Home Support Program (CHSP), 9 of these consumers have been assigned a Home Care Package and have elected to remain with Alwyndor. There are also currently 17 consumers on CHSP awaiting a HCP to be assigned who are expected to remain with Alwyndor’s Home Support Services.

A marketing plan is being developed to effectively market the services that we provide to the community. The Consumer Consultant and Home Support Services Manager will be responsible for implementing this plan.

**Commonwealth Home Support Program (CHSP) - Resthaven**

The numbers on this program are decreasing as part of the transition to Resthaven.

- As at 30 April, YTD total outputs for this program are at 85% of the planned activity.
- As at 30 April 2018, 157 consumers are utilising CHSP services.
- Since the announcement of the transition of services up to end April 2018, 9 consumers have transferred to Home Care Packages with Alwyndor with one consumer already transferring to Resthaven.
- Of the 157 consumers, 115 have provided consent to release information to Resthaven to enable contact to occur.
- Resthaven held an information session with consumers on 14 May 2018.
- A Resthaven brokerage agreement is currently being reviewed. The agreement will enable Alwyndor to continue to provide services to consumers that have requested these services.
- A request has been made to Resthaven to enable their support staff to also commence service delivery with these consumers for a smooth transition to occur over the next 6-9 months.

The program statistics year to date are below.

Alwyndor DSS	2017-2018												Total			
Targets	Outputs 17-18	Monthly	Weekly	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	Total
Goods and Equipment	23	1.916666667	0.442307692	0	4	0	0	2	0	4	2	0	0			12
Home Maintenance	243	20.25	4.673076923	49	60.5	46	49	44.5	30	31.5	30.5	33	44			418
Social Support	3351	279.25	64.44230769	167.25	205.74	172.75	161.67	154.5	132.75	154	150	106.12	102.58			1507.36
Domestic	5710	475.8333333	109.8076923	671.92	765.6	668	669.93	679.75	567.25	629.08	567.22	586.32	522			6327.07
Personal Care	1426	118.8333333	27.42307692	161.75	148.13	114.77	126.5	92.25	52	40.5	40.5	38.88	28.87			844.15
Respite	168	14	3.230769231	24	33.5	25.5	25.5	31.25	4	11	12	9	8			183.75
<b>Total outputs</b>	<b>10921</b>	<b>910.0833333</b>	<b>210.0192308</b>	<b>1073.92</b>	<b>1217.47</b>	<b>1027.02</b>	<b>1032.6</b>	<b>1004.25</b>	<b>786</b>	<b>870.08</b>	<b>802.22</b>	<b>773.32</b>	<b>705.45</b>			<b>9292.33</b>
<b>Under in hours</b>																
<b>Over in hours</b>				163.8367	307.38667	116.9367	122.51667	94.16667	-124.083	-40.0033	-107.863	-136.763				1628.67

**City of Holdfast Bay and CHSP**

Agreement has previously been reached with City of Holdfast Bay to sub-contract CHSP services. Domestic assistance services are currently being co-ordinated by Alwyndor for City of Holdfast Bay residents.

As at 30 April, Alwyndor was supporting 39 consumers with the provision of long-term domestic assistance from the City of Holdfast Bay CHSP program. Two of these consumers have transferred to Home Care Packages with Alwyndor.

The City of Holdfast Bay's CHSP contract has recently been extended by 2 years, to conclude in 2020. The transition of City of Holdfast Bay CHSP activities to Alwyndor is being reviewed again, with a more structured approach being developed in order to transition consumers to Alwyndor for the remainder of the CHSP funding. Some synergies will be reviewed regarding home maintenance activities and how both business units can work together to undertake these services.

The Manager Community Services at City of Holdfast Bay and the Home Support Services Manager meet on a monthly basis to review status of the programs and identify areas where collaboration can occur between the two areas.

**Residential - Transitional Care Placement (TCP) / Care Awaiting Placement (CAP)**

Alwyndor has signed a contract with the Southern Area Local Health Network (SALHN) for the provision of TCP and CAPs with new subsidies in place. The management of these programs will be transferred to the Residential Services Manager from 16 July 2018.

**Community - Transitional Care Placement (TCP)**

SA Health has been informed that Alwyndor is willing to manage 8 consumers on the TCP community program at any given time.

2 new consumers are now receiving TCP community support with these consumers also exiting the program and now receiving Home Care Package support from Alwyndor.

**Medibank at Home Program**

To give Medibank members great choice and flexibility post-surgery, Medibank has created a trial program that allows its members to have their rehab at home after a total hip or knee joint replacement.

Alwyndor has been successfully added to the Medibank at Home National Provider Network following an expression of interest process. A contract is being signed with training and on-boarding processes to commence shortly. As part of the Medibank Provide Network, Alwyndor will provide allied health and some home care services.

**iCare – Home Care Manager Software System**

A review of the iCare Home Care Manager software was recently undertaken with the software provider, iCare, to review the system's capability and understand new release items that are now available.

Home Support Services currently use iCare as a rostering system and for consumer service shift planning. An initial assessment of the system's capability is that Alwyndor does not fully utilise the system in the manner in which it has been developed. Rostering is not used as a fully automated system but is manually adapted to fit staff and consumer needs. The roster management process will be reviewed to utilise the system to generate and manage rosters as much as possible.

The case management component of iCare is only used for consumer details and shift planning associated with rostering. No assessments are added in iCare and is a mostly paper based system. This also impacts rostering and support staff ability to know what activities they are to perform as the system can provide this information directly to their mobile phones. A review of all current paper based assessment forms will be undertaken to enable these processes to be developed in iCare and utilised more effectively on mobile devices.

The budget component of iCare will not be used in Home Support, as this function will be managed through our new finance system, Care Services. This may be reviewed as recent changes iCare has the ability to monitor and capture consumer budget information effectively incorporating some nuances that will assist with the management of consumer budgets.

A full review of iCare, our current practices, and system capabilities and potential will be undertaken by the Home Support Services Manager with other key users with a plan developed to enable full implementation of the system's capabilities based on an agreed approach.

### ***People***

The former Co-ordinator of the Resthaven CHSP program commenced in the role of Consumer Consultant on 1 June 2018. The Consumer Consultant will initially focus on Home Care Packages and allied health, and will manage the identification of potential new consumers via the My Aged Care portal.

Three Co-ordinators recently appointed are continuing to progress in their new role.

Six new Support Workers have been appointed to fill the gaps of some recent resignations due to staff retiring or moving interstate.

A planning day was held on 12 April 2018 for Co-ordinators to review our business plan and KPIs for the next financial year. There are a number of projects and actions that have resulted from this day, namely review of assessment documentation.

### **2018 – 2019 Business Plan KPIs**

A number of new KPIs have been developed that will be measured from 1 July 2018 for Home Support Services in addition to the Financial KPIs as per the 2018/2019 budget, the Home Support Services Manager will provide a verbal update on these.

### ***Governance***

The Home Support Services Manager will provide a verbal update on consumer incidents.

### **Quality & Compliance**

The services provided under the Home Care Packages will be externally audited on 26 and 27 June 2018 as part of the tri-ennial recertification process. This audit includes all services provided under Home Care Package and the Health and Wellbeing Commonwealth Home Support Program.

A self-assessment process was undertaken of the Home Support Services and Healthy Living Services processes and practices and compliance against the current Aged Care Standards. An action plan has been developed to enable update of procedures and associated documentation to ensure 100% compliance is achieved.

To assist with understanding the satisfaction with the services provided and to ensure that the services planned to be delivered are being delivered, a program has been commenced to interview 10% of the Home Care Package consumers. This will review staff service delivery competence, staff punctuality and skills, service plan and home folder content review, general satisfaction with the services provided. Additionally, we are also seeking consumers that want to join in with Alwyndor's current healthy living activities or whether there are opportunities to develop consumer social groups and outings for Home Support consumers. Links with current services provided in-house or within City of Holdfast Bay will be considered once information has been gathered.

### **WHS**

- 2 new risk assessments were undertaken with WHS Officer for staff in-home services, e.g. driving with clients, food preparation.
- There have been 12 staff incidents/injuries from February to April 2018. The majority of these injuries relate to manual handling activities.
- Associated with these injuries, there have been 3 new workers compensation claims relating to muscle strains, e.g. shoulder tendonitis from domestic activities, arm strain from catching a consumer falling, lifting heavy wheelchair into car boot, twisting knee in consumers garden.
- These incidents are being managed with the Chief People and Culture Officer.

### ***Additional comments***

Reviews of the day to day activities of Home Support Services is still occurring however the external audit review and Resthaven transition has impacted on the timeframe for these occurring. This includes:

- structure review to support geographically based service delivery with 3 key areas of delivery (service hours closer to paid hours through reduction in travel time and reduced cost of mileage, consistency of service, consistency of staff supervision)
- a review of the allocation of consumers to co-ordinators
- consistency of co-ordinator activities
- review of quality of service delivery provided to consumers
- review of all documentation.

### **BUDGET**

Refer confidential Monthly Financial Report – April and May 2018 (Report No. 43/18).

**LIFE CYCLE COSTS**

Not applicable.

Item No: 7.2

Subject: **MINUTES – GOVERNANCE AND OPERATIONS COMMITTEE – 5 JUNE 2018**

Date: 19 June 2018

Written By: General Manager, Mr R Kluge

General Manager: Alwyndor, Mr R Kluge

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### **SUMMARY**

The minutes of the Governance and Operations Committee meeting held on 5 June 2018 are provided for information.

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### **RECOMMENDATION**

**That the minutes of the Governance and Operations Committee meeting held on 5 June 2018 be noted.**

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### **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 June 2018 meeting of the Governance and Operations Committee.

*Refer Attachment 1*

**BUDGET**

Not applicable.

**LIFE CYCLE COSTS**

Not applicable.



# Attachment 1



## MINUTES

A meeting of the  
**Governance and Operations Committee**  
was held in the  
Board Room on

**Tuesday, 5 June 2018 at 1.00pm**

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

## 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  
Home Support Services Manager – Ms N Jeffery  
Residential Services Manager - Ms S Wirth  
Best Practice and Innovation Coordinator – Ms R Cantos  
Personal Assistant – Ms R Gordon  
Therapy Services Manager – Ms M Warnock – 1.30pm

### GUESTS

Ms A LeCornu

#### 1. OPENING

The Chairperson, Mr R Kluge declared the meeting open at 1.00pm.

#### 2. KAURNA ACKNOWLEDGEMENT

*We acknowledge Kurna 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 Kurna People today.*

#### 3. APOLOGIES

- 3.1. Apologies received – Mr S Drew, Mr B Capes
- 3.2. Absent

#### 4. CONFIRMATION OF MINUTES

Minutes of the Governance and Operations Committee meeting held on 3 May 2018 were taken as read and confirmed.

#### 5. MINUTES OF SUB-COMMITTEES

No minutes available. Note:

- Care Services Committee meeting is scheduled to occur on 12 June 2018.
- Support Services Committee meeting is scheduled to occur on 19 June 2018.
- Executive Team (members of Support Services Committee) held a planning day on 14 May 2018 to work through competing priorities and KPIs into an organisational timeline.

#### 6. STANDING ITEMS

##### 6.1. Reports for AMC meeting

##### 6.1.1. Home Support Services

- Home Support Services Manager spoke to the draft report.
- **ACTION:** PA to generate a schedule of reports to GOC. (RG)

## 6.2. Procedures and policies for adoption

### 6.2.1. Skin integrity management

- Residential Services Manager provided an explanation as to the need for this policy update.
- Further education and training has been undertaken to back-up this new policy and ensure staff have the appropriate skills.
- The committee discussed the take-away learnings from the gaps that informed this policy update.
- **ACTION:** review in 3 months the success of the new policy and procedure, and the short-fall of iCare for this process and policy.(ALL)
- **GOC approved the Skin Integrity Management Policy. Ratified.**

### 6.2.2. Quality Management & Continuous Improvement policy and work instructions

### 6.2.3. Feedback policy

### 6.2.4. Document framework

### 6.2.5. Tell me what you think form (CIP handout)

- No staff are able to edit documents – gives version control, and GOC control.
- Master documents will be saved in Office 365, controlled by COO & BPIC, and will be disseminated in pdf format on L drive.
- Discussion took place around referencing 'related documents/policies' or 'statement of intent'. Need to acknowledge that not all Council policies are relevant.
- **ACTION:** Document control working party to meet ASAP. COO, CFO, HSSM and BPIC to meet to consolidate document control & records management. CFO will lead the working party. (NA)
- **ACTION:** GOC members to review policies and documents tabled by BPIC and provide feedback by COB Friday, 9 June. (ALL)
- Discussion held regarding quality management and continuous improvement, how they differ and inform processes. Clarifies what constitutes quality data.

## 6.3. Clinical Incident Report

- RSM provided update, advising that it is progressing slowly.
- Support Services Team have the new process ready, noting that practice seems to keep changing on the floor.
- Re-jig incident report form. Need to trial in test phase before putting into circulation. Training will also need to occur.
- Noted that archiving of forms is important as it informs the data sets.
- **ACTION:** Clinical Incident report KPI draft to be tabled. (SW/TH)
- **ACTION:** January to March quarter to be reported to AMC as soon as possible. (SW)

## 6.4. Feedback Report

- GOC reminded to please review and update outstanding items.
- Suggestions need to be considered. Are they CI?
- Power BI reports will be reviewed by GOC live at meetings from July.
- Every Manager should be reviewing the data relevant to their department.

## 6.5. Regulatory Compliance Register

- BPIC will manage regulatory compliance.
- BPIC has sought legal advice and is awaiting reply.

## 6.6. Corporate Risk Register

- This will be a quarterly agenda item.
- Re-evaluate the risk assessments.

## 7. EMERGING ISSUES

### 7.1. Operational Review (RK)

- The GM provided a verbal update.
- First round of roster letters went out on Friday, 1 July.
- Many staff meetings held, resulting in a significant amount of roster change requests.
- Staff have expressed disappointment regarding redundancies.
- Second round of rosters will be circulated late next week, followed by a couple of weeks of consultation ahead of implementation 17 July.

### 7.2. Home Care self-assessment (NJ)

- Finalising self-assessment document this week.
- Collating staff and client contact list for the auditors.
- Determined that most of the processes are as good as we can get them at the moment.
- Mock run on Thursday morning.

### 7.3. Continuous Improvement model review (RC)

- Consolidated CI activity to one spreadsheet. Each department has its own tab in the spreadsheet to be managed by department manager. This will be the master document of all improvement activities.
- CI database will no longer be used.
- GOC – focus on standard 8, governance, risk management, strategic.
- SSC & CSC – focus on trending, analysis, priorities, information sharing – both up (GOC, and therefore, AMC & Council) and down (working parties). Mechanism to implement department business plans.
- BPIC is the gate-keeper, not the responsible officer for achieving business plans.
- Stakeholder reference forum needs to be progressed. Discussion around whether this should be implemented once the GOC/SSC/CSC committee structure is in place and running well.
- **ACTION:** COO to review how the CIP can be managed through Power BI. (TH)
- **ACTION:** feedback on CIP template due to BPIC by Friday, 9 June. To be ratified out of session, with aim to commence using by 1 July. (ALL)

### 7.4. Meeting agenda & minutes template (RC)

- BPIC circulated draft agenda and minutes templates prior to meeting for GOC consideration.
- **ACTION:** feedback on agenda and minutes template due to BPIC by Friday, 9 June. To be ratified out of session, with aim to commence using templates by 1 July. (ALL)

### 7.5. Budgeting process for 2018/19 (NA)

- Slight change in process.
- Process is now that we set direct costs & gross margin, with KPIs set around that. Then corporate cost budget to be managed by applicable department manager.
- If anyone requires budget spend from another department, this must be approved by department manager (e.g. marketing spend request from Home Support will need to be approved by COO). Simple email request and approval sufficient at this point in time.

## 8. ACTION ITEM REVIEW

- Defer Statement of Intent for therapy fee reduction policy process. (SD) *Deferred*
- Procurement policy advise staff. (NA) *Complete*.
- Gifts and Benefits policy and procedure update. (BC) *Incomplete*.
  - CFO & HSSM have advised their staff of the policy update.
- Clinical incident report. (SW) *Ongoing*.
  - Report to AMC on Clinical incident report. (SW) *Complete*.
- Continuous Improvement. *Overtaken* by BPIC role.

- Compliance register. *Overtaken* by BPIC role.
- Risk Register. *Deferred* to July meeting of GOC.
- HR policies & procedures review. (NJ & BC) *In progress*.
- Fortnightly informal meetings to continue. 26 June meeting will need to be relocated.

#### 9. URGENT BUSINESS

- COO requested a change the membership of the Support Services Committee. Chair and Committee agreed.
- GM indicated that each member of the Leadership Team are to be a member of at least one committee/working party.
- COO shared framework for the SharePoint site. If this is implemented incrementally, and put in place well, the GOC should only need to talk about the road blocks, as the framework will be in place and supporting the activities of the organisation.

#### 10. NEXT MEETING

<b>Date</b>	3 July 2018
<b>Time</b>	1.00pm
<b>Location</b>	Board Room
<b>Apologies</b>	R Gordon

#### 11. MEETING CLOSURE 2.55pm

Item No: 7.3  
Subject: GENERAL MANAGER'S REPORT  
Date: 19 June 2018  
Written By: General Manager  
General Manager: Alwyndor, Mr R Kluge

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## **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.

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## **RECOMMENDATION**

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

1. Meeting Dates and Task Schedule
  2. WHS Implementation Plan
  3. Appointment of Members to the Alwyndor Management Committee
  4. Roster Review Update
  5. Uniquity Action Plan Update
- 

## **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.

*Refer Attachment 1*

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

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**

At its meeting of 22 May 2018, Council appointed Mr K Cheater and Mr K Whitford to the Alwyndor Management Committee. These appointments will expire on 31 July 2020.

4. **Roster Review Update**

The General Manager will provide a verbal update on the review of residential staff rosters.

5. **Uniquity Action Plan Update**

The General Manager will provide a verbal update on the progress of the Uniquity Action Plan.



# Attachment 1





# Attachment 2

## WHS Management System Gap Analysis 2018 – Timeline for Implementation (Progress Report)

Item	Goal	Target (EOM)	Status	Comments
<b>1. May 2017 (Theme: <i>Planning</i>)</b>				
1.1	Development of the Alwyndor WHS Management System	May		System completed
1.2	Older versions of the Alwyndor Hazard Profile collated, revised and updated into the new Alwyndor Hazard and Risk Profile Register. Drafted and ready for consolation	May		Completed.
1.3	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	May		Completed. Releasing in stages
1.4	Commencement of induction and training related actions. Working parties established	February 2018		Completed
<b>2. June 2017 (Theme: <i>Consultation, and Hazard and Risk Management</i>)</b>				
2.1	New HSC composition finalised	June		Completed.
2.2	Review of how WHS & RTW performance information is presented to the Alwyndor HSC and SMT completed. Objectives and goals (KPI's) for the 2017/18 financial year implemented	December 2018		To be revisited post-WHSMS implementation.
2.3	Revised Corrective and Preventative Action accountability process implemented into HSC proceedings	June		Completed.
2.4	Revised WHS Contractor Management process enters final draft phase. Contractor Management training sourced for key staff	June		Process Completed. Contractor WHS management process consolidated into WHSMS one-pager. Inconsistent delivery identified. Will be working with CHB to refine processes.
2.5	Process for Document and Records Management (based on CHB/Alwyndor shared procedures)	June		Completed. See item 1.3.
2.6	Risk assessment program enters active phase	July 2017		Completed. Consultation still ongoing
<b>3. August 2017 (Theme: <i>Induction and Training</i>)</b>				
3.1	Draft frameworks and process for: <ul style="list-style-type: none"> <li>· Tiered induction programs (incorporating CHB requirements),</li> <li>· Organisation-wide training needs analysis,</li> <li>· Individualised training plans, and</li> <li>· Position description consistency and control</li> </ul> Completed and ready for consultation and implementation.	February 2018		Completed
<b>4. September 2017 (Theme: <i>Implementation, and Management Review (Continual Improvement)</i>)</b>				
4.1	Risk assessment program complete. Documents (assessments, SOPs, SWIs, SWMS etc.) and registers complete	December		Completed
4.2	Final consultation phase: Alwyndor WHS Management System implementation	December 2018		Ongoing
4.3	Hazard management and Alwyndor WHS Management System training – program rolled out to all staff	July 2108		Currently in place. Will transition to Skytrust post new payroll system

4.4	Internal audit process implemented	December 2018		On track.
4.5	Alwyndor continual improvement plan put into planning stages	September 2018		On track.

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