
Sydney Local Health District

Meeting One Hundred and Twenty Five of the Board

Date: Monday 15 August 2022
Time: 8.00am – 9.30am
Venue: SLHD Boardroom / Zoom
Chair: The Hon. John Ajaka, Chair

1. Present and apologies

The Hon, John Ajaka, Chair
A/Professor Christine Giles, Member
Ms Ronwyn North, Member
Ms Kerry-Anne Hartman, Member
Dr Mary Haines, Member
Mr John McGee, Member
Dr Paul Hosie, Member
Mr Rob Furolo, Member
Ms LaVerne Belleair, Member
Adj/Professor Karen Crawshaw PSM, Member
Dr John Sammut, Member
Mr Raymond Dib, Member
Dr Teresa Anderson, AM, Chief Executive

Apologies

Mr Richard Acheson, Member

In attendance

Dr Alicja Smiech, Chair, Medical Staff Executive Council (8.00am – 9.10am)
Ms Fleur Harriton, Director, Internal Audit, SLHD (8.00am – 8.45am)
Mr Terence Yang, Senior Auditor, Internal Audit, SLHD (8.00am – 8.45am)
Ms Nerida Bransby, Secretariat

2. Welcome and introductions

The Chair acknowledged the traditional owners of the land.

The Chair welcomed members and guests to meeting one hundred and twenty five of the Sydney Local Health District (SLHD) Board.

3. Declaration / Removal of conflicts of interest

The Chair advised to declare / remove any conflicts of interest at this meeting.

There were no other **new** conflicts of interests to declare or to be added/removed in the Register at this meeting.

4. Confirmation of previous minutes

4.1 Minutes of the previous meeting held 18 July 2022

The Minutes of the meeting held on 18 July 2022 were moved and seconded as a true and accurate record of the meeting.

The Chair signed the minutes.

4.2 CE Report – July 2022

The Chair declared that the CE Report for July 2022 was ready for publication.

5. Matters arising from the previous minutes

5.1 Action sheet

The Board received, read and noted the action list including:

- A meeting is set with Lifehouse/SLHD Board Chairs and Chief Executives. This agenda item can be removed from the action sheet.
- The Audit and Risk Committee will write to the MoH concerning the District's / State-wide responsibilities for Cyber Security. This agenda item can be removed from the action sheet.
- A footnote has been inserted explaining the e-Referrals pie chart. This agenda item can be removed from the action sheet.
- The remaining actions are still pending.

6. Patient Story

The Chief Executive provided a verbal report on a vulnerable patient in the operating theatres at Canterbury Hospital. The exemplary care from a particular nurse is noted.

7. Standing Items

7.1 Acronyms List

The Board received and noted this list.

7.2 Financial Classification Codes

The Board received and noted this list.

7.3 Board Calendar 2022

The Board received and noted the Board Calendar for 2022.

8. Chair's Report

The Chair provided a verbal report including:

- Long effects of COVID including fatigue and other illnesses
- Long COVID clinics are proactive
- Patients with long COVID need to visit their GP.

9. Chief Executive's report

The Board received and discussed the Chief Executive's Report including:

- Actively managing COVID-19 and information updates.
- The District has handed back the Meriton Hotel and only has the Atlas Hotel remaining
- According to the Ministry of Health Framework, the District remains at performance level zero, which is the highest level achievable.
- There is a piece of work being completed in relation to the No Visitors policy and the impact it has had on the HACs.
- Transfer of Care is progressing well with an improvement on the previous month.
- Workforce remains a challenge. The District has continued to focus on ensuring its hospitals are appropriately staffed to manage the activity associated with COVID-19 in our Emergency Departments, COVID-19 wards and Intensive Care Units, while recovering business as usual.
- A report on Collaborative Care Arrangements will be provided at the next meeting.
- NWAU reporting does not include Collaborative Care Arrangements.
- The Chief Executive thanked the Board for attending the budget presentation and for their support.
- The RPAH Design Integrity Committee is being held today. Infectious Diseases and Respiratory Clinicians is supportive of an outdoor, open air space for staff.
- Sydney Health Pathways is progressing well.
- Sydney Research is progressing well.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – June 2022

The Board received, read and noted the SLHD Board Reporting Pack for June 2022.

9.1.2 Selected Performance Indicators – June 2021

The Board received, read and noted this report.

9.1.3 HealthPathways Dashboard Report

The Board received, read and noted this report.

9.1.4 MoH Board Report for the SLHD

The Board noted this report for the period March to June 2022 was not available.

9.1.5 HAC Committee Report

The Board received, read and noted this report.

9.2 Project updates

9.2.1 Lifehouse

The Board noted there was no further updates in the Chief Executive's Confidential Report.

9.2.2 Macquarie International Private Hospital

The Board noted there was no further updates in the Chief Executive's Confidential Report

9.3 Capital Works Report

The Board received, read and noted the Capital Works report.

9.4 Clinical Governance and Risk Reports

(i) Quarterly Report

The Board noted the report for the period April 2022 - June 2022 is due in September 2022.

(ii) HACs

The Board received, read and noted this report. The Board discussed the option of engaging the Sydney Institute for Women, Children and Families for their input into some of the HACs.

(iii) SLHD Risk Register

The Board noted this report was due in September 2022.

9.5 Audit and Risk Committee Report (period 17 June 2022 to 15 September 2022)

The Board noted this report for the period 17 June 2022 – 15 September 2022 is due in October 2022.

9.6 Facility Reports – June 2022

(i) Balmain Hospital

The Board received, read and noted the Balmain Hospital facility report.

(ii) Canterbury Hospital

The Board received, read and noted the Canterbury Hospital facility report. The Chief Executive attended the Canterbury Hospital Medical Council on 9 August 2022. Meeting was well attended and clinician engagement was very positive.

(iii) Community Health

The Board received, read and noted the Community Health Services report.

(iv) Concord Hospital

The Board received, read and noted the Concord Hospital facility report. The Chief Executive advised the Board of the appointments and acting roles including:

- Dr Genevieve Wallace, Appointed as the Director of Operations commencing 5 September 2022
- Mr Joseph Jewitt, Acting General Manager, CRGH
- Mr Jay Jiang, Acting General Manger, Mental Health.

(v) Drug Health Services

The Board received, read and noted the Drug Health Services report.

(vi) Mental Health Services

The Board received, read and noted the Mental Health Services report. The Board requested an update on the step-down beds at Callan Park at the next meeting.

(vii) Oral Health Services and Sydney Dental Hospital

The Board received, read and noted the Oral Health Services and Sydney Dental Hospital facility report.

(viii) Population Health

The Board received, read and noted the report.

(ix) Royal Prince Alfred Hospital

The Board received, read and noted the Royal Prince Alfred Hospital facility report.

(x) RPA Virtual Hospital

The Board received, read and noted the RPA Virtual Hospital report. A verbal report was provided on the funding from the Commonwealth for RPA Virtual for a pilot for a period of three years.

(xi) SLHD Special Health Accommodation

The Board received, read and noted this report.

(xii) Tresillian

The Board received, read and noted the Tresillian report.

(xiii) Lifehouse

The Board received, read and noted the Lifehouse report.

(xiv) Public Health Unit

The Board received, read and noted this report.

(xv) Health Equity Research and Development Unit (HERDU)

The Board received, read and noted this report.

(xvi) Croydon / Marrickville / Redfern Community Health

The Board received, read and noted this report.

10. Matters for approval / resolution

10.1 Corporate Governance Attestation Statement 2021 – 2022

The Board received, read and endorsed, the Corporate Governance Attestation Statement 2021 – 2022.

A copy of the supporting documentation is available in the Chief Executive's Office for the Board to read through.

11. Board Committee reports / minutes

11.1 Finance, Risk and Performance Management Committee

The Board received, read and noted the minutes of the meeting held on 18 July 2022.

11.2 Education and Research Committee

The Board noted the minutes of the meeting held on 18 July 2022 were not available. The next meeting is to be held on 19 September 2022.

11.3 Strategic Communication and Partnerships Committee

(Previous Communications Committee)

The Board received, read and noted the minutes of the meeting held on 2 August 2022.

11.4 Audit and Risk Committee

The Board received, read and noted the minutes of the meeting held on 20 July 2022.

11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 27 July 2022. The Board discussed the presentation on Gastro and Liver Clinical Stream and for the assistance of the Patient and Family Centred Care Steering Committee to delve in behind complaints management.

11.6 Health Care – Clinical Council

The Board noted the next meeting is to be held on 24 August 2022.

11.7 Medical Staff Executive Council

The Board received, read and noted the minutes of the meeting held on 5 August 2022.

11.8 Patient and Family Centred Care Steering Committee (bi-monthly)

The Board noted the minutes of the meeting held on 3 August 2022 were not available.

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held on 26 July 2022.

11.10 Organ Donation for Transplant – Quarterly Report (April 2022 – June 2022)

The Board received, read and noted the report for the period April 2022 – June 2022.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held on 21 June 2022.

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 13 July 2022 in particular the number of resignations received. It was noted a number of the resignations were fractional appointments only and the District has processes in place for these replacements and all departments are still functioning well.

12.3 Finance Leaders Forum

The Board received, read and noted the minutes of the meeting held on 15 June 2022.

12.4 NSW Health / SLHD Performance Review Meeting

The Board noted the next meeting is to be held 25 August 2022.

12.5 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting held on 26 July 2022.

12.6 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted minutes of the meeting held on 11 July 2022.

12.7 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the next meeting is to be held on 16 August 2022.

12.8 Concord Forensic Mental Health Executive Steering Committee

The Board received, read and the minutes of the meeting held on 15 June 2022. Discussions are occurring re the roles and responsibilities of this committee.

12.9 RPAH Redevelopment Executive Steering Committee

The Board received, read and the minutes of the meeting held on 15 June 2022.

12.10 Security and Violence Prevention Committee

The Board received, read and noted the minutes of the meeting held on 12 July 2022. The Chief Executive advised the Board that she is presenting a Security Conference on the role of Security Officers during COVID.

12.11 Contracts Implementation Committee

The Board received, read and noted the minutes of the meeting held on 11 July 2022.

12.12 Sydney Healthy Eating and Active Living Committee (SHEAL) (bi-monthly)

The Board noted the meeting to be held on 4 August 2022 was cancelled.

13. Matters for noting

13.1 Brief – Fraud as reported in the Sydney Morning Herald on 3 March 2022 at COBL

The Board received, read and noted this correspondence.

13.2 Sydney Institute for Women, Children and their Families Research poster presentations at the Innovation Symposium

The Board received, read and noted this document. The Board agreed that this is a very good piece of work with perfect collaboration.

14. Other Business

14. Other Business

14.1 Cyber Security Meeting Minutes

The Board will be provided with a verbal report on the workings and functions of the Cyber Security Meetings.

15. Next Meeting

The next meeting will be held on Monday 19 September 2022 at 9.00am in the SLHD Boardroom.

The meeting closed at 9.10am


Chair

19.09.22
Date

Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board August 2022

COVID-19 UPDATE

The District has continued a range of activities in response to COVID-19. They include the following:

SLHD

- Continued the central coordination of COVID-19 activities through the SLHD Operations Centre, central coordination of supply and ordering of PPE, equipment etc...
- Continuation of the Special Flying Squad Teams to support community testing, Special Health Accommodation and other sites including Residential Aged Care Facilities.
- Continued a scaled down Special Health Accommodation service providing services to the community.
- Continued the Mobile Vaccination Clinic providing COVID-19 vaccinations to vulnerable communities.
- Established a working group with the NSW Department of Education to target low vaccination take-up areas
- Continued to manage and dispense non-PBS COVID-19 anti-virals through the Vaccination Program to patients who are prescribed these medications by their GPs.
- Continued the transition working groups developing transition plans for Vaccination and Screening Services for operational to a BAU model.

SLHD Facilities

- Continued to maintain ICU capacity at RPA, Concord, CCMH, PMBC and Canterbury Hospitals to manage demand of COVID-19 positive patients. COVID-19 positive ICU admissions remain stable.
- Continued to maintain inpatient COVID-19 wards to manage COVID-19 positive and amber at RPA, Concord and Canterbury Hospitals. COVID-19 positive patients on wards remain high but stable.
- Continued Staff and Visitor Screening Stations to check all people entering the health facilities established at all sites. The screening questions have continued to be revised to ensure alignment with the current context.
- Continued facility based COVID-19 Screening Clinics, capable of seeing between 400-1000 people per day, although activity remains low.

SLHD Tiger Teams

- Continued the use of the Special Flying Squad Teams to support community testing, Special Health Accommodation and other sites and support to facilities and services in COVID-19 operations.
- Continued use of the special purpose vehicles to run mobile COVID-19 Testing Clinics.
- Continue to provide Tiger teams to support staff as required
- Continued Fit Testing for staff from high risk areas, note this is on top of existing Fit Checking.

Vaccination

The SLHD managed vaccination centres have administered over 1,628,651 vaccine doses since the vaccination program commenced in February 2021, although the rates per day have dropped significantly. The District has continued to support the NSW Health Vaccination Program through a range of fixed and mobile vaccination clinics including the following:

Vaccines that continue to be available:

- Pfizer available for primary doses for 12 years and older
- Pfizer available for booster doses for 18 years and older
- Astra Zeneca available for primary doses for 18 years and older.
- Astra Zeneca available for select people who have cannot have a mRNA vaccine as a booster.
- Moderna available for primary doses for 12 years and older.
- Pfizer Paediatric available for 5-11 years for primary doses.
- Novavax available for primary doses for 18 years and older.

Current SLHD Vaccination Program sites and capability:

- NSW Health Vaccination Centre – (1 Figtree Drive)
- Mobile Vaccination Clinics continue at various community locations to provide accessible vaccinations. There are currently 34 clinics booked for August 2022.
- Outbreak Management vaccination teams to support and vaccinate people identified by the Outbreak Management Team leads.
- Social Housing Vaccination teams established to target residents of various social housing areas.
- Aboriginal Cultural Support Team continues to provide assistance to aboriginal families who have been affected by COVID-19.

Continued management of Flying Squad model to provide COVID-19 vaccinations to RACF, Ports, Disability Homes and other areas, in addition to in-reach to selected speciality clinics at RPA and Concord Hospital.

Special Health Accommodation

The Meriton Suites Zetland lease is scheduled to end on 1 August 2022. With the cessation of Police Managed Quarantine Hotels and requirements to international travellers to quarantine, the Special Health Accommodation continues to accommodate community referred patients only. This is helping to alleviate the pressure on hospitals by providing a mechanism to control transmission through vulnerable communities such as boarding occupants. The make-good works have been placed on a revised schedule to meet the new lease end date of 1 August 2022. The works are continuing to ensure handover can occur on time.

A taskforce comprised of representatives from rpavirtual, the Institute for Academic Surgery and SHA started to develop a potential model of stepdown care for surgical patients from RPA to support early discharge – particularly for regional and rural patients. This model will be located in the Atlas Property close to RPA and aims to avoid patients staying in an acute bed for 2-3 days longer than local patients. These patients often stay longer so that the team is certain they are safe to return home given the greater distance from the hospital. The new surgical medical hotel aims to provide a high quality safe service to these patients enhancing the patient experience. Family members are able to stay in the apartments with their loved ones.

PERFORMANCE

According to the Ministry of Health Framework, the District remains at Performance level 0, which is the highest level achievable.

Safety and Quality

SLHD continues to maintain the quality and safety of our services despite the significant ongoing demands placed on staff due to the ongoing COVID-19 response and the increase in influenza cases. Work is continuing to return services and activity across the District to pre-COVID-19 levels, ensuring safety and quality for staff and patients is at the forefront of this transition.

There were no Serious Adverse Events reports overdue during the month of June 2022.

Mental Health services continue to be under significant pressure with the significant increase in activity and the challenges associated with managing complex behaviourally disturbed patients on a COVID-19 pathway. There was a decrease in the number of Mental Health Readmissions within 28 days for the month of April 2022 to 12.4% compared to same time last year. YTD April 2022 has seen no change in readmissions, remaining stable at 15.4% when compared to 15.4% YTD April 2021. The District continues to focus on strategies to improve mental health performance. The General Manager and Clinical Director of Mental Health continue to engage with stakeholders to improve performance.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation, reporting 4.0% for the month of May 2022 and 4.7% YTD May 2022, which is below the State average of 5.1% for the month and 5.4% YTD May 2022. Unplanned Emergency Representations (same ED within 48 hours) were 4.3% for the month of June 2022 and 4.4% YTD June 2022, which is below the State average of 4.4% for the month, and in line with the state average of 4.4% for YTD June 2022.

The District is performing well compared to target (1.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI), with 0.3 per 10,000 bed days for the month of May 2022. The District continues to perform well compared to the State average for Central Line Associated Bloodstream (CLAB) infections. There were two CLAB infections reported in May 2022, compared to the State average of 5 in the same period. The District remains vigilant with ongoing education and training in Infection Prevention and Control (IPC) strategies and CLAB awareness discussions at ICU morbidity and mortality meetings are continuing.

IPC facilitators continue to be deployed to high risk clinical streams across the District. The Infection Prevention Taskforce has continued to meet, leveraging learnings during COVID-19. The District aims to have no Hospital Acquired Infection by 2025.

The District's HAC performance overall has deteriorated to April 2022 due to the impact of the COVID-19 outbreak. The District continues to perform well in relation to 6 of the 14 Hospital Acquired Complications (HACs), under performing in relation to Hospital Acquired Persistent Incontinence and 3rd or 4th degree Perineal Lacerations; and not performing in relation to Fall Related Injuries in Hospital, Hospital Acquired Respiratory Complications, Hospital Acquired Venous Thromboembolism, Hospital Acquired Renal Failure, Hospital Acquired Delirium and Hospital Acquired Endocrine Complications.

The rate of **Hospital Acquired Persistent Incontinence** was 5.9 per 10,000 episodes, which is slightly above the target of 5.8 for the 12 month rolling period of May 2021 – April 2022. The instances of Hospital Acquired Persistent Incontinence increased by 11 during the period, when compared to the previous 12 month rolling period.

The rate of **Fall Related Injuries** in Hospital was 7.9 per 10,000 episodes, which is above the target of 5.7 for the 12 month rolling period of May 2021 – April 2022. The instances of Fall Related Injuries increased by 15 during the period, when compared to the previous 12 month rolling period.

The rate of **Hospital Acquired Respiratory Complications** was 44.6 per 10,000 episodes, which is above the target of 38.7 for the 12 month rolling period of May 2021 – April 2022. The instances of Hospital Acquired Respiratory Complications increased by 133 during the period, when compared to the previous 12 month rolling period.

The rate of **Hospital Acquired Venous Thromboembolism (VTE)** was 14.9 per 10,000 episodes, which is above the target of 11.0 for the 12 month rolling period of May 2021– April 2022. The instances of Hospital Acquired Venous Thromboembolism increased by 62 during the period, when compared to the previous 12 month rolling period.

The rate of **Hospital Acquired Renal Failure** was 3.9 per 10,000 episodes, which is slightly above the target of 3.4 for the 12 month rolling period of May 2021 – April 2022. The instances of Hospital Acquired Renal Failure increased by 1 during the period, when compared to the previous 12 month rolling period.

The rate of **Hospital Acquired Delirium** was 64.5 per 10,000 episodes, which is above the target of 55.1 for the 12 month rolling period of May 2021 – April 2022. The instances of Hospital Acquired Delirium increased by 101 during the period, when compared to the previous 12 month rolling period.

The rate of **Hospital Acquired Endocrine Complications** was 43.5 per 10,000 episodes, which is above the target of 29.7 for the 12 month rolling period of May 2021 – April 2022. The instances of Hospital Acquired Endocrine Complications increased by 42 during the period, when compared to the previous 12 month rolling period.

Despite the deterioration, the District has remained focused on improving its performance in relation to all HACs, with facilities/services providing monthly updates to their HAC Action Plans. The SLHD HAC Steering Committee continues to meet with the District HAC Operational Coordinators and Clinical Leads for each of the HACs supporting facilities and services in the development of strategies to reduce HACs District wide. “Deep Dives” into strategies for specific HACs are provided to the District Clinical Quality Council.

The District has continued to have no incorrect procedures resulting in death or major loss of function.

Workforce

The District continues to focus on strategies to ensure our workforce has the appropriate skill mix and levels to meet demand, including the response to COVID-19. In June 2022 with ongoing furloughed staff, premium staff usage has increased by 1.95 for Medical staff, decreased by 3.75 for Allied Health staff and decreased by 0.38 for Nursing staff when compared to the same period last year.

The District has continued to focus on ensuring its hospitals are appropriately staffed to manage the activity associated with COVID-19 in our Emergency Departments, COVID-19 wards and Intensive Care Units that is continuing to occur, while recovering Business as usual. There has been ongoing focus on the workforce challenges in all facilities activity which has been required to manage COVID-19 outbreaks and community transmission. This is particularly important as the District is currently managing the increase in activity associate with the winter demand. Staff within the SLHD Vaccination program have been actively deployed within facilities to assist with the COVID-19 and winter demand.

Recruitment against winter strategies is progressing, and influenza vaccination clinics across the District have been implemented.

Activity

Significant pressure has continued to be placed on all hospitals in the District with continued volume of COVID-19 positive and precautionary patients, increase in influenza cases alongside the return of pre-COVID-19 activity levels with elective surgery and outpatient activity. Hospitals have been working to reduce the volume of deferred care in relation to elective surgery and outpatient clinics across the District; however, this has been impacted by the growing number of COVID-19 and influenza cases presenting to hospital.

There has been a decrease of 10.48% in the number of separations (12,756) for the month of June 2022 when compared to the same period last year (14,250). YTD June separations have decreased by 13.26% when compared to the same period last year. This is consistent with the decrease in elective surgery and reduced inpatient activity associated with continued COVID-19 activity. In June 2022, the District's occupancy rate increased by 0.59% to 90.95% when compared to the 90.37% reported in June 2021, which continues the trend of increasing hospital capacity.

There were 14,711 attendances to the District's Emergency Departments in June 2022, which is a 0.86% increase from 14,586 in June 2021. YTD June Emergency Department attendances have decreased by 0.14% to 164,638 when compared to the same period last year (164,871). For the month of June 2022, case weighted attendances have decreased by 1.10 % when compared to the same period last year. The District is continuing to investigate the impact of COVID-19 on the reduction of Emergency Department presentations in partnership with the George Institute.

Emergency Treatment Performance (ETP) (formerly NEAT)

Despite the impact of COVID-19, the District continues to work on its ETP performance. This includes a range of winter strategies in preparation for the winter demand period. There was a 3.72% decrease in ETP in the month of June 2022 to 57.29% when compared to the same period last year. This relates to the increase in ED presentations for the month compared to the same time last year. YTD June ETP decreased by 5.11% to 61.88% when compared to the same period last year. The decrease in performance is due to the increased demands associated with the increase in COVID-19 cases presenting to, and being admitted to, the District hospitals, as well as the impact of influenza. Admitted ETP was below target (50%) for the month of June 2022 at 26.68%, which is a 6.71% decrease on the same period in the previous year.

Transfer of Care

The District performed below target (90%) for transfer of care (TOC) in June 2022, with 79.60% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. TOC continues to be impacted by the significant number of patients on a COVID-19 pathway presenting to the Emergency Department which has significantly increased processing times due to PPE and Infection Prevention and Control measures required, including the use of single bay rooms. Continued monitoring of this is occurring, with TOC and ED performance discussed at the District's daily ETP meeting. TOC performance has been further impacted by the increased occupancy rate and decreased rates of separations.

ED Triage

The District achieved triage Categories 1, 4 and 5 targets for the month of June 2022. Triage Category 2 performance is below the target at 84.03% (target 95%). Triage Category 3 performance is below the

target at 75.86% (target 85%). Triage time has been impacted by the increase in COVID-19 patients and COVID-19 pathway patients as discussed above.

Elective Surgery

There were 560 less elective surgeries performed in SLHD facilities in June 2022 when compared to the same period in the previous year, representing a decrease of 23.97% (excluding Collaborative Care surgery). In partnership with Collaborative Care arrangements the District is working towards reducing the surgical backlog and increasing capacity to complete deferred cases on the waiting list. A report will be provided to the Board next month on the Collaborative Care surgical activity.

For the month of June 2022, 100% of Category A, 86.84% of Category B, and 83.49% of Category C elective surgery patients were admitted within the clinically appropriate timeframe for their surgery. YTD June surgical patients not ready for care increased by 40.95% (450) when compared to the same period last year.

To supplement operating capacities within Royal Prince Alfred Hospital, Concord Repatriation General Hospital and Canterbury Hospital, collaborative care arrangements are continuing to be utilised with private facilities. Facilities currently engaged in Collaborative Care arrangements include Chris O'Brien Lifehouse, East Sydney Private, Hurstville Private, The Mater Private, North Shore Private, Sydney Day Surgery, Sydney Adventist Hospital, Strathfield Private, Chatswood Private, St George Private, Westmead Private, St Luke's Private, Waratah Private and Macquarie University Hospital.

Surgical Taskforces at RPA, Concord and Canterbury Hospitals continue to oversee the surgical recovery program. Membership of the taskforce in each facility includes the District and Facility Executive, Senior medical, nursing and allied health clinicians and clinical directors from surgical departments, operating theatres, anaesthetics, emergency departments, ICU and wards.

Emergency Surgery

There were 118 less emergency surgeries performed in the month of June 2022 when compared to the same month last year, representing a 9.13% decrease which is positive.

Community Care and Hospital in the Home

The District has continued to manage its activity through the support of Sydney District Nursing, which continues to manage over 1,000 patients per day in the community who would otherwise be seen in Hospital. YTD March 2022 Hospital in the Home overnight separations decreased by 17.07% when compared to the same period last year.

NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

NWAU Activity against Target

The District continues to perform well in relation to the NWAU activity against target, with a 1.63% variance for YTD May, excluding Dental and Sub-Acute. The positive variance driven by the non admitted COVID activity.

Stream	Target	Actual	Variation	Variation %
Acute*	153,589	131,908	-21,682	-14.12%
ED	22,350	20,698	-1,653	-7.39%
NAP**	46,101	75,550	29,449	63.88%
SNAP***				

Board Report

MH Admit [^]	17,655	16,640	-1,016	-5.75%
MH NAP ^{^^}	9,660	8,623	-1,037	-10.73%
Total	249,356	253,418	4,062	1.63%
Dental DWAU	62,282	53,927	-8,355	-13.41%
Dental NWAU [#]	7,820	6,771	-1,049	-13.41%
Total (NWAU)	257,176	260,189	3,013	1.17%

*391 uncoded episodes

** Inclusive of COVID clinics and the Special Health Accommodation

*** SNAP currently unavailable

[^] 180 uncoded

[#] NWAU=589/4691 *DWAU

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

SLHD REVENUE COMMITTEE

Private Health Insurance Usage

For the month of June 2022, 16.29% (1,928 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was a decrease of 268 (12.20%) patients who elected to use their private insurance compared to the same period last year and an increase of 19 (0.98%) in total separations from previous month. This has been significantly impacted by the reduction on elective surgical activity.

For the month ended June 2022 conversions for facilities as compared to the same period last year were:

- RPAH – a decrease of 138 (12.85%) private patients.
- Concord – a decrease of 86 (9.13%) private patients.
- Canterbury Hospital – a decrease of 33 (24.63%) private patients.
- IRO – a decrease from 33 to 22 private patients.
- Balmain Hospital – No changes in comparison from same period last year.

Single Room Usage

For the month of June 2022, 9.06% of patients were flagged as infection control across the District.

For the month, 16% of all available single rooms were occupied by private patients and 32% of all private patients were accommodated in single rooms.

SLHD Strategic Revenue Network

Key notes:

- SLHD Strategic Revenue Network meeting was held in June 2022. Status of Medicare billing rejections was discussed, including the major reasons for the rejections. An update on the progress with the implementation of the PRNIP framework was provided. Update on Ministry workshop for revenue opportunities was provided. Facilities provided an update on the respective revenue performance and opportunities.

- Clinician Billing Portal (CBP) is progressing with RPAH, CRGH and TCH working to identify and sign up staff specialists to bill through the application. There are currently 176 registered users and total \$2.17M has been raised through the portal to date.

REDESIGN AND SERVICE IMPROVEMENT

Innovations

The Pitch

- The next round of The Pitch will be held on 16 September 2022.
- The event follows a hybrid approach with some face to face attendance at the Kerry Packer Education Centre as well as the ability to also connect via live-stream.
- Applications for submissions to the Pitch close on the 19 August 2022.

CHR

- Centre for Healthcare Redesign (CHR) Graduate Certificate Program 2022.03 (July intake)
 - Two SLHD projects successfully gained entrance to the CHR Graduate Certificate Program for the July intake. The two approved projects *HealthPathways Sydney Periodic Review Redesign* and *Meeting Challenges through Collaboration at Balmain Hospital General Practice Casualty* will commence the program on the 19 July 2022
- GPCanShare Redesign Project
 - The diagnostic phase of this project has been finalised. The diagnostic report has been approved by the chief executive and has been submitted to ACI. The goal and objectives of the project have been adjusted following findings from the diagnostic phase. The solution design workshops are planned for 19 July at CRGH and 20 July at RPA.

Other Projects

- Hands Up Project (RPA Hand Clinic)
 - Solutions Statements continue to be reviewed by the project lead.
 - Implementation of quick wins for the project are being prioritised as the process of reengaging with stakeholders continues.
- RPA Virtual Hospital/SDN Demand Management Strategy Redesign
 - The project team are exploring key data and process measures to capture the current situation within the Diagnostic Phase of the project.
- RPAH Transfer of Care Project – ‘Good to Go, Discharge by 10 and 2’
 - The second meeting with medical stakeholders has occurred and all solutions have now been discussed. The team has begun implementation with first solution being the development of a Standard Operating Procedure about Estimated Discharge Date and Waiting for What.
- Diabetes Model of Care Redesign
 - The SLHD Outpatient Diabetes in Pregnancy Model of Care is to be tabled and discussed with SLHD executive after the general outpatient Diabetes Model of Care has been implemented.

Accelerating Implementation Methodology (AIM):

- The July AIM course reached full capacity and was a successful session.
- A follow up meeting for the participants who attended the 2-day AIM training on 30-31 May has been scheduled for the end of August. This will provide an opportunity for participants to practice and reflect on their learning.
- The next scheduled course for 2022 is on 5-6 September.

HealthPathways

Content Development and Maintenance

Development and consultation continue for the localisation and Periodic Reviews to the following pathway sets:

- Hand Therapy and Surgery
- Chronic Pain
- Melanoma and other skin cancers
- Andrology
- Minor Fractures
- Intellectual Disability
- Prader-Willi Syndrome

COVID-19 Specific Content

Minor changes continue to be made to our suite of COVID-19 specific HealthPathways and resources in line with the NSW Collaboration COVID-19 HealthPathways response. July saw the publication of newly developed “Post-COVID-19 Specialised Assessment” referral pathway showcasing the RPAH Post COVID-19 Respiratory Assessment service and the SLHD Multidisciplinary Long COVID Assessment service; along with a refined Post-COVID-19 conditions pathway with clinical indications for post-covid conditions referrals.

Re-Design of our current Periodic Review Process

Official commencement of the ACI Clinical Healthcare Redesign (CHR) project on the HealthPathways Sydney Reviews stream, including the secondment of an independent project lead. The team are working through the Initiation phase, refining project goal, scope and objectives towards the deadline of their first deliverable in August. The team are in the process of establishing an Advisory Committee to guide the project, with mixed representation from SLHD and CESPHN.

Usage of HealthPathways

Usage overall remains high, on the back of the ongoing use of COVID-19 content which has increased throughout July, particularly Active Case Management, corresponding with the currently COVID-19 wave. The 2021-2022 financial year was a record year for HealthPathways Sydney utilisation.

	July 1-25 2022	June 2022	May 2022	April 2022
Users	1,656	1,736	1,896	1,683
Sessions of use	11,770	11,836	13,292	11,118
Total Page Views	35,795	38,747	42,084	35,787

COVID-19 Specific Content Usage

	Page views July 1 - 25 2022	Page views June 2022	Page views May 2022	Page views April 2022
COVID-19 Vaccination Resources	61	51	101	122
COVID-19 Vaccination Procedure	73	59	69	80
Myocarditis and Pericarditis After mRNA COVID-19 Vaccines	14	18	21	22
COVID-19 Active Case Management	2,871	1,767	2,385	2,561
Post-COVID-19 Conditions	352	385	385	229
Post-COVID-19 Specialised Assessment	59	N/A	N/A	N/A
COVID-19 Virtual Care Requests	114	113	160	296
COVID-19 Isolation Support	19	16	21	29
COVID-19 Assessment & Management in RACFs	25	14	36	37

SLHD e-Referral Project

Service recruitment

The Long COVID Rehabilitation and Post COVID Respiratory e-Referrals are scheduled to go live in early August 2022. Testing and training activities are underway with both services in preparation for go live. The Virtual Fracture Clinic and Neurosurgery e-Referral have been prioritised for development, with an estimated deployment date of late August 2022.

Modifications to existing e-Referrals are in progress and include updates to the RPAH Maternity e-Referral in preparation for the Canterbury Hospital roll out, and modifications to existing e-Referrals to align with requirements from the SLHD PRNIP Compliance Steering Committee, regarding named referrals and Medicare billing.

Service	Deployment	Stage
Engage.Outpatients Program: Fertility, Gynaecology and Maternity – RPAH	April 2022	Live
Long COVID Rehabilitation – RPAH	Early August 2022	Testing/Training
Post COVID Respiratory Assessment – RPAH	Early August 2022	Testing/Training
Virtual Fracture Clinic – rpavirtual	August 2022	Design

Neurosurgery – CRGH	August 2022	Design
Hospital in the Home	2022	Design
Endocrinology – RPA and CRGH	2022	Design
Engage.Outpatients Program: Maternity - Canterbury	2022	Design

Platform development

Active Directory integration work is on hold, requiring support from SLHD ICT once resources are available.

Referrer update:

- 752 referrals received in July 2022
- Total referrals received 5,566
- 53 new referrers have used e-Referral during July 2022, with 17 new Practices
- 70% of referrers using HealthLink to refer to SLHD have referred more than once
- An ongoing increase in use of e-Referrals across all existing services has occurred since the deployment of Fertility, Gynaecology and Maternity e-Referral at RPAH

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

GENERAL FUND (GF)

The 2021/22 Service Level Agreement between the Board and Ministry of Health has key financial performance targets for Expense and Revenue. The following analysis reflects the result for the period ended 30 June 2022 based on the District's budgeted NCoS.

For the period ended 30 June 2022, GF Expenditure was \$0.616M (0.02%) favourable to budget. The District has assessed the YTD June 2022 COVID-19 Incremental cost as \$580.548M primarily for Outsourced Elective Surgery, Clinics and Screening, Pathology testing, Special Health Accommodation, PPE, Cleaning, Contract Tracing and Vaccination Program. The District has received the May and June 2022 COVID-19 Stimulus Budget of \$100.967M in June 2022.

YTD June 2022 Expenditure increased significantly (by \$397.149M or 18.26%) compared to YTD June 2021. The average monthly expense rate increased from \$160.292M (excluding LSL adjustment in June 2020) for the 2019-20 Financial Year to \$188.249M (excluding LSL adjustment in June 2021) for the 2020-21 Financial Year and to \$214.342M YTD June 2022. Increase in FTE numbers and the impact of COVID-19 is contributing to these results.

The following new expenses and revenue have been recognised in June 2022 with corresponding budget supplementations provided by the Ministry of Health:

- Recognition of service during pandemic payment - one-off payment of \$3,000 to staff including Visiting Medical Practitioners and excluding contractors, Health Executives and Senior Executive Employees amounting to \$37.326M.
- The COVID-19 vaccinations received free of charge from the Commonwealth government are deemed to be controlled by the Health entity at the time of receipt. As per Australian Accounting Standards, the vaccinations have been recognised in June 2022 at the current replacement cost at the time of receipt including: Expenditure (\$40.524M), Revenue (\$49.237M), Stock (reduction of \$2.065M), loss due to wastage (\$2.115M) and Inventory write-down (\$8.662M).

- The value of all COVID-19 drugs issued to patients in FY2021 and FY2122 and the value of drugs that were on hand at 30 June 22 has been recognised in June 2022 including: COVID-19 drugs dispensed (\$3.350M), COVID drugs inventory (\$0.549M) and Intra health liability (\$3.899M).

GF Revenue (including Quarantine Hotel Passenger Fees and Doubtful Debts) was \$34.292M (12.62%) favourable to budget for the month and \$25.857M (1.08%) favourable to YTD June 2022 budget. The District continues to see unfavourable results in a number of Own Source Revenue categories including Patient Fees, Facility Fees, Car Parking Fees and Prosthesis income as a result of the impact of COVID-19. Excluding the impact of Quarantine Hotel Passenger Fees on Own Source Revenue and Doubtful Debts, the District is \$54.600M unfavourable to June 2022 GF Revenue budget primarily due to the impact of COVID-19.

The District recognised Quarantine Hotel Passenger Fees of \$68.424M YTD June 2022. There was no revenue budget provided for this, thereby resulting in a favourability. This revenue is separate to the District's Own Source Revenue target.

The final NCoS for SLHD for FY21/22 was \$26.472M favourable to budget. Excluding the \$16.089M favourability for Recurrent Allocation and \$4.056M unfavourability of Capital Allocations (due to timing difference of AARP), SLHD is \$14.440M favourable to NCoS budget.

The major variances for the month were:

Expenditure

- GF Total Expenditure for the month of June 2022 was \$24.401M (7.56%) favourable to budget. The result for the month was primarily attributable to favourable results for Employee Related Expenses (\$7.580M), Goods and Services Expenses (\$22.805M) offset by unfavourable results for VMOs (\$1.962M), RMR (\$2.903M) and Grants (\$0.996M).
- YTD June 2022, GF Total Expenditure was \$0.616M favourable to budget, primarily reflecting favourable results for Salaries & Wages (\$45.044M), Goods & Services (\$48.565M) and VMO Payments (\$0.976M) offset by unfavourable results for Overtime (\$33.194M), Annual Leave Provision (\$26.427M), Superannuation (\$23.350M) and RMR (\$8.422M).

Revenue

- GF Total Revenue for the month of June 2022 was \$34.292M (12.62%) favourable to budget, reflecting the favourable results from Patient Fees (\$1.222M), User charges (\$0.734M), Grants and Contributions (\$2.310M), Doubtful Debts (\$22.513M) offset by unfavourable results in Other Sources of Revenue (\$4.520M).
- YTD June 2022 GF Revenue was \$25.857M (1.08%) favourable to budget. This result reflects favourable variance in Grants and Contributions (\$1.658M), Quarantine Hotel Passenger Fees (\$68.424M), Pharmacy Sales (\$0.631M) and High Cost Drugs (\$4.548M) offset by unfavourable variances in Facility Fees (\$5.269M), Prosthesis Income (\$3.455M), Car Park Fees (\$1.695M), Patient Fees (\$25.750M) and Doubtful Debts \$0.009M. The unfavourability in Patient Fees, Facility Fees, Prosthesis Income and Car Park Fees is predominantly due to the impact of COVID-19.

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$0.481M unfavourable to budget for the period of June 2022. This result reflects favourable budget variance for Expenditure (\$3.345M) and unfavourable for Revenue (\$3.826M).

CONSOLIDATED RESULT

For the period ended 30 June 2022, the consolidated YTD NCoS result for the General Fund and SP&T was \$25.992M favourable to budget. The result comprises favourable variances for Expenditure (\$3.961M), Own Source Revenue (\$22.938M) and unfavourable variances for Loss on Sale of Asset (\$0.898M) and Doubtful Debts (\$0.009M).

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

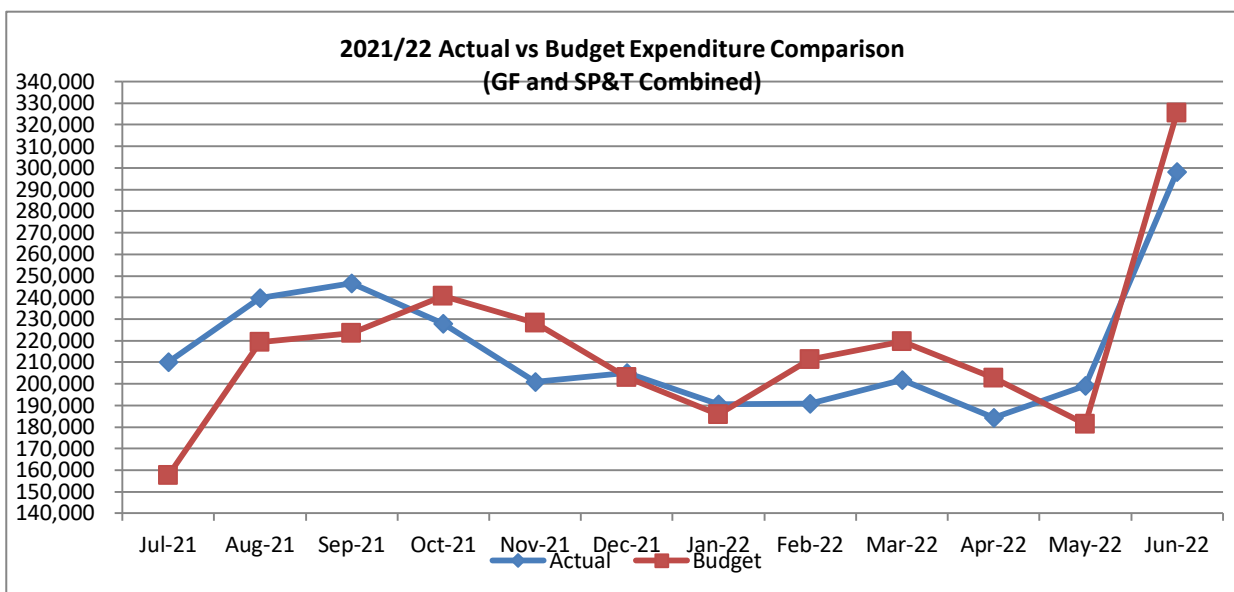
For the period ended 30 June 2022, SLHD recorded a Total Net Result of \$129.369M which was \$25.977M favourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD June 2022 was \$37.695M favourable to budget, reflecting a favourable budget variance for Expenditure (\$10.868M) and Revenue (\$26.827M).

For the YTD June 2022, Total Direct Revenue was \$26.827M favourable to budget, comprising a favourable variance for the General Fund (\$30.661M) and unfavourable variance for SP&T Fund (\$3.834M). This result for the GF reflects favourable variances in User Charges and Grant Income offset by unfavourable variances in Patient Fees and Other Income.

YTD June 2022 Total Direct Expenditure was \$10.868M favourable to budget, reflecting an favourable variance for General Fund (\$9.709M) and SP&T Fund (\$1.158M). The result for the General Fund reflects favourable variances in G&S Corporate (\$47.258M), Salaries & Wages (\$45.044M), Direct Clinical Operating (\$6.879M) and VMOs (\$0.976M) offset by unfavourable variances in Overtime (\$33.194M), On-costs (\$49.902M), Grants (\$2.051M) and G&S Supporting Services & Utilities (\$5.573M).

MONTHLY BUDGET PERFORMANCE

The graph below compares the actual and budget performance on a monthly basis.



LIQUIDITY

The cash balance at 30 June 2022 for the SLHD Operating bank account was \$2.446M and the Operating Cash book balance was \$2.325M.

CAPITAL WORKS – SMRS PROJECTS

As at 30 June 2022, the District's Full Year Capital works budget relating to SMRS Projects is \$23.314M comprising \$8.258M of MoH funded and \$15.056M of locally funded projects. In June 2022, four locally funded projects totalling \$1.745M and additional budget for existing projects of \$0.800M were approved by MoH.

Actual expenditure as at the end of June 22 was \$22.452M which is marginally on budget.

The actual expenditure for MoH funded Minor works & Equipment for COVID-19 was \$1.555M at the end of June 2022. The total approved funding was \$1.590M.

OTHER CAPITAL PROJECTS

As at the end of June 2022, the District has expended an amount of \$0.321M relating mainly to RPAH Paediatrics Stage 3, RPAH Microsurgery Lab Redesign and CRGH Research Centre. The total expenditure of \$0.321M was sourced from the General Fund.

CAPITAL INFRASTRUCTURE & ENGINEERING SERVICES

RPA

Redevelopment

Key activities undertaken for the RPA Redevelopment are as follows:

- Progression of Concept Design to close out activities including further consultation on the affordable scope option with Sydney Local Health District (SLHD) Executive and the Planning and Development Committee (PDC).
- Design review and feedback session with the NSW Government Architect.
- Ongoing SSDA program and deliverables review with design and planning team including planning for Design Integrity Panel sessions.
- Continued development of design and documentation required for planning approvals for the Early and Enabling Works packages, including design finalisation for Anatomical Pathology and Molecular Imaging.
- Ongoing due diligence investigations including survey, geotechnical, hazmat and contamination.

Gloucester House

Remedial works to handrails completed. Window repairs and painting are ongoing however recent wet weather events have delayed progression throughout this reporting period.

Innovation Hub – Gloucester House Level 7

Waterproofing works and high-level remedial works to Level 7 Gloucester House continued throughout this reporting period. Structure steel has also been delivered and installed however recent wet weather events delayed capital works progression of this project.

Strategic Relations and Communications Building 28 Level 4

During the course of this reporting period the the installation of new cable trays commenced and commissioning of the new communications room was underway.

Junior Medical Officers Kitchen Refurbishment

The capital works program for the JMO kitchen refurbishment was completed in this reporting period. The area has been handed over and is now utilised by the facility. Feedback from the Doctors in Training is very positive.

Mortuary Access – Shell Space and Lift

The bulk excavation for lift shaft is now complete. Structural steel for concrete pad to due to be poured and a site surveyor has attended site to review proposed grid lines and pier set-out.

RPU Hot Cells Building 63

Building works to the Radiopharmaceutical Production Unit (RPU) hot cells have continued throughout the month and mechanical service rough-in works have commenced.

CT Scanner Replacement

Building works for this project were completed during this reporting period. The new scanner has been delivered to the site with installation now underway. Commissioning handover documentation package is being prepared for CE approval.

Concord

Key milestones for this reporting period include:

- Ramp Wards demolition forecast to commence July 2022
- Lipman to implement five-day work week

CSSD Sterilising

Over the course of this reporting period, structural works and demolition of the existing ceiling have been successfully completed. Rough installations for electrical and mechanical services has commenced and preparation for Stage 1 decant works are underway.

Palliative Care Redesign

Demolitions works have been completed this reporting period with fire rated wall and ceiling installation ongoing.

PET Suite

Building services fit offs and painting works continued throughout this reporting period. Joinery work is nearing completion and the scanner has been delivered to the site, in preparation for installation works.

Cultural-Lounge

The capital works program for the Cultural Lounge at Concord Hospital was completed in this reporting period. The area is now being occupied. Feedback from staff and patients is very positive.

Supply Services Tearoom

The capital works program for the SLHD Supply Services tearoom has been completed. The area is now being utilised by the department. Feedback from the staff is very positive

PLANNING

Canterbury Hospital and Health Services

The Canterbury Clinical Services Statement (CSS) was formally submitted to the Ministry of Health in July 2022 for approval for funding.

Collaborative work was undertaken with consultants to translate the CSS into a Capital Investment Proposal for submission (see below). The new Ministry of Health Stage 0 planning process was applied to the planning for Canterbury and involved the development of a prioritisation process for the potential staging of the Canterbury Hospital and Health Services project.

2022 Capital Investment Proposals and Asset Management Plans

The SLHD Capital Investment Proposals have been submitted to the Ministry of Health for consideration for inclusion on the 2022 NSW Health Capital Investment Strategic Plan.

The proposals submitted, ranked in order of priority:

1. Canterbury Hospital and Health Services Redevelopment
2. Concord Repatriation General Hospital Stage 2
3. RPA Stage 2
4. HealthOnes across the District at Canterbury, Waterloo, Riverwood, and Concord/Homebush
5. Community-based Residential Mental Health Rehabilitation – 50 beds across the District with 30 beds in Canterbury (across 3 sites), 10 beds in Rozelle (single site), and 10 beds close to Redfern (single site).
6. Canterbury Hospital Inpatients Mental Health Services - An acute inpatient Mental Health service of 50 beds to meet local demand until 2036.

The CIPs align with the 2022 SLHD Asset Management Plan (AMP) and the Strategic Asset Management Plan (SAMP) that have also been submitted to the Ministry of Health. The 2022 AMP and SAMP were developed by the SLHD Capital Infrastructure and Engineering in consultation with the SLHD Planning Unit.

Concord Repatriation General Hospital Stage 2 Planning

Significant work is being undertaken to finalise the Concord Repatriation General Hospital Stage 2 Clinical Services Statement for submission to the Ministry. This plan updates the Ministry approved Clinical Services Plan that supported the Concord Hospital Stage 1 redevelopment, with a focus on the Emergency Department, acute care and inpatient, imaging, pathology, ambulatory care and virtual care services. The Plan includes updates to the projected activity (2031 and 2036) for inpatient and ambulatory care services, and outlines the new models of care and service initiatives including virtual models of care, to inform the Concord Repatriation General Hospital Stage 2 infrastructure requirements.

Tech Central (Camperdown-Ultimo Collaboration Area)

Key activities supported by the Planning Unit:

- **Tech Central Alliance – CHERP Structure Plan:** Ongoing input and collaboration into the development of a Structure Plan for the Camperdown Health Education Research Precinct (CHERP) of Tech Central. Consultants have been engaged by the Tech Central Alliance to evaluate the current and future land use, and mechanisms available to activate CHERP to attract, retain and grow industries associated with health, research and innovation.

- **Tech Central Research and Innovation Research Fund:** In partnership with the University of Sydney and UTS, SLHD (supported by the Planning Unit) is developing a joint submission seeking funding to support the establishment of a digital hub. The hub aims to facilitate collaboration and optimise existing resources and expertise across Tech Central in four focus areas: Personalised Medicine, Aerospace and Defence, Smart Cities and Advanced Manufacturing.
- The draft **Tech Central - Economic Analysis** has been released for comment. It provides a snapshot of current and future economic opportunities for the Precinct.

Other Plans

The Planning Unit is currently supporting the development of several other plans across the District including:

- Sydney Education Strategic Plan
- SLHD Mental Health Strategic Plan
- The Inner West Child Health and Wellbeing Plan
- SLHD Eating Disorders Plan update
- SLHD Palliative Care Strategic Plan

Board Planning Day

A successful Board Planning Day was held on 20 June 2022 at Centre for Education and Workforce Development (CEWD) to discuss and finalise the top priorities for the Chief Executive in Service Agreement 2022/23.

SYDNEY RESEARCH

Sydney Biomedical Accelerator Complex

In June 2022, the NSW Treasurer and NSW Minister for Science, Innovation and Technology announced the allocation of \$150 million towards a new state of the art research complex, the Sydney Biomedical Accelerator (SBA). This funding will be used to establish a new research facility on the campus of Royal Prince Alfred Hospital (SBA Building B), which will be one of four interconnected buildings comprising the SBA. In addition to this new building, Sydney Local Health District (SLHD) have committed \$25 million towards early and enabling works, and will be undertaking the refurbishment and creation of a new Innovation Hub in Gloucester House (SBA Building A). The University of Sydney (The University) have committed \$185 million towards the establishment of a new research building on the University campus (SBA Building C). The University have also recently progressed a Business Case to the University Senate seeking funding for the establishment of an additional research building (SBA Building D) on the west campus.

The SBA Project Team are in the process of establishing the governance structure to support the planning, development and operationalisation of the SBA, which will be presented to the SBA Executive Steering Committee involving the Chief Executive and senior executive representatives from NSW Health, the University and The Centenary Institute. We are working towards establishing a series of Project User Groups (PUGs) to assist with defining the functional design requirements of the SBA and with joint representation from SLHD, the University and The Centenary Institute. A Letter of Agreement has also been drafted and shared with the Board Chair of the Centenary Institute, which confirms their status as the first medical research collaborator and their role in the planning and design of the SBA.

Camperdown Health Education Research Precinct (CHERP)

Sydney Research have submitted a revised brief for consideration by the Chief Executive, SLHD and the Executive Dean University of Sydney that proposes a new governance model and program office for the Camperdown Health Education Research Precinct (CHERP). The proposed model will provide collaborative, strategic and operational overview of the CHERP through the establishment of three peak committees and up to seven working groups with representation from the anchor institutions (RPA and the University), Health Infrastructure NSW, Tech Central, Greater Cities Commission, and the research, academic and industry partners across the Precinct.

The Chief Executive, SLHD has approved the establishment of a Program Manager, CHERP that will support the implementation of the agreed governance model and the progression of key collaborative initiatives. The position will work closely with Adj A/Prof Vicki Taylor, Executive Director, CHERP and Sydney Research and Penny Schmidt, Deputy Director, Sydney Research. Recruitment to this position will commence as soon as possible.

Camperdown Biotechnology Hub

Sydney Research have been involved in a dedicated Project Working Group with representation from six (6) inter-Government agencies (Sydney Local Health District, Health Infrastructure NSW, Investment NSW, Transport NSW, Greater Cities Commission and NSW Department of Planning and Environment) regarding the establishment of a Biotechnology Hub in Camperdown. It is being proposed that the Biotechnology Hub is established on land owned by Transport for NSW, which is currently being utilised as a dive site for the WestConnex project. The Chief Executive, Adj A/Prof Vicki Taylor and Penny Schmidt are the SLHD representatives on this Working Group and have continued to ensure that the proposal clearly articulates the value of a Biotechnology Hub for the District, CHERP as well as complement the vision and objectives of the SBA).

The Project Working Group have developed a draft brief to seek endorsement from the NSW Secretaries Panel to progress the development of a Business Case to secure the land and funds for the initiative. Sydney Research are preparing a covering brief from the SLHD CE to the Secretary, NSW Health providing the context and reinforcing the need for a Biotechnology Hub in Camperdown to support manufacturing needs, the acceleration of health innovation (particularly those initiating from the SBA) and providing expansion space for up-and-coming BioTech and MedTech companies. The proposed Hub would cater for health-related start-ups, scale-ups, spin-offs and synergistic anchor tenants to be co-located close to RPA and the University, and has the potential to generate significant economic benefits to the state and nation. It would strengthen and grow our already healthy eco-system of talent, skill and expertise. This Hub would be complementary to the strategy and work to be undertaken within the SBA by providing a long-term growth option for the innovative ideas that develop within the complex, as well as a space for manufacturing needs that are crucial in prototype and product development.

Tech Central

Sydney Research together with Spark Festival coordinated the July 2022 Health + MedTech + BioTech Mixer, which was held for the first time at RPA's Kerry Packer Health Centre (KPEC) on Thursday 21 July 2022. Sydney Research have supported these events since their inception in February 2022, prior mixers had been held at the Centenary Institute and the Sydney Knowledge Hub. The purpose of these mixers is to bring together clinicians, researchers, academics, entrepreneurs and tech innovators from across the Tech Central precinct to share ideas, create incidental interactions and foster new collaborations between diverse disciplines. The July mixer was the most successful event to date,

attracting over 110 attendees and having 23 lightning pitches of exciting research and innovation underway across the Precinct.

Sydney Research are also coordinating the next Tech Central Quarterly Briefing, which will be held for the first time at RPA's Kerry Packer Health Centre (KPEC) on 17 August 2022. The purpose of this briefing is to update on the upcoming priorities of Tech Central for 2022, key activities from partners in the precinct and to discuss the future of innovation in Tech Central. Sydney Research together with Scott Andrews, Manager, Heritage and Environment SLHD will also be leading a brief walking tour prior to the event, which will highlight key external sites including the RPA campus, Institute of Academic Surgery, Professor Marie Bashir Centre, the Centenary Institute, Charles Perkins Centre, Susan Wakil Health Building, and the proposed site for the SBA. An invitation to the Briefing will be circulated to Board members.

Patient and Family Centred Care (PFCC) Committees

PFCC Our People Leadership Group

Adj A/Prof Vicki Taylor, Executive Director, CHERP and Sydney Research continues to Chair the PFCC Our People Leadership Group with Ms Gina Finocchiaro, Director, Workforce and Corporate Operations. The Leadership Group met on 12 July 2022 to discuss the progress of key initiatives across staff wellbeing, MDOK program, education and sustainability.

PFCC Our Patients Working Group

Ms Penny Vogelzang, Deputy Director, Sydney Research continues to represent Sydney Research on the PFCC Our Patients Working Group, which met on 20 July 2022 to discuss initiatives relating to patient and family experience, consumer and community engagement, and the involvement of consumers as partners in research. The discussion primarily focussed on the drafted Consumer and Participation Framework (2022-2027) and a new project to enhance cancer management in primary care. Sydney Research will ensure that the draft Framework aligns with the proposed new policy on the engagement of consumers in research.

Consumer and Community Involvement in Research (CCI) Initiatives

The Sydney Research team and Adj A/Prof Greg Fairbrother continue to progress the following six (6) initiatives seeking to support and strengthen the involvement of consumer and community members in research activities. The SLHD Research Consumer Reference Group will meet in August 2022 to discuss the new policy on the engagement of consumers in research as well as the implementation of the approved study examining the consumer-researcher partnership.

NSW OHMR – Embedding Quality Research Steering Committee

Research Governance

The EQR Research Governance Project is progressing well and within the agreed timelines. Professor Nik Zeps, Partner, Chrysalis has been engaged by OHMR to support the project and has recently completed the initial discovery stage. His team had recently visited the project pilot sites at NBMLHD and SCHN, and have conducted a scoping exercise exploring the current policies and practices. They have also created a list of policies, procedures and guides based on the scoping exercise to address the identified gaps / issues. They will work with the pilot site teams to systematically review and finalise the proposed policies, procedures, and guides. The vision is that the suite of policies and procedures will be aligned with the upcoming revisions to the state-wide policies and procedures.

Marlow Hampshire Health and Biomedical Research Leader Development Program

Following the successful pilot in 2020, SLHD have hosted another round of the Marlow Hampshire Health and Biomedical Research Leadership Development program in 2022. The program had been an initiative of the EQR Steering Committee to provide targeted support for early to mid-career researchers and is designed to provide participants with the knowledge and skills required to become productive and effective leaders and members of research teams. There were a total of 21 individuals who participated in the program including ten (10) staff from across and within SLHD. There were also participants from Central Coast, Hunter New England, Mid North Coast, Murrumbidgee, Nepean Blue Mountains, Northern Sydney, and Western NSW Local Health Districts. The program was run over four days across June and July 2022 with the final session held on 26 July 2022. An evaluation survey was provided to participants on the completion of the program, where the outcomes will be reported to the EQR Steering Committee.

Sydney Health Partners

Sydney Research continues to work closely with Sydney Health Partners (SHP) to support key initiatives including Encouraging More Clinical Trials in Australia and the e-LECT Alliance with the University of Sydney and NHMRC Clinical Trial Centre. Dr Anderson AM and Adj A/Prof Taylor continue to participate as members of the SHP Board, and A/Prof Taylor also represents the District on the SHP Research Development Committee.

The Sydney Health Partners Board Meeting and Annual Forum were held on Wednesday, 6 July 2022 at the University of Sydney campus with keynote presentation by Dr Jeremy McAnulty, Executive Director Health Protection NSW. The afternoon also featured presentations and discussions about Sydney Health Partners' research translation initiatives including Round 2 of the Clinical Academic Groups and Research Translation Fellowships. The Forum also highlighted SHP work in the areas of governance, data sharing, consumer involvement and clinical trials support.

Franklin Women

Franklin Women held their 'Women in Leadership and the COVID-19 Response' event on 27 July 2022, with representation from multiple staff from SLHD in attendance. Dr Teresa Anderson AM was highlighted for her contributions to the COVID-19 response.

Following the successful round in 2021, Franklin Women have renewed and currently advertising the Dr Teresa Anderson Award. The Award seeks to support high-achieving researchers that have been negatively impacted by the COVID-19 pandemic. The Award was named after the Chief Executive to recognise her significant commitment and contribution during the pandemic to protect the broader community. Applications for the opportunity close on Friday 5 August 2022.

CTMS Working Group

OHMR have successfully recruited three (3) change managers who will be assisting in the implementation of CTMS across SLHD. Ms Yuen Ng is the dedicated change manager for SLHD, with Ms Aideen Sheehan and Ms Garnette Fuller supporting SLHD as well as SESLHD. Change Managers will deliver online and in-person training sessions, host regular drop in sessions, and provide support for users navigating the CTMS. The timeline for implementation of the CTMS at SLHD has been moved up to Phase 2 with training commencing from mid-September onwards. Change Managers will remain with the LHD for 12 months from the start of implementation.

NSW Health Precinct Prospectus

Sydney Research has been supporting Health Infrastructure NSW with the development and in coordinating the contributions of the District for the NSW Health Precincts Prospectus. The Prospectus is a key deliverable identified by the NSW Health Strategic and Commercial Partnerships Steering Committee chaired by the NSW Health Secretary. The purpose of this prospectus is to provide an overview of the state-wide research strengths and capabilities of the NSW health system and opportunities for industry partnership. Following the feedback provided by each precinct, Health Infrastructure are progressing with finalising the Prospectus over the coming weeks with an expected completion in early August 2022.

Communications and Engagement

Through the Sydney Research Council, communications and social media, Sydney Research is promoting internal and partner educational and research activities.

- The Sydney Research weekly electronic newsletter, e-Update, has an audience of 1,148 subscribers
- The PFCC Research Working Group bi-monthly newsletter, 'Consumers in Research', has an audience of 140 subscribers.
- @SydneyResearch currently has 1,323 followers on Twitter
- Sydney Research LinkedIn has accrued 577 followers to date.

Hootsuite Trial

- As an action of the SLHD Social Media Steering Committee, Sydney Research was selected as one of the first departments in the District to trial the new Hootsuite application. Hootsuite provides a platform to control, manage and monitor multiple social media accounts, which would streamline and enable greater oversight over communication activities. The SLHD Hootsuite Trial started on 18 July 2022 and will conclude on 29 July 2022. An evaluation report will be presented to the SLHD Social Media Steering Committee in August 2022. If successful, Hootsuite will be introduced in late August pending commercial agreement and contract signing.

Other Activities

In addition to the above, Sydney Research have participated or continue to support the following key activities within SLHD and across interagency partners:

- SLHD Social Media Steering Committee
- WCX Dive Site Cabinet Submission Working Group
- ANZAC Research Institute Transition Working Group
- SLHD Clinical Trials Steering Committee
- RPA Western Campus Master Plan Discussions
- Discussions with Cicada Innovations around the establishment of a Camperdown incubator program to further strengthen idea development and commercialisation.



Dr Teresa Anderson AM
Chief Executive

Date: 15.8.22