

**Corporate Governance Attestation Statement**

**SYDNEY LOCAL HEALTH DISTRICT**

**1 July 2020 to 30 June 2021**



**CORPORATE GOVERNANCE ATTESTATION STATEMENT  
SYDNEY LOCAL HEALTH DISTRICT**

The following corporate governance attestation statement was endorsed by a resolution of the Sydney Local Health District Board at its meeting on 16 August 2021.

The Board is responsible for the corporate governance practices of the Sydney Local Health District. This statement sets out the main corporate governance practices in operation within the Sydney Local Health District for the 2020-21 financial year.

A signed copy of this statement was provided to the Ministry of Health by 31st October 2021. This delayed submission was mutually agreed upon between Sydney Local Health District and the Ministry of Health.

Signed:

A large, stylized blue ink signature of John Ajaka.

Honourable John Ajaka  
Chair

Date 25. 10 . 21 .

A black ink signature of Dr Teresa Anderson, AM.

Dr Teresa Anderson, AM  
Chief Executive

Date 20.10.21

## **STANDARD 1: ESTABLISH ROBUST GOVERNANCE AND OVERSIGHT FRAMEWORKS**

### **Role and function of the Board and Chief Executive**

The Board and Chief Executive carry out their functions, responsibilities and obligations in accordance with the *Health Services Act 1997* and the *Government Sector Employment Act 2013*.

The Board has approved systems and frameworks that ensure the primary responsibilities of the Board are fulfilled in relation to:

- Ensuring clinical and corporate governance responsibilities are clearly allocated and understood
- Setting the strategic direction for the organisation and its services
- Monitoring financial and service delivery performance
- Maintaining high standards of professional and ethical conduct
- Involving stakeholders in decisions that affect them
- Establishing sound audit and risk management practices.

### **Board Meetings**

For the 2020-21 financial year the Board consisted of a Chair, the Hon. Ron Phillips AO (Resigned 31<sup>st</sup> October 2020), and 11 members appointed by the Minister for Health. The Board met 11 times during this period.

The members of the Sydney Local Health District (SLHD) Board for 2020-21 include:

- Dr Teresa Anderson, AM, Chief Executive
- Ms Victoria Weekes (Acting Chair from 1<sup>st</sup> November 2020)
- Dr Thomas Karplus
- Mr Richard Acheson
- Mr David McLean, FAIM FAICD
- Ms Frances O'Brien
- Prof. Paul Torzillo, AM
- Associate Professor Christine Giles
- Ms Susan Anderson (Resigned 24 September 2020)
- Associate Professor Mary Haines
- Ms Ronwyn North
- Ms Kerry-Anne Hartman

### **Authority and role of senior management**

All financial and administrative authorities that have been delegated by a formal resolution of the Board on 9<sup>th</sup> July 2012 and are formally documented within a Delegations Manual for the SLHD. The latest amendment to the Delegations Manual was approved by the Board on 14<sup>th</sup> December 2020.

The roles and responsibilities of the Chief Executive and other senior management within the SLHD are also documented in written position descriptions.

### **Regulatory responsibilities and compliance**

The Board is responsible for and has mechanisms in place to ensure that relevant legislation and regulations are adhered to within all facilities and units of the SLHD, including statutory reporting requirements.

The Ministry of Health and Sydney Local Health SLHD policies have procedures that are available to staff and are posted on the intranet. The SLHD employs a Policy Manager to oversee policy development, coordination and dissemination of policies. The Policy Manager reports to the Chief Executive through the Acting Executive Director, Clinical Governance and Risk.

The Board also has a mechanism in place to gain reasonable assurance that the SLHD complies with the requirements of all relevant government policies and NSW Health policy directives and policy and procedure manuals as issued by the Ministry of Health.

### **COVID 19 Response**

The District's COVID-19 response is informed by the State Emergency Management Plan, NSW Health Management Plan and NSW Health Influenza Pandemic Plan. The District has established appropriate governance structures through the COVID-19 Steering Committee and its reporting committees which include:

- SLHD Infection Control Governance Committee.
- Personal Protective Equipment Governance Committee.
- Special Health Accommodation Steering Committee.
- Royal Prince Alfred Hospital COVID-19 Management Group Meeting.
- Concord COVID-19 Daily Huddle.
- Canterbury Hospital COVID-19 Management Meeting.
- Balmain Hospital Executive Meeting.
- COVID-19 Screening and Vaccination Program Steering Committee:
  - NSW Health Vaccination Centre – Sydney Olympic Park Management Meeting.
  - Mallett Street Vaccination Clinic Management Meeting.
  - Airport Vaccination and Saliva Testing Management Meeting.
  - Canterbury Vaccination Clinic Management Meeting.
  - Mobile Vaccination Clinics Management Meeting.
  - Flying Squad Management Meeting.

The COVID-19 Steering Committee meets weekly and is chaired by the Chief Executive and is attended by senior clinicians, health staff and Board members who are involved in the decision making. In addition, the SLHD has a COVID-19 Emergency Operations Centre which was set up by the SLHD Disaster Manager who reports directly to the Chief Executive. Regular reports are provided to the SLHD Board in relation to the COVID-19 response.

Comprehensive governance processes have been established across all aspects of the COVID-19 response including the COVID-19 screening, the COVID-19 testing program, the border and quarantine program, Special Health Accommodation, the vaccination program and electronic direct mail that regularly provides COVID-19 updates to all staff.

The District continues to work closely with the Ministry of Health and the State Health Emergency Operations Centre on ensuring an effective COVID-19 response.

## **STANDARD 2: ENSURING CLINICAL RESPONSIBILITIES ARE CLEARLY ALLOCATED AND UNDERSTOOD**

The Board has in place frameworks and systems for measuring and routinely reporting on Clinical Governance and the safety and quality of care provided to the communities the SLHD serves. These systems and activities reflect the principles, performance and reporting guidelines as detailed in NSW Health Policy Directive 'Patient Safety and Clinical Quality Program' (PD2005\_608).

SLHD has further formalised its Clinical Governance Framework which outlines the governance structures, functions and responsibilities within SLHD and policies underpinning this. The framework specifically outlines the SLHD Board mechanisms in place to satisfy them that care provided to patients is safe and of a high quality.

The SLHD has:

- Clear lines of accountability for clinical care which are regularly communicated to clinical staff and to staff who provide direct support to them. The authority of facility/network general managers is also clearly understood.
- Effective forums in place to facilitate the involvement of clinicians and other health staff in decision making at all levels of the SLHD.
- A systematic process for the identification and management of clinical incidents and minimisation of risks to the SLHD.
- An effective complaint management system for the SLHD and complaint information is used to improve patient care.
- A Medical and Dental Appointments Advisory Committee to review the appointment or proposed appointment of all visiting practitioners and specialists. The Credentials Subcommittee provides advice to the Medical and Dental Appointment Advisory Committee on all matters concerning the clinical privileges of visiting practitioners or staff specialists.
- An Aboriginal Health Advisory Committee with clear lines of accountability for clinical services delivered to Aboriginal people. The Aboriginal Health Steering Committee provides leadership and support for the system wide approach to addressing the directions and strategies of the SLHD's Aboriginal Health Strategic Plan and the SLHD Strategic Plan. In addition, the committee ensures that the implementation process is community driven, respectful of Aboriginal culture, supportive of ongoing partnerships, and committed to Closing the Gap between Aboriginal and non-Aboriginal people by striving to have the healthiest Aboriginal community in Australia. The use of Aboriginal Impact Statements is incorporated into all Facility Strategic Plans and their continued use is monitored for all future health service plans to ensure health services are aligned and deliver the health, cultural and social needs of Aboriginal people.
- The SLHD has a Director of Aboriginal Health who reports directly to the Chief Executive as a member of the SLHD Executive team. The Director attends the weekly executive meeting and all peak governance committees. Aboriginal Health is the responsibility of all members of the Executive and Clinical Streams. SLHD has a partnership agreement with Aboriginal Medical Services (AMS).
- Adopted the *Decision Making Framework for NSW Health Aboriginal Health Practitioners Undertaking Clinical Activities* to ensure that Aboriginal Health Practitioners are trained, competent, ready and supported to undertake clinical activities.
- Achieved appropriate accreditation of healthcare facilities and their services.

## **Corporate Governance Attestation Statement**

### **SYDNEY LOCAL HEALTH DISTRICT**

**1 July 2020 to 30 June 2021**



The Chief Executive has mechanisms in place to ensure that the relevant registration authority is informed where there are reasonable grounds to suspect professional misconduct or unsatisfactory professional conduct by any registered health professional employed or contracted by the SLHD.

Health services are required to be accredited to the National Safety and Quality Health Service (NSQHS) Standards under the Australian Health Service Safety and Quality Accreditation Scheme (the AHSSQA Scheme).

The SLHD intends to submit an attestation statement confirming compliance with the NSQHS Standards for the 2020/21 financial year to their accrediting agency by 30 September 2021. The SLHD submitted an attestation statement to the accrediting agency for the 2019/20 financial year.



### STANDARD 3: SETTING THE STRATEGIC DIRECTION FOR THE ORGANISATION AND ITS SERVICES

The Board has in place strategic plans for the effective planning and delivery of its services to the communities and individuals served by the SLHD. This process includes setting a strategic direction in a 3- to 5-year strategic plan for both the SLHD and the services it provides within the overarching goals of the 2020/21 NSW Health Strategic Priorities.

SLHD-wide planning processes and documentation is also in place, covering:

- Detailed plans linked to the Strategic Plan for the following:
  - Asset management
    - Asset management plan (AMP)
      - The Asset Management Plan 2021/2022-2025/2026 sets out the SLHD approach to deliver the strategies identified in the Strategic Asset Management Plan 2021/22 to 2030/31. It involves the identification of risks and mitigation strategies (including maintenance and monitoring performance).
    - Strategic asset management plan (SAMP)
      - The Strategic Asset Management Plan 2021/22 to 2030/31 outlines the strategies to deliver on the NSW Health Asset Management Objectives. This involves outlining the infrastructure to meet demand across SLHD facilities, in line with the strategic direction of the facilities.
  - Information management and technology
    - Progress against the Information and Communication Technology (ICT) Strategic Plan 2015-2020 is reviewed regularly. A new Strategic Plan 2021-2024 is being developed in consultation with eHealth NSW.
  - Research and teaching
    - The SLHD has the Research Strategic Plan 2018-2023 which enables the District to support and harness research and innovation.
  - Workforce management
    - Progress against the Workforce Strategic Plan 2016-2020 is reviewed regularly. A new Strategic Workforce Plan 2021-2024 is currently being developed.
    - The Aboriginal Workforce Plan 2021-2025 is currently being developed with extensive consultation with stakeholders including the Aboriginal Medical Service Redfern and Metropolitan Local Aboriginal Land Council.
- Local Health Care Services Plan
  - SLHD has an overall strategic plan that states its vision to provide “excellence in health and healthcare for all”.
  - Each facility within SLHD has a strategic plan outlining the service direction and specific actions to improve the health of the local catchment population and delivery of services over a 5 year horizon. This is available at <https://www.slhd.nsw.gov.au/planning/currentPlans.html>
- Corporate Governance Plan
  - A Corporate Governance Plan was established in 2021.

## Corporate Governance Attestation Statement

### SYDNEY LOCAL HEALTH DISTRICT

1 July 2020 to 30 June 2021



- Prior to this, SLHD had strong corporate governance structures that incorporated all elements underpinning this plan, including a localised corporate governance policy.
- The Chief Executive has implemented practices that ensure that the primary governing responsibilities in relation to the SLHD are fulfilled with respect to:
  - Setting strategic direction.
  - Ensuring compliance with statutory requirements.
  - Monitoring performance of the District.
  - Monitoring financial performance of the District.
  - Monitoring the quality of health services.
  - Industrial relations/workforce development.
  - Monitoring clinical, consumer and community participation.
  - Ensuring ethical practice.
- Aboriginal Health Action Plan
  - The Aboriginal Health Strategic Plan for 2018-2022 covers Aboriginal related health priorities. Progress against the plan is monitored by the Aboriginal Health Steering Committee.
  - Aboriginal related priorities are also covered in the overarching SLHD Strategic Plan 2018-2023. Progress against the plan is reviewed regularly.

## **STANDARD 4: MONITORING FINANCIAL AND SERVICE DELIVERY PERFORMANCE**

### **Role of the Board in relation to financial management and service delivery**

The SLHD is responsible for ensuring compliance with the NSW Health Accounts and Audit Determination and the annual Ministry of Health budget allocation advice.

The Chief Executive is responsible for confirming the accuracy of the information in the financial and performance reports provided to the Board and those submitted to the Finance and Performance Committee and the Ministry of Health and that relevant internal controls for the SLHD are in place to recognise, understand and manage its exposure to financial risk.

The Board has confirmed that there are systems in place to support the efficient, effective and economic operation of the SLHD, to oversight financial and operational performance and assure itself financial and performance reports provided to it are accurate.

To this end, Board and Chief Executive certify that:

- The financial reports submitted to the Finance, Risk & Performance Management Committee and the Ministry of Health represent a true and fair view, in all material respects, of the SLHD's financial condition and the operational results are in accordance with the relevant accounting standards.
- The recurrent budget allocations in the Ministry of Health's financial year advice reconcile to those allocations distributed to units and cost centres. Each financial year the Chief Executive, supported by the Director of Finance and the Board, presents the budget at various facilities within the SLHD enabling all staff the opportunity to attend. The presentation includes both revenue targets and expected expenditure and is preceded by highlights of what was achieved in performance, financial accountability and improve patient outcomes in the previous 12 months. The SLHD's annual service agreement and facility budgets are published on the SLHD website.
- Overall financial performance is monitored and reported to the Finance and Performance Committee of the SLHD.
- Information reported in the Ministry of Health monthly reports reconciles to and is consistent with reports to the Finance and Performance Committee.
- All relevant financial controls are in place.
- Write-offs of debtors have been approved by duly authorised delegated officers.

### **Service and Performance**

A written Service Agreement was in place during the financial year between the Board and the Secretary, NSW Health, and performance agreements between the Board and the Chief Executive, and the Chief Executive and all Health Executive Service Members employed within the SLHD.

The Board has mechanisms in place to monitor the progress of matters contained within the Service Agreement and to regularly review performance against agreements between the Board and the Chief Executive.

### **The Finance and Performance Committee**

The Board has established a Finance and Performance Committee to assist the Board and the Chief Executive to ensure that the operating funds, capital works funds, resource utilisation and service outputs required of the SLHD are being managed in an appropriate and efficient manner.



## **Corporate Governance Attestation Statement**

### **SYDNEY LOCAL HEALTH DISTRICT**

**1 July 2020 to 30 June 2021**



The Finance and Performance Committee receives monthly reports that include:

- Financial performance of each major cost centre.
- Subsidy availability.
- The position of Restricted Financial Asset and Trust Funds.
- Activity performance against indicators and targets in the performance agreement for the SLHD.
- Advice on the achievement of strategic priorities identified in the performance agreement for the SLHD.
- Year to date and end of year projections on capital works and private sector initiatives.

Letters to management from the Auditor-General, Minister for Health, and the NSW Ministry of Health relating to significant financial and performance matters, are also tabled at the Finance and Performance Committee.

During the 2020-21 financial year, the Finance and Performance Committee was chaired by The Hon. Ron Phillips, AO (from July 2020 to October 2020), Ms Victoria Weekes, Deputy Chair (November 2020 to February 2021) and Ms Ronwyn North, Board Member (March 2021 to June 2021) and comprised of:

- Dr Teresa Anderson, AM, Chief Executive, SLHD
- Dr Thomas Karplus, Board Member
- Dr Mary Haines, Board Member
- Ms Ronwyn North, Board Member
- Ms Victoria Weekes, Acting Chair
- Mr Ross Sinclair, Director of Finance, SLHD (Now Acting Director of Operations, SLHD)
- Ms Gina Finocchiaro, Director, workforce and Corporate Operations, SLHD
- Ms Sharon Campbell, Acting Director, Clinical Governance and Risk SLHD (July 2020 to February 2021)
- Dr Andrew Hallahan, Executive Director, Medical Services and Acting Director, Clinical Governance and Risk, SLHD (from March 2021)
- Ms Ivanka Komusanac, Director, Nursing and Midwifery, SLHD
- Dr Tim Sinclair, Director Operations, SLHD (Resigned on 27 May 2021)
- Ms Hannah Storey, Director, Performance Monitoring, Systems Improvement and Innovation, SLHD
- Dr Margy Halliday, Risk Manager, SLHD

The Chief Executive and Director of Finance attended all meetings of the Finance and Performance Committee except where on approved leave.

## **STANDARD 5: MAINTAINING HIGH STANDARDS OF PROFESSIONAL AND ETHICAL CONDUCT**

The SLHD has adopted the NSW Health Code of Conduct to guide all staff and contractors in professional conduct and ethical behaviour.

The Code of Conduct is distributed to, and signed by, all new staff and is included on the agenda of all staff induction programs. The Board has systems and processes in place to ensure the Code is periodically reinforced for all existing staff. Ethics education is also part of the SLHD's learning and development strategy.

The SLHD has implemented models of good practice that provide culturally safe work environments and health services through a continuous quality improvement model.

There are systems and processes in place and staff are aware of their obligations to protect vulnerable patients and clients – for example, children and those with a mental illness.

The Chief Executive, as the Principal Officer, has reported all instances of corruption to the Independent Commission Against Corruption where there was a reasonable suspicion that corrupt conduct had, or may have, occurred, and provided a copy of those reports to the Ministry of Health.

During the 2020-21 financial year, the Chief Executive reported 5 cases to the Independent Commission Against Corruption.

Policies and procedures are in place to facilitate the reporting and management of public interest disclosures within the SLHD in accordance with state policy and legislation, including establishing reporting channels and evaluating the management of disclosures.

During the 2020-21 financial year, the SLHD reported 4 of public interest disclosures.

The Board attests that the SLHD has a fraud and corruption prevention program in place.

## **STANDARD 6: INVOLVING STAKEHOLDERS IN DECISIONS THAT AFFECT THEM**

The Board seeks the views of local providers and the local community on the SLHD's plans and initiatives for providing health services, and also provides advice to the community and local providers with information about the SLHD's plans, policies and initiatives.

### **Sydney Local Health District - Organisation Statement 2021**

The last 18 months has required an indescribable resolve. What staff working in our health service have faced, found solutions for, and managed to overcome during 2020 and 2021 is extraordinary. And every day during this pandemic, staff have stepped forward to say "I can help".

Almost 12 months into the COVID-19 response in NSW, the opening of the RPA Vaccination Centre in February brought hope and joy for our staff. It was a major milestone in the pandemic and provided further reassurance to those working in our border and Quarantine programs, critical care areas and those in our flying squads and testing clinics.

Within months our District had an instrumental role in further amplifying the State's Vaccination Program. A clinic was set up at Sydney Airport and the first mass vaccination centre in NSW was opened at Sydney Olympic Park. The Sydney Olympic Park centre has the capacity to vaccinate 10,000 people every day.

Establishing it required the collaboration of hundreds of staff from engineering, ICT and communication, to workforce, administration and training, as well as clinicians and staff required for every day operations including doctors, nurses, pharmacists and other clinical staff, cleaners and security, students, and partners from government and industry. The model and design has since been utilised in other vaccination centres across the state.

Our COVID-19 response continues to touch every part of our organisation, our staff, our volunteers, our patients, our partner organisations and our community. We have made significant changes to help stop the spread of COVID-19, to keep our community and our staff safe.

We are very grateful for the support, understanding and kindness shown by our patients, their families and our community.

### **About our district and services:**

Each year we care for more than 700,000 people who live in our District, and the more than one million people who come into our District each day to visit, study and work.

The traditional custodians of the land covered by the District are the Gadigal, Wangal and Bediagal people, they are three of the twenty-nine clans of the great Eora nation.

Sydney Local Health District is made up of hospitals and health services delivered in various settings in the community and a range of associated support services. The District is one of the top performing health services in Australia.

Hospitals operated by the District include Royal Prince Alfred Hospital, Concord, Canterbury, Balmain and Sydney Dental Hospital.

Sydney Local Health District opened RPA Virtual Hospital in February 2020 the first service of its kind in NSW. This financial year the service has cared for almost 20,000 people.

The District is located in the centre and inner west of Sydney and is made up of the Local Government Areas of the City of Sydney (western part), Inner West Council, Canterbury-Bankstown (Canterbury part), Canada Bay, Burwood and Strathfield.

People of Aboriginal and Torres Strait Islander heritage make up 1.1 per cent of the population. More than half of the District's population speak a language other than English at home, including significant numbers of refugees, asylum seekers and special humanitarian entrants. Almost nine per cent of the District population speaks little or no English.

The population is growing more rapidly than that of NSW, increasing by 67,381 (10 per cent) over the last five years. It is projected to grow by a further 26 per cent from 2021 to 2036. In keeping with national trends, the proportion of our population aged over 70 is projected to increase by 56 per cent from 2021 to 2036.

The population is socio-economically diverse, with pockets of both extreme advantage and extreme disadvantage. The District has a large population of people who are homeless – over 6000 people.

More than 28,000 people with a disability live in the District and there are over 53,000 unpaid carers who provide support across the inner west.

Each year, on average, almost 8100 babies are born to mothers residing in the District.

#### **Staff and Culture:**

A significant focus for the District has been culture. Sydney Local Health District has around 16,000 staff. Our vision is excellence in health and healthcare for all.

During our COVID-19 response we developed care bags to help ensure staff didn't take COVID-19 home with them. More than 20,000 bags were packed for staff and distributed during 2020 and 2021.

We also recognised the significant contribution of our staff in 2020 at our Annual General Meeting and added a number of awards to our annual Innovation and Excellence Awards (including peer nominated awards) to reflect this.

A range of wellbeing programs have been implemented for staff, particularly junior and senior medical officers through the MDOK and district wide WellMD Centre. This included the JMO mentoring program, access to GP and psychological support services, drop in meditation sessions, career counselling, professional development workshops, access to group and personal physical exercise classes, yoga classes and the all staff choir.

Many of our staff have signed on to our workplace giving program which has contributed more than \$1 million over the last decade to the Barbara May Foundation, building a maternity hospital in the Afar region in Ethiopia and contributing to hospital and community services.

Sydney Local Health District has also joined the Global Green and Healthy Hospitals Network as a sign of our commitment to sustainability in healthcare.

The Network is a global organisation whose members are dedicated to reducing the environmental impact of the healthcare sector. There are 1,450 members in 72 countries.

The District has an aspiration of being carbon neutral by 2030.

#### **Partnering with our community:**

Partnering with our community is central to our vision, "excellence in health and healthcare for all".

We are very proud of our strong partnerships and collaborations with community and non-government organisations including, for example, the Aboriginal Medical Service, Redfern, Lebanese Muslim Association and Central and Eastern Sydney Primary Health Network. Our team has been strengthened by new and existing partnerships - including other government agencies (especially the NSW Police and Department of Communities and Justice), non-government organisations,



## Corporate Governance Attestation Statement

### SYDNEY LOCAL HEALTH DISTRICT

1 July 2020 to 30 June 2021



community leaders and private businesses. I would like to thank our community for their support during this time.

The COVID-19 pandemic has required us to pivot our existing engagement strategies and work in new ways to not only maintain our connection with our community and our networks, but also to work with our community groups and leaders and their networks to support our community to keep people safe from COVID-19.

There are a range of ways we engage our community through formal and informal mechanisms. These include meetings and forums, community events and open days, health promotion activities, information sessions, education sessions, formal and informal consultations, clinical co-design and re-design, working groups, key safety and quality groups and through volunteering, fundraising, donations, communication and media initiatives and programs.

We have a proud history in partnering with consumers and community, with a formalised structure. There is a dedicated community participation framework and guiding documents which articulate our commitment to partnering with consumers – these documents are reviewed regularly.

The District has dedicated staff as part of our Consumer and Community Participation (CCP) Program. These staff oversee Consumer and Community partnerships from the bedside and through to the organisational level. Consumer Representatives are recruited and managed and through the CCP program and are a present on committees across our District. Via the Consumer and Community Participation program we convene our Consumer and Community Advisory Networks in our Hospitals and services.

COVID-19 has required a significant change. However, our facility and service consumer networks have maintained strong activity over the period of COVID-19, meeting regularly (remotely) and engaging in activities including hospital and district strategy, telehealth, Digital strategy, hospital redevelopment working groups, Health Literacy strategies including Consumer Reviews for Patient Facing Materials, department and service feedback and other safety and quality programs. Almost 500 meetings have been held with consumers this year in COVID-19 safe ways.

Some of the activities included:

- Consumers provided feedback on the District's Visitor Policy.
- A survey of the consumer network to enable us to adjust engagement approaches during the pandemic to provide valuable information to stakeholders regarding consumer sentiments during COVID-19 restrictions and early outbreak.
- A virtual tour of Concord Hospital redevelopment, RPA Virtual Hospital and Special Health Accommodation to provide consumer feedback.
- Established a consumer network for RPA Virtual.
- Projects included Ambulatory Care Digital Patient Journey, COVID Clinic portal, Friendly Faces Helping Hands website for rural patients, RPA Management Plans policy, RPA Dashboard (reporting safety and quality data on the wards), District Ambulatory Care letters and telephone call templates.

Our Cultural Diversity Hub is integral to our approach to community participation. This year the team of cultural support workers supported our in-language resources for our multicultural community and became our frontline navigators, supporting community members at our vaccination centres and mobile clinics. The District again partnered with community leaders to develop a range of video resources to help share important and timely information with community groups about COVID-19.

Each year the District publishes and hosts community events. While many of our usual events have not gone ahead this year because of COVID-19, we have been able to find novel ways of marking



---

## Corporate Governance Attestation Statement

### SYDNEY LOCAL HEALTH DISTRICT

1 July 2020 to 30 June 2021

---



important calendar dates (through multimedia and video) and engaging with our community and building our partnerships. One of the significant opportunities to come together this year was during NAIDOC Week, when we officially opened the revamped Sister Alison Bush Lounge at RPA, named in honour of one of the state's longest serving and most influential midwives.

Many formal and informal networks have also been developed through donations during this period with business and our community offering support. We have managed to support local business and form important relationships with local businesses and residents.

#### **Key performance and significant milestones celebrated:**

This financial year, there were more than 1.7 million people cared for in our outpatient services, almost 165,000 people attended our Emergency Departments and there were over 165,000 admissions and discharges at our hospitals. Almost 42,000 operations were performed in our hospitals and more than 6000 babies were born at RPA and Canterbury Hospitals. Our Community Health Services delivered care to nearly 39,500 clients at our service locations and more than 11,000 services were delivered in people's homes. We also provided care to almost 40,000 children, tested the vision of 1100 children and offered 3,300 talking and listening checks. The Sydney Health Care Interpreter Service received 69,752 requests and spent almost 43,000 hours interpreting for patients and their loved ones.

We continued to focus on excellence in healthcare for all, launching Australia's first total body PET-CT scanner at RPA offering new opportunities to treat patients with cancer, neurological conditions and heart disease. The \$341 million redevelopment of Concord Hospital reached a significant milestone, with the new clinical services building reaching its highest point. We opened Fussell House, a new residential facility to support the National Centre for Veterans' Healthcare at Concord Hospital. We spent \$6.5 million on the Canterbury Hospital Emergency Department upgrade and works began on a new statewide Parent and Baby unit for women with mental illness. We also celebrated the announcement by the NSW Government that the \$750 million redevelopment of Royal Prince Alfred Hospital would be fast tracked.

Our hospitals, Special Health Accommodation and **rpavirtual** have continued to care for community members who need additional support, for people with COVID-19 and for returning travellers who need additional care or who become unwell.

Since its launch as the state's first virtual hospital in February 2020, **rpavirtual** has had a critical role in the state's COVID-19 response, this financial year alone, delivering virtual care to almost 18,700 patients including 1,780 COVID-19 positive patients and more than 11,000 in Special Health Accommodation. It's estimated that together the services have helped to avoid more than 700 hospital admissions. RPA Virtual Hospital won the Premier's Award for excellence in digital innovation.

We heightened measures to stop the spread of COVID-19. Our ICT service designed, built and supported the implementation of daily saliva testing for around 3500 Quarantine and frontline staff at more than 24 sites. More than 67,000 virtual meetings or telehealth sessions were held. We tested more than a million people for COVID-19 at locations across Sydney at times testing more than 4750 people in a single day. Our Public Health Unit has managed over 4000 contacts and has surged as needed for contact tracing, surveillance and to inform decision making. We continued to support vulnerable people in our community with COVID-19 testing, vaccination, meal, welfare and other outreach services. Our communication team developed consistent signage for vaccination and COVID areas, utilised across NSW and interstate.

## Corporate Governance Attestation Statement

### SYDNEY LOCAL HEALTH DISTRICT

1 July 2020 to 30 June 2021



#### Communication:

Effective Communication and Information Communication Technology supports the work of the District. Traditional, social and digital communication tools help our staff and community access our health district, be informed about our vision and organisation and know what to expect. It helps our District provide clear, timely, consistent and accurate information, promote and showcase our services, provide health information, and build relationships.

Some of the communication platforms we use to engage our community and staff include:

- Internet and Intranet platforms.
- Our digital communication platform - SydneyConnect to share and showcase the positive stories of our patients, staff, organisation, services, research and innovation.
- Electronic Messages via email to all staff.
- Columns and community notices in local newspapers.
- Media pitches and stories.
- The HealthMatters newsletter circulated to staff, patients, local GP surgeries, health centres, community centres and libraries, playgroups and schools (and a digital copy placed on SydneyConnect).
- Our District Facebook page, which features positive news stories about the District, its staff and patients.
- Our District Community and Events Facebook page which shares information about services, awards, donations, events and health promotion initiatives.
- The Multicultural and Community Health Service.
- Our District Vimeo and YouTube channels which tell the stories of our patients, staff and our community through video.
- Our District Twitter feed which connects and promotes health and research news and information.
- An Instagram profile to share our District's milestones and celebrations.
- Brochures and fact sheets (digital and printed materials).
- Wayfinding and signage.
- Our annual Year in Review publication capturing the work of the District over the course of the year launched annually at the AGM.
- Our contribution to the NSW Health Annual Report.
- Other publications and speaking engagements.

#### Thank you

I am so proud of the resolve of our staff in Sydney Local Health District, and am so very grateful to be working alongside them as we continue the fight against COVID-19. Our legacy of excellence in healthcare is central to our response during this pandemic as we work to keep our community safe. I am humbled by the way our community continues to step forward to support this work. We are stronger together.

---

## **Corporate Governance Attestation Statement**

### **SYDNEY LOCAL HEALTH DISTRICT**

**1 July 2020 to 30 June 2021**

---



Information on the key policies, plans and initiatives of the SLHD and information on how to participate in their development are available to staff and to the public at <https://www.slhd.nsw.gov.au/planning/currentPlans.html>

The SLHD has the following in place:

- A consumer and community engagement plan to facilitate broad input into the strategic policies and plans.
- A patient service charter established to identify the commitment to protecting the rights of patients in the health system.
- A Local Partnership Agreement with Aboriginal Community Controlled Health Services and Aboriginal community services.
- Mechanisms to ensure privacy of personal and health information.
- An effective complaint management system.

## **STANDARD 7: ESTABLISHING SOUND AUDIT AND RISK MANAGEMENT PRACTICES**

### **Role of the Board in relation to audit and risk management**

The Board is responsible for supervising and monitoring risk management by the SLHD and its facilities and units, including the system of internal control. The Board receives and considers all reports of the External and Internal Auditors for the SLHD, and through the Audit and Risk Management Committee ensures that audit recommendations and recommendations from related external review bodies are implemented.

The SLHD has a current Risk Management Plan that identifies how risks are managed, recorded, monitored and addressed. It includes processes to escalate and report on risk to the Chief Executive, Audit and Risk Committee and Board. It outlines SLHD management's commitment to integrating effective risk management into the SLHD's culture, practices and business planning in accordance with the NSW Health Enterprise-Wide Risk Management Framework and the Australian/New Zealand Standard AS/NZ ISO 31000:2018 Risk management – Guidelines.

It provides information and tools to assist the Board and all managers and staff to understand and fulfil their risk management responsibilities. It outlines governance and structures for risk management in the SLHD, the risk management process, roles and responsibilities, risk registers, risk communication, risk reporting and performance measures.

The Plan covers all known risk areas including:

- Leadership and management
- Clinical care and patient safety
- Health of population
- Finance (including fraud prevention)
- Communication and information
- Workforce
- Legal
- Work health and safety
- Environmental
- Security
- Facilities and assets
- Emergency management
- Community expectations

### **Audit and Risk Management Committee**

The Board has established an Audit and Risk Management Committee, with the following core responsibilities:

- to assess and enhance the SLHD's corporate governance, including its systems of internal control, ethical conduct and probity, risk management, management information and internal audit
- to ensure that appropriate procedures and controls are in place to provide reliability in the SLHD's financial reporting, safeguarding of assets, and compliance with the SLHD's responsibilities, regulatory requirements, policies and procedures
- to oversee and enhance the quality and effectiveness of the SLHD's internal audit function, providing a structured reporting line for the Internal Auditor and facilitating the maintenance of their independence
- through the internal audit function, to assist the Board to deliver the SLHD's outputs efficiently, effectively and economically, so as to obtain best value for money and to optimise organisational performance in terms of quality, quantity and timeliness

## **Corporate Governance Attestation Statement**

### **SYDNEY LOCAL HEALTH DISTRICT**

**1 July 2020 to 30 June 2021**



- to maintain a strong and candid relationship with external auditors, facilitating to the extent practicable, an integrated internal/external audit process that optimises benefits to the SLHD.
- to review whether management has in place a current and appropriate 'enterprise risk management' process, and associated procedures for effective identification and management of the SLHD's financial and business risks, including fraud and corruption
- to review whether a sound and effective approach has been followed in developing strategic risk management plans for major projects or undertakings
- to review the impact of the SLHD's risk management process on its control environment and insurance arrangements
- to review whether a sound and effective approach has been followed in establishing the SLHD's business continuity planning arrangements, including whether disaster recovery plans have been tested periodically; and
- to review the SLHD's fraud control plan and satisfy itself that the SLHD has appropriate processes and systems in place to capture and effectively investigate fraud related information.

The SLHD completed and submitted an Internal Audit and Risk Management Attestation Statement for the 12-month period ending 30 June 2021 to the Ministry without exception.

The Audit and Risk Management Committee comprises 3 members of which all are independent and appointed from the NSW Government's Prequalification Scheme for Audit and Risk Committee Independent Chairs and Members.



**Corporate Governance Attestation Statement**

**SYDNEY LOCAL HEALTH DISTRICT**

**1 July 2020 to 30 June 2021**



---

**QUALIFICATIONS TO THE GOVERNANCE ATTESTATION STATEMENT**

**Item:**

**Qualification**

Not applicable.

**Progress**

Not applicable.

**Remedial Action**

Not applicable.

---

**Signed:**

A handwritten signature in black ink, appearing to read "Teresa Anderson".

**Dr Teresa Anderson, AO**  
**Chief Executive**

**Date** 20.10.21

A handwritten signature in black ink, appearing to read "Fleur Harriton".

**Fleur Harriton**  
**Acting Chief Audit Executive**

18/10/21  
**Date**