Minutes

Health
NSW GOVERNMENT | Sydney Local Health District

Sydney Local Health District

Sixty Seventh Meeting of the Board

Date: Monday 17 July 2017

Time: 9.00am

Venue: SLHD Boardroom

Chair: The Hon. Ron Phillips, Chair AO

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1.   Present and apologies

The Hon. Ron Phillips, Chair AO
Ms Victoria Weekes, Member
A/Prof. Christine Giles, Member
Dr Thomas Karplus, Member
Professor Paul Torzillo AM, Member
Ms Frances O'Brien, Member
Ms Joanna Khoo, Member
Ms Ronwyn North, Member
Dr Mary Haines, Member
Dr Teresa Anderson, Chief Executive

Apologies

Dr Barry Catchlove, AM, Board Member
Mr David McLean, Member
Ms Susan Anderson, Member

In attendance

A/Professor Catherine O'Connor, Chair, Medical Staff Executive Council (Departed 11.05am)
Ms Jacqueline Ferguson, Director, Finance (Departed 11.05am)
Dr Katherine Moore, Director Clinical Governance and Risk (Departed 11.05am)
Ms Nerida Bransby, Secretariat

2.   Welcome and introductions

The Chair welcomed members to the sixty seventh meeting 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.

Minutes

1. Dr Thomas Karplus declared that he is a Councilor on the Australian Salaried Medical Officers' Association (ASMOF).

   This potential conflict is listed in the Register.

2. Ms Ronwyn North declared that she is an external member of the University of Sydney Senate Committee on Safety and Risk Management.

   This potential conflict to be included in the Register.

4. Confirmation of previous minutes

4.1 Minutes 26 June 2017

The minutes of the Board meeting held on Monday 26 June 2017 were moved and seconded.

The Chair then signed the minutes.

4.2 CE Report – June 2017

The Chair declared that the CE Report for June 2017 was ready for publication

5. Matters arising from the previous minutes

5.1 Action sheet

The Board received and discussed the outstanding 'in progress" agenda items on the action sheet including:

- Sentinel Events are to be reported in the SLHD and Facility Board Packs.
- A copy of the Strategic Planning sessions for the consultation Sessions was forwarded to the Board on 26 June 2017. This agenda item can be removed from the action list.
- The results of the Mental Health Periodic Review were included in the CE Report for June 2017 prior to publication. This agenda item can be removed from the action list.
- The tables were removed in the CE report. This agenda item can be removed from the action list.
- Health Pathways are now a quarterly report. This agenda item can be removed from the action list.
- Yaralla Estate updates are to be removed from the CE report and the minutes of the Yaralla Estate Community Advisory Committee minutes have been placed on the Board agenda at 12.9. This agenda item can be removed from the action list.

5.2 NSW Cancer Treatment Quality Audit

The Board received, read and noted this correspondence. A copy will be forwarded to the MoH. This agenda item can be removed from the action list.

5.3 Reporting Requirements for the MDAAC

The Board received, read and noted this correspondence. This agenda item can be removed from the action list.

5.4 Research Strategic Plan Timeframe

The Board received, read and noted this correspondence. This agenda item can be removed from the action list.

5.5 Mental Health Re-admission rates

The Board received, read and noted this correspondence. This agenda item can be removed from the action list.

Presentation:

The Chief Executive and the Director of Finance presented on the 2017/2018 Budget including:

- Overview
- 2016/17 Wrap-up including general fund, special purpose and trust funds and hospital/service financial results
- 2016/17 Achievements including capital works projects, service activity, performance and service enhancements.
- Overview of 2017/18 Service Agreement including objectives, hospital funding and health reform, governance, corporate governance, clinical governance, safety and quality accounts, performance framework and schedules.
- Strategies and Priorities including key focus for Ministry of Health and local priorities.
- Service Level Agreement Key Performance Indicators
- Budget Principles.
- 2017/18 Budget Allocation from the MoH.
- 2017/18 Budgets for the Hospitals and Services in the District.

The Board recommended the budget be published and the roadshows to proceed. Dates of the roadshows and a copy of this presentation are to be provided to the Board.

The Chair commended the Chief Executive, the Director, Finance and their teams for the outstanding financial results for 2016/17.

6. **Patient Story**

This agenda item was deferred.

7. **Standing Items**

7.1 Acronyms List

The Board received and noted the revised Acronyms List.

7.2   Financial Classification Codes

The Board received and noted the Financial Classification Codes List.

7.3   Board Calendar 2017

The Board received and noted the Board Calendar for 2017.

8.   Chairman's Report

Nil to report

9.   Chief Executive's report

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

- The District continues to be at Performance Level zero.
- Increase in premium staff usage for May 2017 due to sick leave caused by the early onset of the flu season.
- An Information and Communication Technology Capabilities Roadshow will be held to showcase "what we are doing" and "where we are going".
- Update and advice on the National Disability Insurance Scheme.
- The Chief Executive provided a verbal report on the new uniform for our security staff across the District which commenced in September 2016. Following an extensive consultative process feedback from security staff and patients has been generally positive. The introduction of security suits is aimed at providing staff with a professional look which will be more patient and family centred, encourage more positive interactions with patients and visitors, and will assist in the de-escalation of security issues.
- Discussions have commenced with Outcomes Australia on establishing a Leadership Group Youth Futures Project.

9.1   Finance and Performance Reports

9.1.1   SLHD Board reporting pack – May 2017

The Board received, read and noted the SLHD Board Reporting Pack for May 2017.

9.1.2   Performance Indicators – May 2017

(i)   Selected Performance Indicators

The Board received, read and noted this report.

(ii)   Peak Activity Team

The Board noted this report was not available.

9.1.3 HealthPathways Dashboard Report – May 2017

The Board received, read and noted this report.

9.2 Project updates

9.2.1 Lifehouse

The Board received and noted the information contained in the Chief Executive's Confidential Report.

9.2.2 Macquarie International Private Hospital

The Board received and noted the information contained 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 Report

The Board noted this report is due in September 2017.

9.5 Audit and Risk Committee Report due July 2017

The Board received, read and noted this report for the period March - June 2017.

9.6 Facility Reports – May 2017

(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.

(iii) Community Health

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

(iv) Concord Hospital

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

(v) Drug Health Services

The Board received the Drug Health report.

(vi) Mental Health Services

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

(vii)   Royal Prince Alfred Hospital

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

(viii)   Oral Health Services and Sydney Dental Hospital

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

(ix)   Tresillian

The Board received, read and noted the Tresillian report.

(x)   Lifehouse

The Board received, read and noted the Lifehouse report.

(xi)   Population Health

The Board received, read and noted the Population Health report.

(xii)   Croydon/Marrickville/Redfern Health Centres

The Board received, read and noted the report for Croydon/Marrickville/Redfern Health Centres.

(xiii)   Organ Donation for Transplant

The Board noted the next report is due in July 2017.

10.   Matters for approval / resolution

10.1   Audit and Risk Management Committee Charter

The Board endorsed the Audit and Risk Management Committee Charter as received in the papers and recommended by the Audit and Risk Committee.

11.   Board Committee reports / minutes

11.1   Finance, Risk and Performance Management Committee

The Board received and noted the minutes of the meeting held 26 June 2017.

11.2   Education and Research Committee

The Board noted the meeting is to be held on 17 July 2017.

11.3 Communications Committee

The Board noted the next meeting is to be held on 21 August 2017.

11.4 Audit and Risk Committee

The Board received and noted the minutes of the meeting held on 22 June 2017.

11.5 Health Care – Clinical Quality Council

The Board received and noted the minutes of the meeting held on 28 June 2017.

11.6 Health Care – Clinical Council

The Board noted the next meeting is to be held on 26 July 2017.

11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 4 August 2017.

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

The Board noted the next meeting is to be held on 2 August 2017.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board noted the next meeting is to be held on 2 August 2017.

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 14 June 2017.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board received, read and noted the minutes of the meeting held on 19 June 2017.

12.4 Surgical Demand Committee (bi-monthly)

The Board received and noted the minutes of the meeting held on 21 June 2017.

12.5 Revenue Enhancement Development Committee

The Board received, read and noted the minutes of the meeting held on 28 June 2017.

12.6 NSW Health / SLHD Performance Review Meeting

The Board noted the minutes of the meeting held on 5 June 2017 were not available.

12.7 Organ Donation for Transplantation

The Board noted the next meeting is to be held on 25 July 2017.

12.8   Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted the minutes of the meeting held on 13 June 2017.

12.9   Yaralla Estate Community Advisory Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held on 15 May 2017.

13.   Matters for noting

13.1   Brief - (FRAPM committee actions)

The Board received, read and noted the brief and attachments concerning Sexual Assault Counselling, Speech Pathology for Children and Waiting Times for Oral Health Services Surgery.

14.   Other Business

14.1   2017/18 Service Agreement

The Board received the 2017/18 Service Agreement between the Secretary, Ministry of Health and the SLHD for the period 1 July 2017 - 30 June 2018. The Board supported the recommendations that the agreement be signed and published on the website by the 31 July 2017.

The Board discussed the prevention and management of obesity and diabetes. The Board agreed to receive a copy of the Sydney Healthy Active Living Committee minutes.

14.2   Annual General Meeting

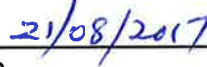The proposed date for the SLHD Annual General Meeting is to be circulated to Board Members.

15.   Next Meeting

The next meeting is to be held on Monday 21 August 2017 at 9.00am.

The meeting closed at 11.35am.

_____
Chair

___21/08/2017___
Date

Board Report

Health
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Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board, July 2017.

PERFORMANCE

Safety and Quality
All Root Cause Analysis' (RCA) had been completed within the target timeframe of 70 days at the end of May 2017.

Unplanned Hospital Readmissions were at 5.1% YTD for April 2017, which is significantly below the state average of 6.4%. This is an improvement of 0.1% on the same period last year. Unplanned Hospital Readmissions for Aboriginal People have improved by 0.5% and were at 6.7% YTD for April 2017. Ongoing work is occurring in partnership with the Primary Health Network to improve 48 hour follow-up of Aboriginal Patients.

Although Mental Health Readmissions within 28 days continue to be unfavourable to the target of <13% at 16.7% for YTD February 2017, in comparison to the result for January 2017, there was a 0.4% improvement in Mental Health Readmissions within 28 days. This is despite a significant increase in mental health admissions during this period. In comparison to the result for the same period last year, there has been a decrease of 1.5% in Mental Health Readmissions within 28 days (YTD). It should be noted that the most recent data available is from February as Readmissions include readmissions to other hospitals in other Districts and it requires the Ministry to reconcile the data across the State.

Community Follow-up within 7 Days for Mental Health patients has continued to improve, with the District again achieving benchmark for the month of February 2017and YTD (72.7%), an improvement on the same period last year of 12.6%.

Hospital Acquired Pressure Injuries remain below benchmark at 0.3 per 1,000 separations YTD to March 2017. This is an improvement on the same period last year of 0.2%.

The District remains under the benchmark (<2/10,000 bed days) for Staphylococcus Aureas Bloodstream Infections (SABSI) with a result of 0.8 per 10,000 bed days YTD April 2017. This is the same as the result achieved last month. In comparison to the result from the same period last year there has been a decrease of 0.3 per 10,000 bed days in SABSIs.

There were no Central Line Associated Bloodstream (CLAB) infections during April 2017, which is consistent with the result for both last month and last year.

There were no incorrect procedures performed in SLHD operating theatres in May 2017, which is consistent with the result for both last month and last year.

Workforce
Medical FTE
Premium staff usage for Medical FTE in May 2017 was 9.7%. In comparison to the result for April 2017, there was an increase of 1.2% in premium staff usage for Medical FTE. In comparison to the result from the same period last year there has been an increase of 0.4% in premium staff usage for Medical FTE. This relates to increased activity within the acute settings.

Nursing FTE
Premium staff usage for Nursing FTE in May 2017 was 9.7%. In comparison to the result for April 2017 there was an increase of 1.2% in premium staff usage for Nursing FTE. In comparison to the result from the same period last year there has been an increase of 2.6% in premium staff usage for Nursing FTE. This relates to an increase in activity both in acute and community settings.

Allied Health
Premium staff usage for Allied Health FTE in May 2017 was 1.3%. This is the same as the result achieved for April 2017. In comparison to the result from the same period last year there has been a decrease of 0.4% in premium staff usage of Allied Health FTE. This relates to an increase in activity both in acute and community settings.

Activity
May 2017 was a very busy month within the District. There were 14,972 separations in May 2017, an increase of 1.68% compared to May 2016. There were 155,017 separations as of May 2017 FYTD, an increase of 2.42% compared to May 2016 FYTD.

There were 13,274 emergency department attendances in May 2017, an increase of 0.74% compared to May 2016. There were 147, 581 emergency department attendances as of May 2017 FYTD, an increase of 2.47% compared to May 2016 FYTD.

Emergency Treatment Performance
The Emergency Treatment Performance (ETP) performance for the District during the month of May 2017 was 69.45%. This result falls short of the District target for ETP of 81% and is a slight decrease of 0.25% performance in comparison to May 2016. For May 2017 FYTD the District ETP performance is at 71.61%, an increase in performance of 1.52% compared to May 2016 FYTD.

Transfer of Care
The Transfer of Care (TOC) for the District was 94.30% for May 2017. The TOC target (90%) was exceeded by all three EDs in May 2017. In comparison to May 2016, the District slightly decreased performance by 1.14% but in May 2017 YTD compared to May 2016 YTD the District has improved by 3.81%.

ED Triage
Canterbury
Canterbury Hospital achieved all ED triage category targets for May 2017 which is consistent with the result achieved in May 2016. Canterbury Hospital achieved all ED triage category targets for May2017 FYTD which is consistent with the result achieved in May 2016 FYTD.

Concord
Concord Hospital achieved all ED triage category targets for May 2017 which is consistent with the result achieved in May 2016. Concord Hospital achieved all ED triage category targets for May 2017 FYTD, which is an improvement compared to May 2016 FYTD where all category targets apart from 3 were met.

RPA
RPA met triage category targets for categories 1, 4 and 5 in May 2017 which is consistent with the result achieved in May 2016. RPA met triage category targets for categories 1, 4 and 5 in May 2017 FYTD which is consistent with the result achieved in May 2016 FYTD.
Elective Surgery

Board Report

SLHD continues to perform at the top of the state for patient treatment timeframe targets for elective surgery. Performance was at 100% for May 2017 in all categories which is consistent with the result achieved in May 2016.

Patient treatment timeframe targets for elective surgery were all met during May 2017 FYTD which is consistent with the results achieved in May 2016 FYTD.

NATIONAL FUNDING REFORM/ ACTIVITY BASED FUNDING

2017/18 Service Level Agreement (SLA) and Activity Purchasing
SLHD met with senior representative from the MoH in May, as part of the continuing 2017/18 Service Level Agreement and activity purchasing negotiations. MoH has indicated that funds will be allocated to districts in 2017/18 to support the undertaking of data quality improvement projects. This will enable SLHD to undertake a trial of the previously mentioned Clinical Documentation Specialists (CDS). SLHD and MoH have also continued negotiations with the senior executive of Lifehouse for the Service Level Agreement and activity purchasing of public services from Lifehouse. At this time the State NWAU price has not been released, it is anticipated that this figure will be available mid-late June.

Mental Health
The transition to the Australian Mental Health Care Classification (AMHCC) required for all patients to be statistical discharge from our services, which resulted in a significant spike in NWAU for the month of February. This will subsequently result in a lower monthly NWAU for the remainder of the year, as a higher number of patients will now be having a shorter admission length, due to their statistical discharge in February. This trend will be impacting all Mental Health facilities across the State and is being taken into consideration by the MoH in the activity target setting process for 2017/18. SLHD still anticipates finishing the year on target for acute admitted Mental Health.

Sub and non-acute (SNAP)
SLHD has had a slight improvement in our ungrouped SNAP KPIs and is now achieving the State average, with 98% of SNAP activity grouped. As of YTD March, the District is 3.44% above target NWAU for sub-acute. Documentation and coding issues continue to be focus of the coding educators, which is assisting the District to reduce SNAP errors.

Non-Admitted (NAP)
The majority of facilities have submitted their April NAP data. The Performance Unit continues to work with IM&TD to progress the transition from WebNAP to EDWARD extract reporting. A gap analysis has been undertaken regarding the fields required in the EDWARD extract and further clarification regarding some data elements is being sought from the MoH. The MoH recently held a meeting regarding the timeframes for HERO changes to be made to the service unit classifications submitted as part of the NAP Reporting Project. The MoH advised that the changes would be made in two tranches, with Tranche 1 ending on 30 June 2017 and Tranche 2 on 31 October 2017. SLHD will be part of the first tranche and will therefore commence making changes in HERO.

Clinical Costing
The Performance Unit has commenced preparations for the full costing DNR R21.2. iFRAC cost centre responses are being reviewed and collated and additional feeders for RPA Robotic Surgery and Peritonectomy costings will be refined in R21.2.

Board Report

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of May, SLHD came in at 19.91% of all discharges being treated privately. A significant part of this improvement came from Concord's record number of private patients (1,132) and the most private patients RPAH has had in the last 12 months. The LHD has also had its highest number of private discharges, 2,882. The LHD is striving to get past the 20% mark again as soon as possible.

Single Room Utilisation

For the month of May, the LHD had 29% of all single rooms taken up by private patients. While 9.8% of patients were isolated for clinical alert, 41% of all private patients were accommodated in single rooms.

Revenue Enhancement Committee

- Focus on improving proportion of elective patients using their private health insurance
- Opportunities for billing in Mental Health being implemented
- Issues with health insurers covering patient costs noted and being monitored.

PERFORMANCE AND REDESIGN UNIT

Innovations

Four high-quality submissions were selected to pitch their ideas at the annual Sydney Innovation and Research Symposium on 23 June, 2017. The Pitch panel included:
- Dr Teresa Anderson, Chief Executive, SLHD
- Annette Schmiede, Executive Leader, BUPA Health Foundation
- Gina Finocchiaro, A/Director Corporate Operations, SLHD
- Prof Geoff McCaughan, Clinical Director of Gastroenterology and Liver Services, SLHD
- Professor Garry Jennings AO, Executive Director, Sydney Health Partners

The successful pitches were:
- We care with FluCARE: A smartphone app for inFLUenza outbreak Communication, Advice and Reporting - $48,000
- Virtual Reality 'A10D' (Attendee) Service for Hospitalised Patients: A technology to provide virtual patient transport and attendance at important events for hospitalised patients - $20,000 by BUPA Health Foundation
-

The next Pitch is scheduled for Friday 29 September 2017 at the Concord Medical Education Centre.

Clinical Redesign: CHR Projects

- *'A Collaborative Care Outreach in Residential Aged Care Facilities (RACFs) across the SLHD (ACCORD)'* (CHR 2017 - second intake) is currently in the 'diagnostic' phase and has recently attended the solution design workshop by ACI.

- The *'POPI: PreOperative Iron deficiency assessment and management'* project (previously known as *'Preoperative patient optimisation prior to elective surgery'*)

(CHR 2017 - first intake) project has finalised the 'diagnostic' phase and has commenced the 'solution design' phase. Canterbury Hospital and the Orthopaedics Department at Royal Prince Alfred were excluded from the project's scope, as local processes are already regarding iron deficiency.

- The *'Palliative Care: Access, Care, Equity' (PC-ACE)* project (CHR 2016 – third intake) is currently progressing through the 'implementation' phase. A palliative care education day has been scheduled for 2 August 2017 and is nearing capacity.

- The *'Review of the Department of Orthodontics at the Sydney Dental Hospital'* (CHR 2016 – third intake) project is currently implementing and monitoring solutions that will avoid delays during the course of treatment.

- The *'It's Time… smoother faster treatment for cancer patients at Concord'* project (CHR 2015 – third intake) is nearing completion. An evaluation report is being drafted and will be presented at the Concord Executive & Cancer Executive Stream Meeting on 18 July 2017. All 11 solutions have been completed or partially completed.

- A project looking at inefficiencies between the perioperative and sterilizing departments at Concord Hospital was successful to attend the 3rd round of CHR projects in 2017. The project participants are Donna Gara, NUM in Operating Theatres and Anthony Blazetic, Sterilizing Technician. The executive sponsors for this project are Sharne Hogan, Director of Nursing and Vivienne Bush, Director Clinical and Corporate Support.

Accelerating Implementation Methodology (AIM):

The next AIM course is scheduled for 10 and 11 August 2017.

CAPITAL PLANNING

Concord EMU
The ED Short Stay unit has been completed and was handed over on the 30 June 2017. Commissioning of the unit will commence shortly.

SLHD Aged Care Network
Recently identified problems with the existing Balmain Hospital building's structure have added to the delays caused by rain with this project. It is anticipated that the project will be fully completed by the end of the calendar year.

Medical Imaging Equipment Purchases RPAH

The Bi-Plane and the Single Plane Angiography machines have all been installed and are in operation. A departmental cocktail party was held to thank those involved in the project

Procurement is underway for the Interventional CT to be installed in the Lifehouse Radiology Dept. The building works are currently being discussed with the LH team.

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Sydney Dental Additional Chairs

The clinical areas of the project have been completed. The reticulation of the wet suction is about to be finalised and the unit will then be operational. The new unit will be commissioned by the end of August 2017.

CRGH Cardiac Catheter Lab & 64 slice CT Scanner

The CT machine became operational early in July. Building works are occurring on the Cath Lab with the unit becoming operational the start of September 2017.

RPAH da Vinci Robot theatre

Construction of the Theatre has been completed. Fit-out of the theatre is progressing and commissioning is underway and should be completed by end of July 2017.

RPA Replacement Fluoroscopy Unit

The Fluoroscopy machine has been installed and final commissioning is currently underway.

NSW State Biobank

Construction of the Biobank has been completed. The Biobank has been handed to the District with commissioning of the area currently underway.

Asset Replacement & Repair Program (ARRP)

SLHD has received funding through the ARR Program managed by Health Infrastructure. Projects funded include: Surgical Tool Air upgrade at RPAH, RPAH emergency Power control upgrade for the generators and the Lift modernisation at Concord.

RPA Energy Efficiency Program

Procurement has been completed and the contractor is expected to start on site in August 2017. The project will run for 18 months and will involve the replacement of all light fittings across the RPAH campus with energy efficient LED lighting.

HEALTH PATHWAYS

Workgroups

No workgroups were held in June 2017, due to current operational capacity (over 100 pathways in draft, 150 in periodic review, and staff absence – two GP Clinical Editors are currently on overseas leave). Future workgroup planning continues for the following areas:
- Wound care
- Immunology
- Hand trauma and surgery

Clinical re-Design

The Program Team continues its involvement in the following Clinical Re-Design projects:
- **Canterbury Hospital Pre-Admission** -A fitness for Surgery pathway nearing completion
- **Balmain GP Fracture Clinic**- Simple Fracture Management pathway published
- **SLHD Pre-op Iron Infusions** – Assisting with GP survey

Board Report

Pathways

11 Clinical pathways and **2** referral resource pages were released. New content focused on access to Gynaecological Oncology and salivary gland disorders. Live content total now **596**. Anticipating the Program will reach **600** live pathways before 1 July 2017.

June 2017	
New Completes (Live)	13
Completed Periodic Review Cycle	4
Total Completed pathways on website	596
CURRENT WORK IN PROGRESS	
Currently Localising (from other HP regions)	98
New Pathways being developed	5
Live pathways currently being updated	7
Completed pathways undergoing Periodic Review	197

Usage of HealthPathways

Use of the website dropped in the first 28 days of June 2017 and is the first recorded month of decreased activity that cannot be attributed to NSW School holidays etc. The usage remains up on in comparison to June 2016. We are anticipating a further slowdown in activity for July based on school holiday inactivity.

	1-28 June 2017	May 2017	April 2017	June 2016
Sessions of use	3,287	4,487	3,462	2,828
Unique page views	10,516	15,000	11,237	9,404
Different users	796	956	796	805

FINANCIAL PERFORMANCE (NET COST OF SERVICE BASIS)

GENERAL FUND (GF)

The 2016/17 Service Level Agreement between the Board and Ministry of Health has as a key financial performance target an expected Net Cost of Service (**NCoS**) result. The following analysis reflects the result for the financial year ended 31 May 2017 based on the District's budgeted NCoS.

For the month of May 2017, Sydney Local Health District (SLHD) General Fund Expenditure was $0.129M (0.09%) unfavourable to budget, year to date GF Expenditure was $16.344M (0.91%) favourable to budget. GF Revenue was $1.396M (0.94%) favourable to budget for the month and $16.222M (1.12%) unfavourable to budget YTD. For the financial year ended 31 May 2017 the District's GF NCoS was $0.122M favourable to budget.

The Chief Executive and the Director of Finance are confident that the District will have an on budget NCoS result for the 2016/17 financial year despite the challenges that are facing the District. To achieve the 2016/17 NCoS target the District will continue to maintain the good controls that it has in place and monitors performance on a daily basis.

The major variances for the month and year to date were:

Board Report

Expenditure

- For the month of May 2017 GF Total Expenditure was $0.129M (0.09%) unfavourable to budget, reflecting favourable results for Salaries & Wages ($0.146M), Other Employee Expenses ($0.190M) and Goods & Services – Clinical ($1.506M) and VMOs ($1.125M). These favourable results were offset by unfavourable variances in Overtime ($0.769M), Annual Leave Provision ($0.581M) and Repairs & Maintenance ($1.531M).

- Year to date GF Total Expenditure was $16.344M (1.10%) favourable to budget. This result reflects favourable results for Salaries & Wages ($1.016M), Other Employee Expenses ($2.460M), Goods & Services – Admin ($17.126M), Goods & Services – Clinical ($11.589M) and VMOs ($1.244M). These results were offset by unfavourable variances in Overtime ($7.102M), Repairs & Maintenance ($8.429M), Superannuation ($0.745M) and Annual Leave Provision ($1.115M).

Revenue

- GF Total Revenue was $1.396M (0.94%) favourable to budget for the month of May 2017. The result for the month reflects favourable variances in Patient Fees ($1.187M), Grants & Contributions ($0.301M) and Other Revenue ($0.051M) offset by an unfavourable variance in User Charges ($0.143M).

- Year to date GF Total Revenue was $16.222M (1.12%) unfavourable to budget. The unfavourable YTD result reflects unfavourable variances in the majority of OSR categories, i.e. Patient Fees ($6.409M), User Charges ($8.780M) and Other Revenue ($1.410M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was $3.692M unfavourable to budget for the month of May 2017 and $7.297M unfavourable to budget for the period ended 31 May 2017. The YTD result reflects an unfavourable budget variance for Expenditure of $2.607M and an unfavourable result for Revenue of $4.690M.

CONSOLIDATED RESULT

For the period ended 31 May 2017 the consolidated year to date NCoS result for the General Fund and SP&T was $7.175M unfavourable to budget. The result comprises a favourable Expenditure variance of $13.737M offset by an unfavourable Revenue budget variance of $20.912M.

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

For the period ended 31 May 2017, SLHD recorded a Total Net Result of $1.163M which was $6.885M (120.33%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for the period ended 31 May 2017 was $3.415M favourable to budget. The YTD Net Direct Operating Result reflects a favourable Expenditure variance of $23.282M offset by an unfavourable Revenue variance of $19.867M.

For the month of May 2017 Total Direct Revenue was $1.020M favourable to budget, comprising $1.522M favourable variance for the General Fund offset by a $0.501M unfavourable variance for the SP&T Fund. YTD Total Direct Revenue was $19.867M unfavourable to budget, comprising $15.596M unfavourable for the General Fund and a $4.271M unfavourable variance for the SP&T Fund. The YTD result for the GF reflects unfavourable variances in all major own source revenue categories except Grant Income.

Board Report

The District has a significant focus on revenue and anticipates that this will significantly improve prior to the end of the Financial Year.

For the financial year ended 31 May 2017 Total Direct Expenditure was $23.282M favourable to budget. This result comprised favourable variances for Salaries & Wages ($1.016M), Salaries & Wages Oncosts ($0.601M), G&S – Clinical ($11.589M) and G&S – Admin ($17.126M). These results were offset by unfavourable results for Overtime ($7.102M) and G&S – Support ($0.548M).

MONTHLY BUDGET PERFORMANCE

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

2016/17 Actual vs Budget Expenditure Comparison (GF and SP&T Combined)
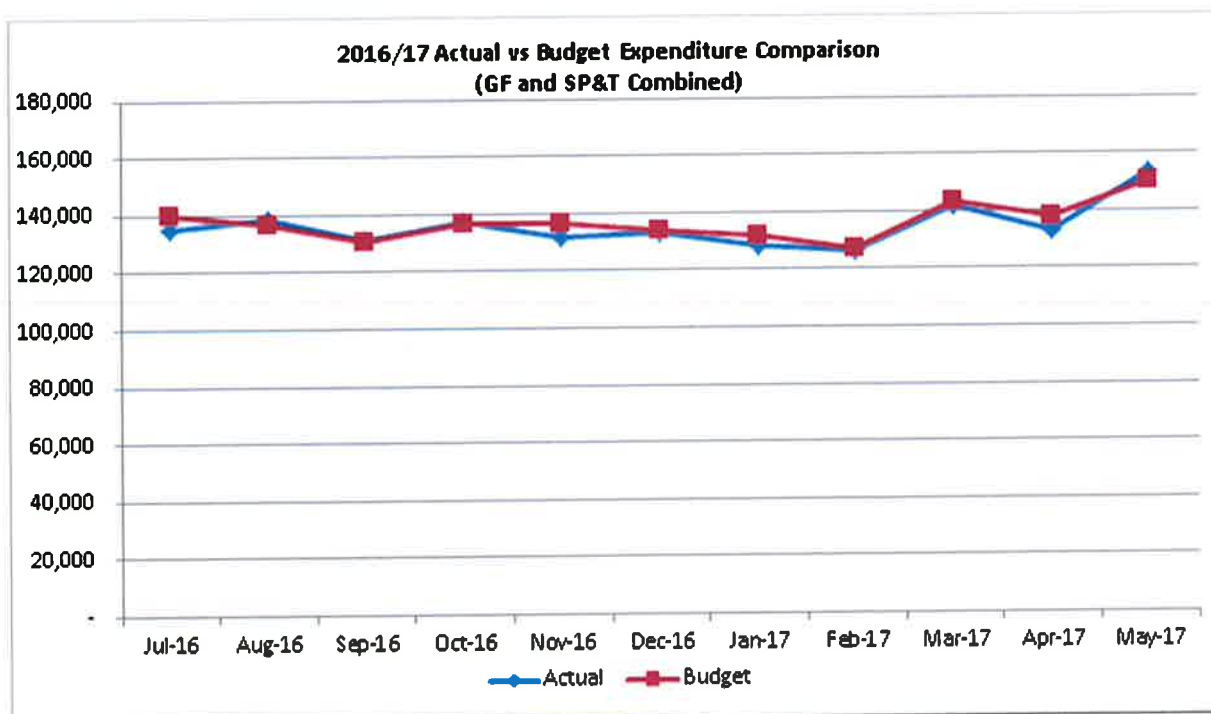
LIQUIDITY

The District had **NIL** creditors over 45 days as at 31 May 2017.

The District achieved the target of 100% compliance with the NSW Government target for payment of small vendor creditors within 30 days for the month of May 2017.

The cash balance at 31 May 2017 for the SLHD Operating bank account was $11.465M and the Operating Cash book balance was $11.457M.

CAPITAL WORKS – SMRS PROJECTS

The District's Full Year Capital works budget as at the end of May 2017 was $38.049M comprising $15.345M of MoH funded projects and $22.704M of locally funded projects. During the month the MoH funded budget increased by $0.625M and the locally funded budget was increased by $2.922M. These increases were related to SLHD's Asset

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Refurbishment & Replacement, Sydney Dental Hospital Refurbishment Phase 2 and Chris O'Brien Lifehouse Interventional CT Scanner.

The full year budget for SLHD Aged Care (MoH funded) was revised from $4.909M to $2.861M and EEGP's full year budget (locally funded) was revised from $6.992M to $0.600M.

Actual expenditure at the end of May 2017 was $16.848M which was $3.975M below target. The budget slippage is related to the RPAH Radiology replacement, SLHD Aged Care improvements at Balmain Hospital and the Biobank project.

PLANNING

SLHD Strategic Plan (2018-2022) - Review of Previous Plan
The SLHD Planning Unit undertook the significant process of reviewing the current strategic plan, the enabling plans, position papers and strategic plans. This process included reviews of the Strategic Plan, its enabling plans (Research Strategic Plan, Education and Training Strategic Plan, Information and Communications Plan, Workforce Strategic Plan), the facility strategic plans (Concord, RPA, Balmain, Community Health), and the Clinical Stream Position Papers and related Strategic Plans (Cardiovascular, Women's and Babies, Cancer, Gastroenterology and Liver, Aged Care, Neurosciences, Oral Health, Drug Health, Endocrinology, Mental Health, Allied Health).

The outcomes of the review were presented to the Board and senior executive at the Board's Strategic Plan Workshop on the 13 June.

Strategic Plan Workshop
The half day Board/Executive Strategic Plan workshop was held on the 13 June at the Centre for Education and Workforce Development.

The outcomes from the workshop will be reported and provide the basis for the new SLHD Strategic Plan (2018-2022). A new framework and vision for the plan were agreed at the workshop.

Planning has commenced, with bookings and agenda developed, for the Community and Staff consultations related to the revised Strategic plan. These consultations have been scheduled for August (staff) and September (community).

Canterbury Clinical Services Plan (CSP)
The Canterbury CSP was sent to the Ministry of Health for consideration. It has also formed an important part of the annual Asset Strategic Plan.

RPA Clinical Services Strategy
The Planning Unit has drafted the RPA Clinical Services Strategy to inform the Asset Strategic Plan and to ensure that sufficient information is available to provide a reasonable estimate of the capital required to upgrade and redevelop RPA.
The key strategic directions for this redevelopment include the following:

1. **Engaging with the local community and the primary care sector** to

   o strengthen the physical and social environments that **promote good health,**
   o support appropriate self-management, community-based care and predictive medicine,

o promote **strong linkages, partnerships and integration** of care across the spectrum from prevention to earliest intervention, treatment and palliation. A new approach to this engagement will be led by the RPA HealthOne East, Green Square.

2. **Redeveloping the RPA hospital** in accordance with the needs of its growing and ageing population, ensuring excellence in outcomes, personalised positive care experiences and efficient and effective care in expanded, state-of-the-art facilities. The model will have strong **outreach and ambulatory components.**

3. Growing the **tertiary and quaternary depth and breadth** of the hospital to continue to ensure a cutting edge response to health and illness and to provide highly specialised services equitably to the wider region, state and nation. This includes for example, transplantation services, cardiovascular services, interventional services, rare disease management and complex surgery.

4. Shaping the future through **healthcare technology that is patient and family-centred.** This may include, for example, embracing remote medical and health monitoring, point-of-care diagnostics, use of health Apps, new roles for robotics, the development of innovative medical devices, state-of-the-art imaging, digital connectivity with patients/consumers and a fully integrated eMR.

5. Devising models of care appropriate to the changing epidemiological face of health – with patients presenting with chronic, multi-system, metabolic conditions requiring **integrated, multidisciplinary, holistic case management and care.**

6. Ensuring that **education and learning** is a core activity and embracing new models of education including virtual reality, remote learning etc.

7. Promoting **research productivity and the rapid translation** of new models of care into practice including trialling technology, novel use of genomics and new approaches to care. RPA will further contribute to *Sydney Research* and *Sydney Health Partners* and collaborate to develop the *Camperdown-Ultimo Health, Education and Cultural Precinct.*

This initial draft document will be the subject of consultations during the latter half of 2017 to consolidate the service approach, models of care and overall strategy.

Asset Strategic Plan
The Planning Unit has provided detailed demographic and population projection updates to the 2016 Asset Strategic Plan. The Unit has undertaken considerable modelling to develop the SLHD District bed and service projections for 2017 to inform this plan. The Planning Unit has developed major Clinical and Service plans to inform the ASP.

RPA HealthOne East (Green Square)
The Business Case for the HealthOne program has been approved by the Ministry. This allows the project to progress to project briefing. The Green Square project has been approved for a Local Delivery model. The next stage involves the engagement of consultants. $16million has been approved for the project, with all funding being completed by 2022.

A series of consultations and discussion with key stakeholders were held mid-year to further develop the RPA HealthOne East engagement and strategy. The goal is to continue to engage these stakeholders and also to develop stakeholder involvement in governance.

Consultations include:
• A provider (GP and allied health) consultation was held in June in the Green square "Tote" building in collaboration with the CESPHN and members of the RPA HealthOne

East Steering Committee. This was a three hour continuing professional development event, with CPD accreditation and points provided. The topic was the early years and will also cover new health service developments in the Green Square area. The overall purpose was to bring together local providers to begin to consider the health and wellbeing issues in Green Square. 25 people attended and the feedback and evaluation was very positive. A local GP representative is now attending the Steering Committee.

- A separate half day consultation for <u>non-government agencies (NGO)</u> was undertaken in May, again in collaboration with the RPA HealthOne East Steering Committee and the City of Sydney. 18 local agency (NGO) providers attended the forum, provided at the Community Centre, Green Square. An NGO representative is now attending the Steering Committee.
- A local <u>community</u> consultation is planned for August in collaboration with members of the RPA HealthOne East Steering Committee and the City of Sydney. Prior to that consultation social and traditional media will provide information to the community and views and ideas will be gathered through community discussions.
- Formal meetings with Mirvac, UrbanGrowth and the City of Sydney have commenced. Key issues that have been discussed include site options and zoning of these sites. Both sites that are under consideration will need to be re-zoned for the HealthOne purpose.

Diabetes Plan and Strategy
The Planning Unit, as part of the Leading Better Value Care, is developing data, information and working with the SLHD diabetes services to review current services and approaches to the delivery of diabetes-related services. A brief paper on the policy background has been developed. Epidemiological and service data has been brought together from a range of sources, a proforma/questionnaire has been sent to all diabetes services and a prevention/early intervention paper is under development. Consultations and focus groups are planned. An SLHD major forum is planned on Diabetes in early November, to develop the Strategy and approach to reducing and measuring avoidable hospitalisations.

SLHD Research Strategic Plan
The Planning Unit has developed a Scoping Paper to outline the major processes to develop a new Research Strategic Plan for the District. A major forum has been planned to progress this plan.

SLHD Imaging Strategic Plan and Position Paper
These plans are currently with Media and are being proof read and prepared for publication with a launch being planned for the end of the year.

Aboriginal Health Strategic Plan 2017-2022
The SLHD Aboriginal Health Strategic Plan is currently being proof read for publication, with a view to an end of year launch.

Inner West Youth Health and Wellbeing Plan
The draft has been provided for this intersectoral collaborative Plan with Education, CESPHN and Family and Community Services. Ongoing discussions are being held to derive priority issues and strategies from the evidence, and the many consultations held to develop this intersectoral plan.

Multicultural Health Plan
The Planning Unit is continuing to work with stakeholders in SLHD to develop the Multicultural Health Plan.

Waterloo Health Planning Workshop
The Planning unit has attended a number of consultation meetings about the redevelopment of Waterloo Housing Estate.
The CE has agreed to have a workshop in late September to address health-related concerns about the redevelopment. It is intended that this will be collaboratively undertaken with the City of Sydney and UrbanGrowth NSW.

SYDNEY RESEARCH

Office for Health and Medical Research (OHMR) - TRGS and PhD Scholarships
Sydney Research worked with OHMR to host an event at Royal Prince Alfred Hospital in the Kerry Packer Education Centre (KPEC) on 5 June 2017. The event was opened by Dr Anderson, and was attended by Minister Brad Hazzard, Dr Kerry Chant and Dr Antonio Penna.

The event celebrated the successful recipients of TRGS round two, launch TRGS round three and announce the successful recipients of the NSW Health PhD Scholarships.
SLHD was successful in each category:
A/Prof Tim Wand's project, "Management of mental health, drug health and acute severe behavioural disturbance in Emergency Departments" will receive funding of $564,411 over two years, commencing in early July 2017.
Dr Jessica Lee was successful in the NSW Health PhD Scholarship Program with her work to optimise management of neuropathic cancer pain within a patient-centred framework.

OHMR – NSW Health Statewide Biobank
NSW Health Pathology have taken possession of the site.
The Scientific Review Group will meet on 29 June 2017.
The Local User Group will commence meeting on 21 July 2017.

Sydney Health Partners (SHP)
The Sydney Research team continue to work closely with Prof Garry Jennings, Executive Director, SHP.

On Friday 2 June, SHP co-hosted with OHMR a Clinical Trials Support Unit (CTSU) Workshop.

OHMR has commenced a project to develop more effective governance structures for the approval and management of clinical trials. CTSUs would provide an overarching framework for clinical trial governance, which by providing a platform for shared working processes will create a more efficient interface between LHDs and their research partners.

At the Sydney Innovation and Research Symposium on Friday 23 June 2017, the Hon Ken Wyatt, Minister for Indigenous Health and Minister for Aged Care, officially announced that Sydney Health Partners will receive $2.2 million in funding from the Medical Research Futures Fund.

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Sydney Innovation and Research Symposium:

The Big Idea
The inaugural Big Idea event was held on Thursday 22 June 2017 and has received overwhelmingly positive feedback.

Six Ideas were presented to the panel:
- Simon Fleming: New stretchable optical sensors reduce heart attack risk
- Jesse Xu on behalf of Hui Ong: Next generation 3D printed personalised airway stents
- Sarah McDonald on behalf of Hala Phipps: Lifelike birthing simulator for clinical training
- Derek Hart: A new specific immunosuppressive drug
- Gerard Sutton on behalf of Jingjing You: Corneal BioPen
- John O'Sullivan: Blood biomarkers of coronary artery disease and instent restenosis

The team at the Save Sight Institute were successful with the Corneal BioPen. The birthing simulator will be supported internally by SLHD.

There are plans for an "Innovators Group" to be established for those who applied for the Big Idea. This Group will be invited to receive special presentations on aspects of research commercialisation such as intellectual property, financial modelling and raising capital.

Sydney Research Awards and Scholarships Program
The Sydney Research Awards were presented at the Sydney Innovation and Research Symposium on Friday 23 June 2017 at Carriageworks by Minister Brad Hazzard and Elizabeth Koff.

The Sydney Research Award winners for 2017 are:

Research Excellence Award for the best publication in a high impact journal:

Professor Chris Semsarian AM, Cardiologist Royal Prince Alfred Hospital, Professor of Medicine at the University of Sydney, and Head of the Molecular Cardiology Program at the Centenary Institute, for 'A prospective study of sudden cardiac death among children and young adults'

Young Researcher Award:

Associate Professor Anne Tiedemann, Principal Research Fellow, University of Sydney

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Research Supervisor Award:

Professor Janette Vardy, Medical Oncologist, Concord Cancer Centre and Professor of Cancer Medicine, University of Sydney

Annual Health Research Infrastructure Award:

Dr Lining Ju, Postdoctoral Research Officer,, Heart Research Institute and University of Sydney. Funds will be used towards upgrading the current Olympus OSIS cellTIRF system with the STochastic Optical Reconstruction Microscopy (STORM) function, which would achieve <20nm spatial resolution. This will provide high resolution imaging to decipher platelet decision-making processes in blood clotting.

Clinician Researcher Scholarship:

Brooke Donnelly, Senior Clinical Psychologist, Royal Prince Alfred Hospital.

Health Informatics Researcher Scholarship (sponsored by VoIP):

Merran Findlay, Executive Research Lead, Cancer Nutrition and Oncology Specialist Dietitian, Royal Prince Alfred Hospital and Chris O'Brien Lifehouse.

Dr Teresa Anderson
Chief Executive

Date: 17.7.17