

Sydney Local Health District

Sixty Eighth Meeting of the Board

Date: Monday 21 August 2017
Time: 9.00am
Venue: SLHD Boardroom
Chair: The Hon. Ron Phillips, Chair AO

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
Mr David McLean, Member
Dr Teresa Anderson, Chief Executive

Apologies

Dr Barry Catchlove, AM, Board Member
Ms Susan Anderson, Member

In attendance

A/Professor Catherine O'Connor, Chair, Medical Staff Executive Council (Departed 10.50am)
Mr Jon Gowdy, Director Capital Assets, Property and Engineering (9.00am - 9.40am)
Mr Stephen Haldane, Managing Director, Capital Insight Pty Ltd (9.00am - 9.40am)
Mr Frank Tong, Capital Insight Pty Ltd (9.00am - 9.40am)
Mr Michael Clark, Manager, Internal Audit (9.45am - 9.50am)
Ms Fleur Jamieson, Deputy Manager, Internal Audit, SLHD (9.45am - 9.50am)
Ms Lily Cao, Senior Auditor, Internal Audit, SLHD (9.45am - 9.50am)
Ms Imogen Hooper, GHMP Trainee (9.30am - 9.50am)
Ms Lainie Anderson, GHMP Trainee (9.30am - 9.50am)
Ms Nerida Bransby, Secretariat

2. Welcome and introductions

The Chair welcomed members to the sixty eighth meeting of the Sydney Local Health District (SLHD) Board.

Presentation:

Mr Stephen Haldane presented on the SLHD Asset Strategic Plan for 2017 including:

- Asset Strategic Planning including capital works, building and operational maintenance and plant and equipment
- Snapshot of clinical activity in the District for 2017
- Snapshot of demand versus current supply
- Service delivery strategy – proposed supply to meet demand
- Overall service gap – supply versus demand
- 2017 – 2027 facility implications including proposed “asset actions” for each campus
- Top five capital investment priorities
- Priority one - RPAH phase one (preliminary concept)
- Priority two - Canterbury Hospital (preliminary concept)
- Priority three - Concord Hospital phase two
- Priority four - RPAH phase two (preliminary concept)
- Priority five - Concord Hospital phase three
- Other capital investment priorities
- Maintenance
- Locally funded initiatives (>\$250K)
- Endorsement and next steps

The Chair thanked Mr Haldane, Mr Tong and Mr Gowdy for the presentation and for attending the meeting.

3. Declaration / Removal of conflicts of interest

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

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.

4. Confirmation of previous minutes

4.1 Minutes - 17 July 2017

The minutes of the Board meeting held on Monday 17 July 2017 were moved and seconded.

The Chair then signed the minutes.

4.2 CE Report – July 2017

The Chair declared that the CE Report for July 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 now reported in the SLHD and Facility Board Packs. This agenda item can be removed from the action list.
- Feedback to the MoH / Board Conference is now on the agenda of the Board Chairs. This agenda item can be removed from the action list.
- Dates for the Budget Roadshows and a copy of the presentation were provided to the Board via email on 24.7.17. This agenda item can be removed from the action list.
- Updates concerning Security Uniforms will be in the CE Report. This agenda item can be removed from the action list.
- The Service Agreement for 2017/2018 was signed and published on 27.7.17. This agenda item can be removed from the action list.
- The Sydney Healthy and Active Living Steering Committee is now on the Board Agenda. This agenda item can be removed from the action list.
- The proposed date for the AGM was emailed to Board Members on 20.7.17. This agenda item can be removed from the action list.

6. Patient Story

Dr Anderson provided a verbal report on Mr B. for the patient story. Mr B writes to the District often and the District assists him with his various and complex needs including respite care as needed.

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.
- All Root Cause Analysis' (RCA) have been completed within the target timeframe of 70 days at the end of June 2017.
- Mental Health Readmissions within 28 days continue to be unfavourable to the target of <13% at 16.3% for YTD March 2017, they have improved by 1.2% compared to the same time last year (17.5%). Mental Health Community Follow-up within 7 days was 72.4% which is a significant improvement (12%) on the previous year.
- For the year to date May 2017, the SLHD unplanned readmission rate was 5.1% which is significantly below the state average of 6.4%. The unplanned readmission rate for Aboriginal people was 6.6%, which is a 0.6% improvement on the previous year. There is also a decrease of 0.4% to 3.1% of Aboriginal inpatients who were discharged against medical advice.
- There were 14,262 separations in June 2017, an increase of 0.27% compared to June 2016. There have been 169,264 separations as of June 2017 FYTD, an increase of 2.23% compared to June 2016 FYTD.
- There were 12,665 emergency department attendances in June 2017, an increase of 4.45% compared to June 2016. There have been 160,236 emergency department attendances as of June 2017 FYTD, an increase of 2.60% compared to June 2016 FYTD.
- 2016/17 activity in the Mental Health Services stream continues to be impacted by the introduction of the new Australian Mental Health Care Classification (AMHCC) in February 2017.
- Private Health Insurance Usage for the month of June came in at 19.56%. In comparison to results in the same period last year, the LHD came in a half percentage-point higher than in June 2016. Concord's improvement has continued with a second month in a row above 22%.
- Procurement for the RPA Energy Efficiency Program has been completed. The contractor is expected to start on site next month. 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. This project is being considered for Canterbury Hospital also.
- Strategic Plan 2018-2022 consultations are progressing well.
- Dr Anderson provided a verbal report on the appointment of Ms Vicki Taylor, Executive Director, Sydney Research.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – June 2017

The Board received, read and noted the SLHD Board Reporting Pack for June 2017. The Board requested that the last page of the pack be removed because an update on insurance is provided annually rather than monthly.

9.1.2 Performance Indicators – June 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 – June 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. The Board will be taken on a tour of the NSW State Biobank.

9.4 Clinical Governance Report

The Board noted this report is due in September 2017.

9.5 Audit and Risk Committee Report due October 2017

The Board noted this report is due in October 2017.

9.6 Facility Reports – June 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. Dr Anderson provided a verbal report on the improvement in the People Matter Survey for the Sydney Dental Hospital.
- (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. Due to senior staff retiring and relocating, Dr Anderson provided a verbal report on the interim restructure of Population Health incorporating the Health Promotion Unit.
- (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 October 2017.

10. Matters for approval / resolution

10.1 2017 Asset Strategic Plan (Attachment 1)

Following the presentation, the Board discussed and ratified the Asset Strategic Plan 2017 as received in Attachment 1.

10.2 Amendment to Delegations Manual

The Board ratified the request to amend the delegation manual to include: LHD Executive excluding Director of Finance and Director of Operations currently \$10,000 to the proposed amount of \$25,000.

10.3 Amendment to Delegations Manual

Following discussions, this delegation was considered a low risk and will be subject to a number of controls, therefore the Board ratified the request to amend the delegation manual to include:

Delegation to be set at \$100,000 for the Executive Director, Sydney Health Partners.

10.4 SLHD Corporate Governance Attestation Statement

Mr Clark, Ms Jamieson and Ms Cao attended the meeting to provide all the supporting documentation for the SLHD Corporate Governance Attestation Statement. Following discussion, the Board ratified the Corporate Governance Attestation Statement.

10.5 Brief – Quality and Safety focus topics

The Board received, read and noted this brief. The Board endorsed the trial of the Quality and Safety focus topics for 2018. These topics are to be included in the Board Calendar.

11. Board Committee reports / minutes

11.1 Finance, Risk and Performance Management Committee

The Board received, read and noted the minutes of the meeting held 10 July 2017.

11.2 Education and Research Committee

The Board received, read and noted the minutes of the meeting held on 17 July 2017. Ms Vicki Taylor will now become a member of this Committee.

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 noted the next meeting is to be held on 14 September 2017.

11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 26 July 2017.

11.6 Health Care – Clinical Council

The Board received, read and noted the minutes of the meeting held on 26 July 2017.

11.7 Medical Staff Executive Council

The Board received, read and noted the minutes of the meeting held on 4 August 2017.

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

The Board received, read and noted the minutes of the meeting held on 2 August 2017.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board noted the meeting to be held on 2 August 2017 was cancelled.

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 12 July 2017.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board received, read and noted the minutes of the meeting held on 17 July 2017.

12.4 Surgical Demand Committee (bi-monthly)

The Board noted the meeting was held on 16 August 2017.

12.5 Revenue Enhancement Development Committee

The Board received, read and noted the minutes of the meeting held on 26 July 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 received, read and noted the minutes of the meeting 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 11 July 2017.

12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the minutes of the meeting held on 17 July 2017 were not available.

12.10 Sydney Healthy and Active Living Steering Committee

The Board received, read and noted the minutes of the meeting held on 26 June 2017. The Board discussed the aims to reduce the prevalence of obesity including intervention, consistent measuring of height and weight and the purchase of specific scales.

13. Matters for noting

13.1 Brief - Update on odours relating to Westconnex

The Board received, read and noted the correspondence.

13.2 Brief - Exposure to gas relating to Westconnex

The Board received, read and noted the correspondence.

The Board discussed the physical and mental health concerns in the community for residents near and surrounding the westconnex construction sites. The Board agreed a meeting is to be arranged with the Minister for Health and the Minister for Westconnex.

13.3 Brief - Joint Investigation Response Team (JIRT)

The Board received, read and noted the correspondence.

13.4 Brief - Drug Company Sponsorship

The Board received, read and noted the correspondence including the systems in place in the guidelines. Dr Waterhouse advised there were no areas of concern with Concord Hospital and an updated brief will be provided to the Board.

13.5 Brief - Quarterly Report on Emergency Management

The Board received, read and noted the correspondence.

13.6 Brief - Local and Relevant Matters

The Board received, read and noted the correspondence.

13.7 Letter - Expert Advisory Panel

The Board received, read and noted the correspondence.

13.8 eMail - Security Manager re uniforms

The Board received, read and noted the correspondence.

13.9 Brief – Immunisation Rates

The Board received, read and noted the correspondence.

14. Other Business

14.1 Palliative Care Services in NSW

The Board discussed Palliative Care Services in the media recently. Dr Anderson advised the Board of the range of services in place in the District for inpatients and outpatients including Community Health Services and Palliative Care Home Support Packages (PEACH). A video will be played at the next Meeting.


15. Next Meeting

The next meeting is to be held on Monday 18 September 2017 at 9.00am.

The meeting closed at 11.35am.



Chair



Date

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

PERFORMANCE

The District continues to be at Performance Level 0.

Safety and Quality

All Root Cause Analysis' (RCA) have been completed within the target timeframe of 70 days at the end of June 2017.

Although Mental Health Readmissions within 28 days continue to be unfavourable to the target of <13% at 16.3% for YTD March 2017, they have improved by 1.2% compared to the same time last year (17.5%). Mental Health Community Follow-up within 7 days was 72.4% which is a significant improvement (12%) on the previous year.

For the year to date May 2017, the SLHD unplanned readmission rate was 5.1% which is significantly below the state average of 6.4%. The unplanned readmission rate for Aboriginal people was 6.6%, which is a 0.6% improvement on the previous year. There is also a decrease of 0.4% to 3.1% of Aboriginal inpatients who were discharged against medical advice.

There has been a 0.2% decrease in cardio-respiratory arrests per 1000 separations with the District sitting at 0.4 for the month of May 2017, which is below the state average of 0.7.

There has been a 0.1% decrease in Hospital acquired pressure injuries per 1000 separations with the District sitting at 0.3, which is below the state average of 0.3%.

The District remains below 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 May 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 in the amount of SABSIs per 10,000 bed days.

There were no Central Line Associated Bloodstream (CLAB) infections during May 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 June 2017 was 8.1%., which is a decrease of 1.6% compared to the previous month and a decrease of 1.0% compared to the same period last year.

Nursing FTE

Premium staff usage for Nursing FTE in June 2017 was 9.9%, which is an increase of 0.2% on last month and a decrease of 1.0% compared to the same period last year.

Allied Health

Premium staff usage for Allied Health FTE in June 2017 was 1.2%, which is decrease of 0.1% compared to the previous month, and a decrease of 0.6% compared to the same period last year.

Activity

There were 14,262 separations in June 2017, an increase of 0.27% compared to June 2016. There have been 169,264 separations as of June 2017 FYTD, an increase of 2.23% compared to June 2016 FYTD.

There were 12,665 emergency department attendances in June 2017, an increase of 4.45% compared to June 2016. There have been 160,236 emergency department attendances as of June 2017 FYTD, an increase of 2.60% compared to June 2016 FYTD.

Emergency Treatment Performance

The Emergency Treatment Performance (ETP) performance for the District during the month of June 2017 was 70.82%. Although this result falls short of the District target for ETP of 81% it is an increase on performance by 1.80% compared to June 2016 despite the increase in activity. For June 2017 FYTD, the District ETP performance is at 71.55%, an increase in performance of 1.54% compared to June 2016 FYTD, again on the background of increased activity.

Transfer of Care

The Transfer of Care (TOC) for the District was 93.63% for June 2017. The TOC target (90%) was exceeded by all three Emergency Departments in June 2017. Although there was a slight decrease of 0.82% in performance compared to June 2016 YTD, the District has improved by 3.43% compared to June 2016 YTD.

ED Triage

Canterbury

Canterbury Hospital achieved all ED triage category targets for June 2017, which is consistent with the result achieved in June 2016.

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

Concord

Concord Hospital achieved all ED triage category targets for June 2017, which is consistent with the result achieved in June 2016.

Concord Hospital achieved all ED triage category targets for June 2017 FYTD, which is an improvement compared to June 2016 FYTD where all category targets apart from triage category 3 were met.

RPA

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

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

Elective Surgery

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

NATIONAL FUNDING REFORM/ ACTIVITY BASED FUNDING

2017/18 Service Level Agreement (SLA) and Activity Purchasing

The Performance Unit has finalised the allocation and phasing of activity targets for the 2017/18 financial year, with facilities and services provided with the opportunity to review and provide feedback on the targets. Targets are phased across the year to reflect the activity fluctuations across the preceding five years of historical data, with adjustments made based on service changes.

Mental Health

As has previously been reported, 2016/17 activity in the Mental Health Services stream continues to be impacted by the introduction of the new Australian Mental Health Care Classification (AMHCC) in February 2017.

For the 2017/18 Financial Year, the Ministry of Health approximated the NWAU allocation to the District, taking into consideration the statistical discharge of all patients and the corresponding reduction in ALOS and NWAU associated with the AMHCC, and the removal of the Mental Health Sub-Acute classification. As a result there has been a reduction in the NWAU target for Admitted Mental Health in 2017/18 in comparison to 2016/17.

The Mental Health Information Management Unit continues to closely monitor data quality issues, working collaboratively with IM&TD and InforMH to improve data inputs and outputs. The strong improvements reported and continued efforts to monitor data quality throughout 2016/17 has set a strong foundation for 2017/18, and it is anticipated that data quality and reporting in Mental Health will continue to improve into the new financial year.

Sub and non-acute (SNAP)

The District is currently reporting a grouped rate of 99% for SNAP activity, with the outstanding ungrouped activity accounting for approximately 127 NWAU. The Performance Unit is working closely with facility SNAP coordinators to ensure that all 2016/17 SNAP episodes are grouped, and errors corrected ahead of the 31 August close off date for all SNAP data submissions.

The Performance Unit has completed the 2017/18 target setting process for the SNAP stream, in consultation with each facility in the District. An additional 400 NWAU has been built into the SNAP target for 2017/18, to support increased activity at RPA for orthopaedic complex case management, as well as additional sub-acute beds at Balmain following the completion of the current capital works project.

Non-Admitted (NAP)

The Performance Unit is working closely with facility NAP coordinators to clean and resubmit their 2016/17 NAP data prior to the close-off deadline of 31 August.

An additional Impact Analysis was submitted and approved by the Ministry of Health as part of the NAP Reporting Project. The Ministry of Health is currently in the process of developing a final report for the project.

The NAP App developed by the Ministry of Health is now operational and allows LHDs to view their NAP activity, in NWAU, Service Events, and Occasions of Service against targets, as well as the activity of other LHDs. It also allows LHDs to check their data quality and produce reports.

Clinical Costing Update

The Performance Unit has commenced preparatory work for the full costing round R21.2. Financial data from the General Ledger has been extracted and is currently being mapped from Oracle codes to costing buckets and adjusted for negative expenses, prior to Finance Department review and approval. Activity feeder data is also being collated from various sources across the facilities.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of June, SLHD came in at 19.56% of all discharges being treated privately. In comparison to results in the same period last year, the LHD came in a half percentage-point higher than in June 2016.

Concord's improvement has continued with a second month in a row above 22%.

Single Room Utilisation

In the month of June, the LHD had 29% of all single rooms taken up by private patients. While 9.8% of patients were isolated for clinical alert, 39% of all private patients were accommodated in single rooms. The rate of single room utilisation and the rate of patients isolated for clinical alert remained the same as it was in May.

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
- Previous issues identified regarding accurate single room identification in the Patient Administration System now resolved

PERFORMANCE AND REDESIGN UNIT

Innovations

- The next Pitch is scheduled for Friday 29 September 2017 at the Concord Medical Education Centre. Entries close on 16 August 2017.
- Representatives from the CSIRO met with Chief Executive and Performance Unit on 3 July 2017. Potential collaborative projects were discussed, and a plan to further scope these projects was initiated.

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 'solutions' phase and has recently attended the Implementation workshop by ACI. Solution workshops were held with a wide range of stakeholders, including NSW Ambulance, aged care facilities and a community GP.

- The '*POPI: PreOperative Iron deficiency assessment and management*' project (CHR 2017 - first intake), is currently in the 'solutions' phase and has recently attended the Implementation workshop at ACI. Solution consultation meetings were held with key stakeholders including Anaesthetics, Medical Administration and Hospital in the Home, from RPA and Concord hospitals.
- 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. All 11 solutions have been completed or partially completed.
- A project looking at inefficiencies between the perioperative and sterilizing departments at Concord Hospital attended the ACI initiation workshop from 18 - 21 July 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, commissioned and handed over for occupation.

SLHD Aged Care Network

Recently identified latent conditions within the existing Balmain Hospital structural elements, asbestos within original slab formwork and concrete cancer, have impacted on the program delivery of this project.

Medical Imaging Equipment Purchases RPAH

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

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.

CRGH Cardiac Catheter Lab & 64 slice CT Scanner

The CT machine became operational earlier this month. Building works are occurring on the Cath Lab with the unit becoming operational the start of September 2017.

RPAH da Vinci Robot theatre

Fit out and commissioning have been completed.

RPA Replacement Fluoroscopy Unit

The Fluoroscopy machine has been installed and final commissioning has been completed.

NSW State Biobank

The Biobank level has been handed to the District. SWPS have taken occupancy.

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, the emergency power control upgrade for the generators at RPAH and the lift modernisation program at Concord.

RPA Energy Efficiency Program

Procurement has been completed and the contractor is expected to start on site next month. 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.

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 30 June 2017 based on the District's budgeted NCoS. For the month of June 2017, Sydney Local Health District (SLHD) General Fund Expenditure was \$6.677M (2.92%) unfavourable to budget; full year GF Expenditure was \$9.667M (0.57%) favourable to budget. GF Revenue was \$6.654M (4.83%) favourable to budget for the month and \$9.569M (0.61%) unfavourable to full year budget. For the financial year ended 30 June 2017 the District's GF NCoS was \$0.098M favourable to budget.

The Chief Executive and the Director of Finance were confident that the District would 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 continued 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:

Expenditure

For the month of June 2017 GF Total Expenditure was \$6.677M (2.92%) unfavourable to budget, reflecting unfavourable results for Salaries & Wages (\$7.330M), Annual Leave Provision (\$4.232M) and Superannuation (\$2.356M) and Repairs & Maintenance (\$0.231M). These unfavourable results were offset by favourable variances in Overtime (\$5.560M), Other Employee Expenses (\$0.233M), Long Leave Provision (\$0.308M) and Goods & Services – Clinical (\$2.024M).

Full Year GF Total Expenditure was \$9.667M (0.57%) favourable to budget. This result reflects favourable results for Goods & Services – Admin (\$16.817M), Goods & Services – Clinical (\$13.613M), Other Employee Expenses (\$2.694M), and VMO Payments (\$1.086M) and Grants (\$1.104M). These results were offset by unfavourable variances in Salaries & Wages (\$6.314M), Overtime (\$1.542M), Annual Leave Provision (\$5.347M), Repairs & Maintenance (\$8.660M), Superannuation (\$3.100M) and Goods & Services - Support (\$0.527M).

Revenue

GF Total Revenue was \$6.654M (4.83%) favourable to budget for the month of June 2017. The result for the month reflects favourable variances in User Charges (\$6.180M) and Grants & Contributions (\$2.116M) offset by unfavourable variances in Patient Fees (\$0.061M) and Other Revenue (\$1.582M).

Full Year GF Total Revenue was \$9.569M (0.61%) unfavourable to budget which is a significant improvement on the forecast as at April 2017. The unfavourable full year result reflects unfavourable variances in the majority of OSR categories, i.e. Patient Fees (\$6.470M), User Charges (\$2.600M) and Other Revenue (\$2.498M) offset by favourable variance in Grants & Contributions (\$2.494M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$7.327M favourable to budget for the month of June 2017 and \$0.030M favourable to budget for the full year. The full year result reflects an unfavourable budget variance for Expenditure of \$6.265M and a favourable result for Revenue of \$6.295M.

CONSOLIDATED RESULT

For the period ended 30 June 2017 the consolidated year to date NCoS result for the General Fund and SP&T was \$0.129M favourable to budget. The result comprises a favourable Expenditure variance of \$3.402M offset by an unfavourable Revenue budget variance of \$3.273M.

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

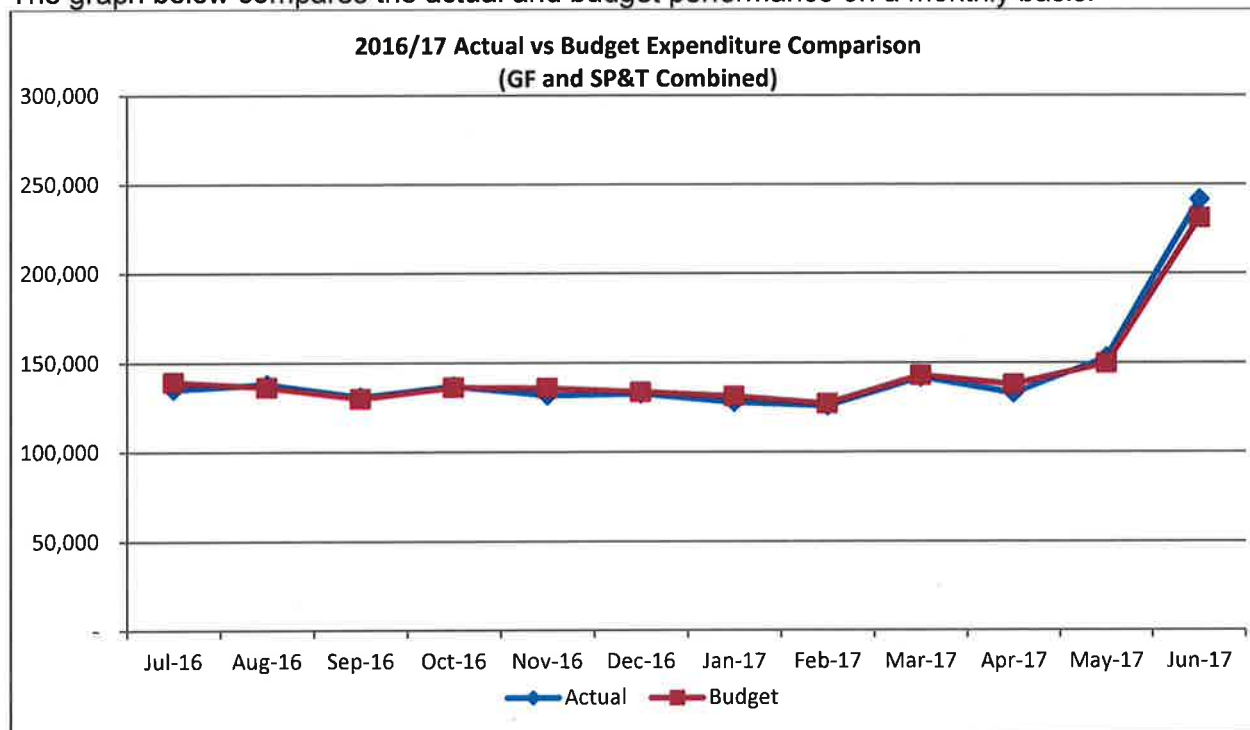
For the period ended 30 June 2017, SLHD recorded a Total Net Result of \$91.193M which was \$0.585M (0.64%) favourable to budget. The Net Direct Operating Result (GF and SP&T) for the period ended 30 June 2017 was \$10.429M favourable to budget. The full year Net Direct Operating Result reflects a favourable Expenditure variance of \$12.577M offset by an unfavourable Revenue variance of \$2.148M.

For the month of June 2017 Total Direct Revenue was \$17.719M favourable to budget, comprising \$6.676M favourable variance for the General Fund and an \$11.043M favourable variance for the SP&T Fund. Full Year Total Direct Revenue was \$2.148M unfavourable to budget, comprising \$8.920M unfavourable variance for the General Fund and a \$6.772M favourable variance for the SP&T Fund. The full year result for the GF reflects unfavourable variances in all major own source revenue categories except Grant Income.

For the financial year ended 30 June 2017 Total Direct Expenditure was \$12.577M favourable to budget. This result comprised favourable variances for VMO (\$1.086M), G&S Corporate and Operational Admin (\$16.817M), G&S – Direct Clinical Operating (\$13.613M) and Grants & Subsidies (\$1.104M). These results were offset by unfavourable results IN Salaries & Wages (\$6.314M), Salaries & Wages Oncosts (\$5.446M), Overtime (\$1.542M) and G&S – Supporting Services (\$0.527M).

MONTHLY BUDGET PERFORMANCE

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



LIQUIDITY

The District had NIL creditors over 45 days as at 30 June 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 June 2017.

The cash balance at 30 June 2017 for the SLHD Operating bank account was \$11.118M and the Operating Cash book balance was \$10.984M.

CAPITAL WORKS – SMRS PROJECTS

The District's Full Year Capital works budget relating to SMRS Projects as of June 17 is \$38.049M comprising \$15.345M of MoH funded and \$22.704M of locally funded projects.

During the year, 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 as at YTD June 17 was \$34.437M which is \$3.612M below budget. Slippage has occurred primarily with the SLHD Aged Care and Biobank projects. There has been delay in carrying out works for the SLHD Aged Care project due to weather and latent conditions. Biobank project is due to be completed in August 2017.

PLANNING

SLHD Strategic Plan 2018-2022

The outcomes from the Board/Executive Strategic Plan workshop have been reported and provide the basis for the new SLHD Strategic Plan (2018-2022). The new SLHD framework and vision for the plan were agreed at the workshop and the Planning Unit has developed a

Strategic Plan Summary document. This will be used in the major community and employee consultation across the District in August and September 2017.

Significant work has been undertaken to organise and structure these consultations.

As well as consultations on the Strategic Plan relevant community consultations will be structured to provide consultation on the SLHD Research Strategic Plan, the Diabetes Strategic Plan and the Canterbury Clinical Services Plan.

RPA Clinical Services Strategy

The Planning Unit has provided presentations on the draft RPA Clinical Services Strategy to the RPA Clinical Council and to senior SLHD executives. 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 SLHD has established the RPA HealthOne East, Green Square Interagency Advisory Committee with membership at a senior executive level from UrbanGrowth NSW, the City of Sydney, Dept. of Planning and Environment and NSW Health Infrastructure. Terms of Reference and membership have been agreed. Discussions to date have centred on site selection, establishing criteria for site selection and the re-zoning of sites that are under active consideration in collaboration with the City of Sydney and DPE. Affordability of these sites is a key consideration. This committee will report to the RPA HealthOne Steering Committee.
- The Planning Unit has developed the specifications for a "Pop-up" Health Service in Green Square. The Pop-Up will be a site from which community-based health staff can sessionally provide services that complement the current outreach and home-based health services. 150 square metres of space is required. Discussions have occurred with UrbanGrowth NSW and TAFE in respect of this temporary facility.
- A local community consultation is planned for September 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.

Waterloo State Significant Site

The Planning unit has attended a number of government agency consultation meetings about the redevelopment of Waterloo Housing Estate and the new Waterloo Metro Station.

The SLHD has held a series of meetings with Counterpoint, an NGO which is active in the Waterloo area to identify a strategy for improving health and wellbeing services in Waterloo and also for ensuring the development of a healthy built environment in Waterloo. The CE has determined three major strategies- the establishment of a linkage /development worker, the provision of a two half day forum to identify health needs and issues and the development of a Health Impact assessment.

The two half day forum has been planned in late September to address health needs of the people of Waterloo. The interactive program has been developed by Planning in collaboration with Counterpoint.

The Planning Unit has also closely collaborated with Population Health to develop a “Health Gap Analysis” of the 22 studies being prepared by government in relation to the Waterloo development. This gap analysis will form the basis of a Health Impact Assessment for the redevelopment proposal.

SLHD Diabetes 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 major SLHD forum is planned on Diabetes for the 10th 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 the new Research Strategic Plan for the District, with the SLHD Research and Education Board committee being the Steering Committee for this plan. Consultation with key stakeholder committees, such as the Sydney Research Council, has commenced.

Two major forums are being planned in October/November to progress this plan.

Inner West Youth Health and Wellbeing Plan

The draft Inner west Child Health and Wellbeing Plan is in the final stages of development. The plan is an intersectoral plan with Education, CESPHE and Family and Community Services. Priority issues and strategies are being devised collaboratively.

A Youth Mental Health Forum is planned for the end of October.

The Bays Health Impact Assessment

A draft Scoping Paper for The Bays Fish market precinct Health impact assessment has been developed in collaboration with Population Health.

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.

Cardiothoracic Planning

The Planning Unit has developed a data/background paper on cardiothoracic services in preparation for a meeting of Cardiothoracic Surgeons across the District.

SYDNEY RESEARCH

Office for Health and Medical Research (OHMR) - TRGS

Expressions of Interest (EOIs) for the third round of the Translational Research Grant Scheme (TRGS) opened on 5 June 2017. EOIs were to be submitted to the TRGS Coordinator of the Host Organisation by 31 July 2017. It is expected that a total of 14 EOIs will be received with SLHD as the Host Organisation.

In this round, Host Organisations will be limited to submitting only five EOIs to OHMR. EOIs will be reviewed by internal panel to assist in selecting the five EOIs that will be submitted with SLHD as the Host Organisation.

#	Chief Investigator	Title
1	Clinical A/Professor Michael Dinh	The Sydney Triage to Admission Risk Tool (START) study: using a data analytics tool to drive early senior decision making and improve patient outcomes in Emergency Departments
2	A/Prof Jencia Wong Prof Stephen Twigg	TEXT2U – Text messaging Engagement & eXperience trial for Type 2 diabetes in yoUng adults
3	Prof Ian Caterson	Effectiveness and cost-effectiveness of metabolic surgery in a NSW public hospital cohort
4	Dr Bethan Richards Prof Chris Maher	Extending the implementation of the Agency for Clinical Innovation (ACI) model of care for acute low back pain in emergency departments (ED)
5	Prof Timothy Lambert	Improving cardiovascular health outcomes in Australians living with serious mental illness
6	Dr Shilpi Ajwani	Giving children the STARS treatment–Steps To A Renewed Smile (STARS) program
7	Professor Derek Hart	New Immune Suppressive Treatments for Heart Transplantation.
8	Dr Sarah Maguire	Online Cognitive Behavioural Therapy (CBT) for Bulimia Nervosa (BN)
9	Dr Adrienne Gordon	PRE-PLAN: A randomised controlled trial assessing the impact of preconception weight loss for overweight or obese women
10	Dr Paul Haber	Integration of physical health care into drug and alcohol services: a health campaign approach
11	Dr Rachael Cordina	Fontan FIT: Fontan Fitness Trial: A translational exercise program to sustainably improve the physiology and quality of life of people with a Fontan circulation
12	Dr Leena Gupta	Feasibility of an innovative web-based application in assisting residential aged care facilities (RACFs) in managing influenza outbreaks
13	Prof Tony Keech	TBC – will focus on implementation of an evidence based mnemonic for the treatment of systolic heart failure
14	Dr John Worthington	TBC – a stroke project with NSW Ambulance

OHMR – NSW Health Statewide Biobank

The Local User Group met for the first time on 21 July 2017. The Group were given a brief tour of the facility, received a presentation from Ms Jane Carpenter, Project Manager, Biobanking Services and were provided the opportunity to ask questions.

Feedback from the Group was very positive, particularly in relation to the quality of the equipment, the services that will be provided and in the scale of the facility. It is projected that the Biobank will be launched in September/October 2017.

Sydney Health Partners (SHP)

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

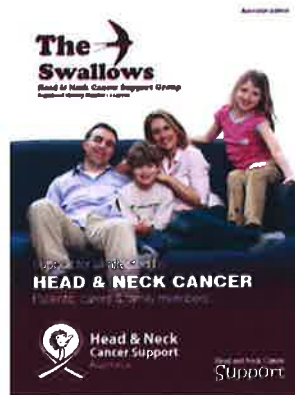
As announced at the Sydney Innovation and Research Symposium, Sydney Health Partners will receive \$2.2 million in funding from the Medical Research Futures Fund. SHP submitted the application for this Rapid Applied Research Translation Grant on 27 July 2017.

The SHP team are holding a planning meeting on 3 August 2017 for upcoming SHP events.

Head and Neck Cancer Patient Book

The Sydney Research team worked with Ms Julie McCrossin, Head and Neck Cancer Survivor to coordinate a launch event for the Head and Neck Cancer Patient Book. This book, which includes both patient stories and clinical support, is a patient-lead initiative, developed by The Swallows UK charity, and Head and Neck Cancer Support Australia.

The first launch in Australia was held at RPA, followed by Liverpool Hospital and St Vincent's. The event demonstrated the importance of patient-centred care and highlighted the networked cancer services provided by SLHD. Hardcopies of the book are available, as well as a PDF and an [online version](#).



Sydney Research Twitter


The Sydney Research Twitter account was launched in mid-July and as of 2 August 2017, @SydneyResearch has 27 Followers.

Utilisation of social media is specified in the Sydney Research Strategic Plan 2014-2019 to assist in the achievement of the Sydney Research strategic objectives of embedding research culture and enhancing prominence and communications. This account will be vital in promoting and growing an audience for Sydney Research activities.



International Delegates - Annual Independent Hospital Pricing Authority (IHPA)

Royal Prince Alfred Hospital has been selected by the Ministry of Health to host a number of international delegates as part of the annual Independent Hospital Pricing Authority (IHPA) Activity Based Funding Conference. The site visit will take place on Monday 9 October 2017 and will provide delegates with the opportunity to gain an insight into the practical implementation of activity based funding and patient classification systems at the hospital level in NSW. Presentations will be given by members of the District Executive and Senior Clinicians and will focus areas such as governance, operational management, research and costing.



Dr Teresa Anderson
Chief Executive

Date: 9.10.17