

Sydney Local Health District

Sixty Ninth Meeting of the Board

Date: Monday 18 September 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
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 Barry Catchlove, AM, Board Member
Ms Susan Anderson, Member
Ms Deborah Willcox, Director, Operations, SLHD

Apologies

A/Professor Christine Giles, Member
Dr Teresa Anderson, Chief Executive
A/Professor Catherine O'Connor, Chair, Medical Staff Executive Council

In attendance

Mr Paul Apps, Chair, Audit and Risk Committee, SLHD (9.00am - 9.15am)
Mr Bola Oyetunji, Director of Financial Audit Services, NSW Audit Office (9.00am - 9.15am)
Ms Katharine Duffy, Director, Nursing and Midwifery, SLHD (9.00am - 9.35am)
Ms Karen Bowen, Nurse Manager, Clinical Practice, SLHD (9.00am - 9.35am)
Michelle Barakat-Johnson CNC, SLHD (9.00am - 9.35am)
Ms Nerida Bransby, Secretariat

2. Welcome and introductions

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

The Board progressed to agenda item 10.1: Financial Statements Year ending June 2017. Mr Apps opened the discussion on the role of the Audit and Risk Committee, the schedule of meetings, the rigorous procedures in place and the support of the District Director, Finance Department. Mr Oyetunji advised the Board that there were no areas of concern in this District.

The Chair thanked Mr Apps and Mr Oyetunji for presenting the Financial Statements and for attending the meeting.

Presentation:

Ms Duffy, Ms Bowen and Ms Barakat-Johnson presented on Hospital Acquired Pressure Injuries (HAPI): an implementation Study in the SLHD including:

- Pressure injuries are detrimental
- Pressure injuries in the District in 2014
- Steps taken including implementing a taskforce, framework, study to investigate all aspects of injury prevention and management
- Implementation research framework
- Findings
- Initiatives
- Major Achievements – Best in Australia 2016
- Key achievements
- Financial savings
- Acknowledgements - patients, carers, clinicians and taskforce members
- Support of the District Executive

The Chair thanked Ms Duffy, Ms Bowen and Ms Barakat-Johnson 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.

2. Dr Mary Haines declared that she is a reviewer on the TRGS Round three submissions.

This temporary conflict of interest has been added to the register.

3. Mr David McLean declared verbally and via email that:

- (i) His son is the CEO of a company that develops and markets chemotherapy delivery devices that undoubtedly supply to NSW Health.
- (ii) He has investments in a company that supply vaccine and blood products that could also supply to NSW Health.

These potential conflicts are listed in the Register.

4. Confirmation of previous minutes

4.1 Minutes – 21 August 2017

The minutes of the Board meeting held on Monday 21 August 2017 were moved and seconded.

The Chair then signed the minutes.

4.2 CE Report – August 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:

- The last page of the Board reporting pack has been removed. This agenda item can be removed from the action list.
- Ms Willcox provided a verbal report on the environmental incident at Lifehouse. This agenda item can be removed from the action list.
- The video on Living Well with Chronic Illness was shown at the meeting for the patient story. This agenda item can be removed from the action list.
- Setting meeting times with the CEs/Board Chairs of Lifehouse and the District is progressing.

5.2 Updated Brief on Drug Company Sponsored Events

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

6. Patient Story

Refer action list dot point 3.

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

The Chair reported that the Performance Review for the Chief Executive is due to the MoH on Friday 22 September 2017. Documentation will be circulated to the Board Members tomorrow for comments with responses due back by COB Thursday 21 September 2017.

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.
- Mental Health Readmissions within 28 days were on target for the month of April 2017 at 13%. This is a significant improvement with a decrease of 3.8% compared to the same period last year.
- There were 13,966 separations in July 2017, an increase of 2.41% compared to July 2016. Occupancy has increased 7.68% from 89.14% to 96.82%. The acuity of patients admitted to hospital has increased with significant demand on ICU beds.
- There were 13, 955 emergency department attendances in July 2017, an increase of 10.75% compared to July 2016.
- 31% of all single rooms were taken up by private patients (up from 29% in June) in July 2017. While 9.8% of patients were isolated for clinical alert, 39% of all private patients were accommodated in single rooms. The proportion of private patients being allocated a single room and the rate of patients isolated for clinical alert remained the same as it was in June.
- The next Pitch is on Friday 29 September 2017.
- Works have commenced today on the installation of the Interventional CT in the Lifehouse Radiology Department.
- Two half day workshops addressing the current and future health needs impacts in Waterloo will be held on 27 and 28 September 2017. The program is to be forwarded to the Board. The Board raised the very positive feedback from staff and consumers held at previous forums. The Director of Planning is to be invited to the next Communications Committee.
- Sydney Health Partners will hold a forum at RPAH on 18 October 2017. An invitation is to be forwarded to the Board.
- Need to check the date of the launch for the Aboriginal Health Strategic Plan.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – July 2017

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

9.1.2 Performance Indicators – July 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 – July 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 received, read and noted the Clinical Governance report for the period May – July 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 – July 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 October 2017.

10. Matters for approval / resolution

10.1 Financial Statements Year Ending June 2017

Following examination of the Financial Statements with Mr Apps and Mr Oyetunj, the Board endorsed the Financial Statements for the Year Ending 30 June 2017 as recommended by the Audit and Risk Committee.

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 14 August 2017.

11.2 Education and Research Committee

The Board noted the next meeting is to be held on 18 September 2017.

11.3 Communications Committee

The Board received, read and noted the minutes of the meeting held on 21 August 2017.

11.4 Audit and Risk Committee

The Board received, read and noted the minutes of the meeting held on 5 September 2017.

11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 23 August 2017.

11.6 Health Care – Clinical Council

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

11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 11 November 2017.

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

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

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

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

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 9 August 2017.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board received, read and noted the minutes of the meeting held on 21 August 2017.

12.4 Surgical Demand Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held on 16 August 2017.

12.5 Revenue Enhancement Development Committee

The Board noted the meeting to be held on 23 August 2017 was cancelled.

12.6 NSW Health / SLHD Performance Review Meeting

The Board received, read and noted the minutes of the meeting held on 5 June 2017.

12.7 Organ Donation for Transplantation

The Board noted the meeting was held on 22 August 2017.

12.8 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted the minutes of the meeting held on 8 August 2017.

12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held on 18 July 2017. The Yaralla Open Day was very successful with over 3,000 people in attendance.

12.10 Sydney Healthy and Active Living Steering Committee

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

13. Matters for noting

13.1 SLHD Annual Notification Reports for 2017

The Board received, read and noted this report.

14. Other Business

14.1 Marriage Equality

The Board discussed the increase in members of our community seeking mental health assistance regarding Marriage Equality. The District is proposing to have "Welcome Boards" in all of the facilities promoting equity for all.

14.2 Assisted Dying Bill

The Board discussed the Assisted Dying Bill being presented to Parliament in October 2017. The District will plan for this change if and when it eventuates.

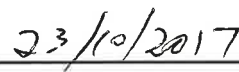
15. Next Meeting

The next meeting is to be held on Monday 23 October 2017 at 9.00am.

The meeting closed at 10.45am.



Chair



Date

Board Report

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

PERFORMANCE

The District remains 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 July 2017.

For the year to date June 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.

Mental Health Readmissions within 28 days were on target for the month of April 2017 at 13%. This is a significant improvement with a decrease of 3.8% compared to the same period last year.

The District remains under the benchmark (<2/10,000 bed days) for Staphylococcus Aureas Bloodstream Infections (SABSI) with a result of 0.6 per 10,000 bed days for June 2017. There has been a decrease of 0.3 in SABSIs per 10,000 bed days compared to the same period last year.

There were 2 Central Line Associated Bloodstream (CLAB) infections during June 2017. Both occurred at RPA.

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

Workforce

Management of the workforce to meet the significant demand in services during June 2017 remained a focus for the District and all facilities.

Premium Staff usage was kept to a minimum although increased for both medical and nursing compared to the previous year. Premium staff usage for Medical FTE increased by 1.02% for July 2017 compared to the same time last year and Premium staff usage for Nursing FTE increased by 1.03% compared to the same time last year. However, Premium staff usage for Allied Health FTE decreased by 0.56% in July 2017 compared to July 2016.

Activity

The District has had a very busy month. There were 13,966 separations in July 2017, an increase of 2.41% compared to July 2016. Occupancy has increased 7.68% from 89.14% to 96.82%. The acuity of patients admitted to hospital has increased with significant demand on ICU beds.

There were 13, 955 emergency department attendances in July 2017, an increase of 10.75% compared to July 2016.

Emergency Treatment Performance

The Emergency Treatment Performance (ETP) performance for the District for the month of July 2017 was 66.73% which was a deterioration of 4.5% on the same time last year; however, this needs to be considered in light of the 10.75% increase in emergency department attendances and the 11.9% increase in ambulance arrivals in July. NSW including SLHD has had an unprecedented increase in influenza which has impacted on the emergency departments and hospitals. A range of strategies have been used to try to manage the increase in demand including daily demand management teleconferences, the establishment of a District demand management unit headed by Dr James Edwards, a senior emergency department clinician. At RPA a new fast track model for Triage category 4 is also being trialled.

Transfer of Care

The District's Transfer of Care performance was also influenced by the increase in Emergency Department presentations during this period. The Transfer of Care (TOC) for the District was 89.32% for July 2017 falling short of the 90% target rate. The TOC target (90%) was exceeded by Canterbury and Concord Hospital in July 2017; however, the TOC for RPA was 86.68% for July 2017.

ED Triage

Canterbury

Canterbury Hospital achieved ED triage category targets for Category 1, 2, 4 and 5. Performance in category 3 was under the target of 75% with a result of 73.32% for the month of July 2017.

Concord

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

RPA

RPA met triage category targets for categories 1, 4 and 5 in July 2017, which is consistent with the result achieved in July 2016. Performance in category 2 was under the target of 80% with a result of 77.20% for the month of July 2017. Performance in category 3 was under the target of 75% with a result of 62.32% for the month of July 2017.

Elective Surgery

Despite the significant increase in demand on our hospitals and services, SLHD has continued to manage its elective surgery well. Performance is at 100% for July 2017 in all categories, which is consistent with the result achieved in July 2016.

NATIONAL FUNDING REFORM/ ACTIVITY BASED FUNDING

Mental Health

In consultation with the Ministry of Health, the Performance Unit and Mental Health Services have finalised the electronic medical record and activity based funding requirements for the community based hospital alternative mental health service at Eurella.

This process will support the full and accurate reporting of SLHD activity from the commencement of the Eurella service.

Data quality continues to be a focus for the Mental Health Service, with sustained efforts to monitor and proactively address data quality issues in the Service's data sets. Following the implementation of the Australian Mental Health Care Classification, and the commencement of the new financial year, the SLHD Mental Health Service will continue to work closely with the SLHD Performance Unit to monitor purchased activity levels under the new classification, to ensure that all activity targets are met.

Sub and non-acute (SNAP)

The Performance Unit worked closely with all facility SNAP coordinators to ensure SNAP episodes were grouped and errors corrected by the Ministry-designated close off date of 31 August. SLHD finished 2016/17 with a SNAP grouped rate of 99.86%, which is the best result achieved by the District to date.

The Performance Unit, together with facility SNAP coordinators will have a renewed focus on education and training in 2017/18 to ensure that the District is collecting highly accurate SNAP data with minimal error rates.

Non-Admitted (NAP)

Facilities/services have done fantastic work in cleaning, reconciling and reloading their 2016/17 NAP data for the final close off. Due to the large volumes of data being loaded into the NAP datamart across the State there were some delays in finalising this process. The Ministry has advised that data will not be extracted for formal reporting until all files have been loaded, despite this being after the close off date.

An SLHD Non Admitted Patients Working Group has been established to relay information from the State NAP Coordinator's meetings and to provide facilities and services with the opportunity to raise any NAP data and reporting issues and work as a collaborative group across the District.

Clinical Costing Update

The Performance Unit has commenced preparatory work for the full costing round R21.2. Some changes will be implemented in this round to improve costing accuracy, including new feeders for ECG, peritonectomy and robotic surgery. The iFRAC review is now inclusive of SP&T accounts, which addresses one of the findings from last rounds audits.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of July, SLHD's result was 20.2%, a 2 year high. Improvements came from strong results at Concord (above 22% for 3 consecutive months), RPAH and IRO (both above 21%). Canterbury also had its own 2 year high with a result of 12.63%. The LHD's goal is to stay above the 20% mark and keep improving.

Single Room Utilisation

In the month of July, the LHD had 31% of all single rooms taken up by private patients (up from 29% in June). While 9.8% of patients were isolated for clinical alert, 39% of all private patients were accommodated in single rooms. The proportion of private patients being allocated a single room and the rate of patients isolated for clinical alert remained the same as it was in June.

Board Report

Revenue Enhancement Committee

- Focus continuing 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. MoH formulating a state-wide response regarding recent communication from HCF notifying us of its restrictions to public hospital coverage.
- Previous issues identified regarding accurate single room identification in the Patient Administration System are resolved, facilities are developing processes to ensure accuracy is maintained effectively into the future

PERFORMANCE AND REDESIGN UNIT

Innovations

- The next Pitch is scheduled for Friday 29 September 2017 at the Concord Medical Education Centre. We have received 6 submissions for this round.

Clinical Redesign: CHR Projects

- The '*POPI: Pre-Operative Iron deficiency assessment and management*' project (CHR 2017 - first intake), is currently in the 'implementation' phase. The 'solutions design' report has been submitted to the Chief Executive for approval. The project team identified 3 key solutions, which have been taken through to the implementation phase.
- '*A Collaborative Care Outreach in Residential Aged Care Facilities (RACFs) across the SLHD (ACCORD)*' project (CHR 2017 - second intake) is currently in the 'implementation' phase and has recently submitted the diagnostic report to the Chief Executive for approval.
- The 'Perioperative and Sterilizing departments redesign' project team have completed the initiation phase and are currently in the 'diagnostic' phase while planning an official launch of their project to involve both departments.
- The '*Palliative Care: Access, Care, Equity*' (PC-ACE) and the '*Review of the Department of Orthodontics at the Sydney Dental Hospital*' project teams attended their Graduation in August 2017 and were awarded a Graduate Certificate in Clinical Redesign by the University of Tasmania. Both projects have partially met their objectives and are currently evaluating some solutions while implementing those which required extra time.

Accelerating Implementation Methodology (AIM):

- The August AIM course was at full capacity and received exceedingly positive evaluations. The next course is scheduled for 9 and 10 November.

CAPITAL PLANNING

Concord EMU

ED Short Stay unit has been completed and handed over for occupation. Works are now progressing on phase two of the project which includes a doctor's write up area, isolation room, two acute bays, plaster room and patient bathrooms

SLHD Aged Care Network

Recently identified latent conditions within the existing Balmain Hospital structural elements, asbestos within original slab form work and concrete cancer, have impacted on the program delivery of this project. First stage handover was completed on 8 August, 2017. It is anticipated that the project will not be completed until November 2017 and beds currently being used at RPAH transferred back to Balmain.

Medical Imaging Equipment Purchases RPAH

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

Sydney Dental Additional Chairs

The clinical areas of the project have been completed. The reticulation of the new wet suction system is due for completion 5 October, 2017.

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 being commissioned in September, 2017

RPAH da Vinci Robot theatre

Fit out and commissioning are complete.

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. RPAH emergency power control upgrade for the generators and the lift modernisation program at Concord. Additional funding has been granted for infrastructure at RPA (Fire System \$600k), CRGH (Steam System \$700K) and Canterbury (Replacement Chillers \$600K).

Energy Efficiency Program

Procurement has been completed for the RPA Energy Efficiency Program and the contractor has started on site. 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.

The District has received advice from Treasury and the Ministry that Canterbury and Sydney Dental have also been approved.

FINANCIAL PERFORMANCE (NET COST OF SERVICE BASIS) **GENERAL FUND (GF)**

The 2017/18 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 first month of the 2017-18 financial year ended 31 July 2017 based on the District's budgeted NCoS.

For the month of July 2017, Sydney Local Health District (SLHD) General Fund Expenditure was \$1.066M (0.74%) favourable to budget and GF Revenue was \$1.086M (-0.78%) unfavourable to budget. For month ended 31 July 2017 the District's GF NCoS was \$0.020M unfavourable to budget.

The Chief Executive and the Director of Finance are confident that the District will have an on budget NCoS result for the 2017/18 financial year despite the challenges that are facing the District. To achieve the 2017/18 NCoS target the District continues to maintain the good controls that it has in place and monitors performance on a daily basis.

The major variances for the month were:

Expenditure

For the month of July 2017 GF Total Expenditure was \$1.066M (0.74%) favourable to budget, reflecting unfavourable results for Salaries & Wages (\$3.521M), Repairs & Maintenance (\$1.797M), Overtime (\$0.783M) offset by favourable variances in Annual Leave Provision (\$0.980M) and Goods & Services (\$7.069M).

Revenue

GF Total Revenue was \$1.086M (-0.78%) unfavourable to budget for the month of July 2017. The result for the month reflects favourable variances in Patient Fees (\$0.909M) and Grants & Contributions (\$0.422M) offset by unfavourable variances in User Charges (\$2.514M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$1.127M favourable to budget for the month of July 2017. This result reflects favourable budget variances for Expenditure (\$0.598M) and Revenue (\$0.529M).

CONSOLIDATED RESULT

For the period ended 31 July 2017 the consolidated year to date NCoS result for the General Fund and SP&T was \$1.107M favourable to budget. The result comprises a favourable Expenditure variance of \$1.664M offset by an unfavourable Revenue budget variance of \$0.557M.

Board Report

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

For the period ended 31 July 2017, SLHD recorded a Total Net Result of \$2.994M which was \$1.146M (62%) favourable to budget. This was due to the Crown Acceptance being higher than the Net Cost of Service in July 2017. The Net Direct Operating Result (GF and SP&T) for the period was \$1.903M favourable to budget.

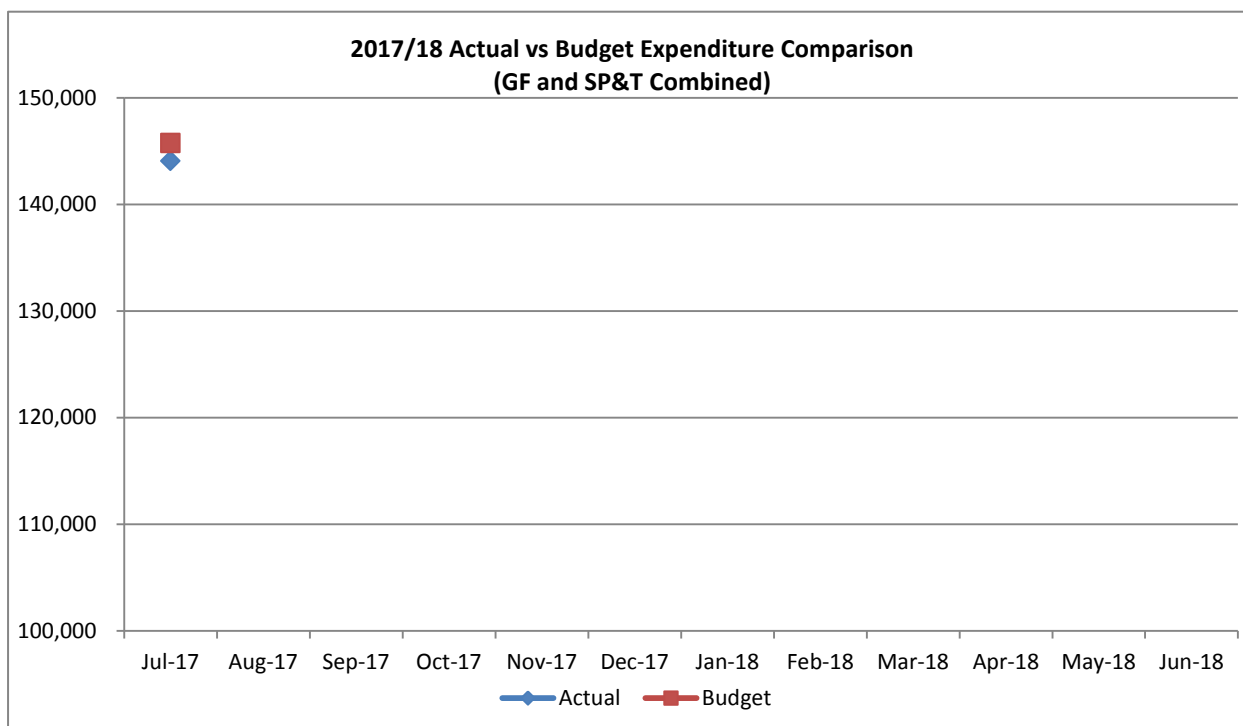
The Net Direct Operating Result reflects a favourable Expenditure variance of \$2.396M offset by an unfavourable Revenue variance of \$0.494M.

For the month of July 2017 Total Direct Revenue was \$0.494M unfavourable to budget, comprising \$1.061M unfavourable variance for the General Fund and a \$0.567M favourable variance for the SP&T Fund. The GF reflects unfavourable variances in User Charges except Patient Fees, Grant Income and Other Income.

Total Direct Expenditure was \$2.396M favourable to budget for the month of July 2017, comprising \$2.478M favourable result for the General Fund and \$0.082M unfavourable result for the Special Purpose & Trust fund. The GF result reflects favourable variances in Salaries & Wages Oncosts (\$0.422M), G&S Corporate and Operational Admin (\$7.482M) and G&S Supporting Services (\$0.177M). These results were offset by unfavourable results for Salaries & Wages (\$3.521M) and Overtime (\$0.783M), VMOs (\$0.303M), G&S Direct Clinical Operating (\$0.590M) and Grants & Subsidies (\$0.407M)

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 31 July 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 July 2017.

The cash balance at 31 July 2017 for the SLHD Operating bank account was \$16.701M and the Operating Cash book balance was \$16.549M.

CAPITAL WORKS – SMRS PROJECTS

The District's Full Year Capital works budget relating to SMRS Projects as of July 17 is \$12.321M comprising \$2.648M of MoH funded and \$9.673M of locally funded projects.

Actual expenditure as at YTD July 17 was \$0.343M. The amount of \$0.343M relates to the Biobank project which is expected to be completed in August/September 2017.

PLANNING

SLHD Strategic Plan 2018-2022

During August the Planning Unit conducted consultations with staff across the District. Employee forums were held at Canterbury (50 staff), Concord (90 staff), RPA (80 staff), Balmain (35 staff) and CEWD for Community-based staff (60 staff). These consultations and discussions yielded rich information which will be fully reported and which will guide the revision of the draft Strategic Plan Summary (20178-2022). An on-line staff survey is also being conducted.

Community Consultations across the District will be undertaken in September. 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. An on-line community survey will also be undertaken.

RPA Clinical Services Strategy

The RPA Clinical Services Strategy has been presented to the RPA Clinical Council for discussion.

RPA HealthOne East (Green Square)

- The Planning Unit is developing a service plan for the proposed “**Pop-Up**” **Health Service** in Green Square in collaboration with Clinical Services Integration Unit. The Pop-Up will be located on western side of the Green Square Town Centre. Community-based health staff will provide mainly sessional services that will complement the current outreach and home-based health services. 155 square metres of space is being provided, in a collaborative arrangement with UrbanGrowth NSW and TAFE.

- 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 met twice in August. Criteria for site selection and weighting has now been agreed. A property adviser has been engaged to advise the full range of available property in Green Square within one kilometre of the town centre.
- A GP Continuing Professional education and consultation event is planned in Green Square for November.

Urban Development

- **Waterloo State Significant Site**

Significant planning has occurred towards the two half day Waterloo forum which will seek to identify and address current and future health needs of the people of Waterloo. The interactive program has been developed by Planning in collaboration with the NGO Counterpoint. It is expected that 100 residents, tenants, health providers, academics and senior government agency staff will attend.

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 has now been discussed with UrbanGrowth.

- **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.

- **Sydenham to Bankstown Corridor**

The Planning Unit has attended a number of meetings to identify the health needs and service requirements of residents in the corridor between Sydenham and Bankstown.

- **UNSW Forum on Urban Development**

The Planning Unit was invited to be on a panel at the annual UNSW Forum for the Centre for Primary Care and Equity.

SLHD Diabetes Strategy

A major SLHD forum is planned on Diabetes for the 10 November, to develop the Strategy and approach to reducing and measuring avoidable hospitalisations.

SLHD Research Strategic Plan

Consultation with key stakeholder committees, such as the Sydney Research Council, has commenced. Two major forums are being planned in November/December 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.

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

Executive Director, Sydney Research

On 21 August 2017, Adj Associate Professor Vicki Taylor commenced as the Executive Director, Sydney Research. She comes to Sydney Research from NSLHD with extensive experience working in both public and private health, across clinical, research and senior administrative roles. Adj A/Prof Taylor will meet with relevant senior researchers, clinicians and administrators to identify immediate priorities for Sydney Research, foster collaborative initiatives, improve opportunities and provide leadership across the hub.

2017 Medical Devices Fund

\$1.47 million from the Medical Devices Fund has been awarded to Sarah McDonald. Four winners were awarded \$6.6 million in total. Sarah's device, Oli, allows real time observation of uterine activity, movements, exertion, maternal and foetal wellbeing and how they correlate to progression of labour. The device is a non-invasive patch capable of remotely monitoring pregnancy and labour.

Sarah is a PhD candidate with the University of Sydney and conducts her research with Royal Prince Alfred Hospital Women's and Babies.

2017 RPA Foundation Medal

Professor Tony Keech, affiliated with Sydney Local Health District, the University of Sydney and the NHMRC Clinical Trials Centre has been awarded the RPA Foundation Research Medal 2017 for excellence and outstanding achievement in medical research.

Office for Health and Medical Research (OHMR) - TRGS

Expressions of Interest (EOIs) for the third round of the Translational Research Grant Scheme (TRGS) must be signed off and submitted by 4 September 2017.

In this round, Host Organisations will be limited to submitting **only five** EOIs to OHMR. EOIs with SLHD as the Host Organisation were reviewed by a panel (Warwick Britton, Jenny Alison and Elizabeth Denney-Wilson) to assist in selection. SLHD has also been approached to co-sign on 14 applications.

SLHD as the Host Organisation

- Prof Tony Keech, *BANDAID2 Heart Failure Management Audit and Best Practice Implementation*
- Dr Sarah Maguire, *Online Cognitive Behavioural Therapy for Bulimia Nervosa*
- Prof Timothy Lambert, *Improving cardiovascular health outcomes in Australians living with serious mental illness*
- Dr Adrienne Gordon, *PRE-PLAN: A randomised controlled trial assessing the impact of preconception weight loss for overweight or obese women*
- 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*

SLHD as a Partner Organisation

NSW Ambulance

- A/Prof Brian Burns (NSW Ambulance) and A/Prof David Gattas (SLHD), *Out of hospital cardiac arrest in Sydney – can we deliver advanced hospital care directly to the patient?*
- Sarah Edwards, *Digital Management of Pre-Hospital Stroke Notifications*

South Eastern Sydney Local Health District

- A/Prof Gideon Caplan and Ms Anne Meller, *Advance Care Planning in outpatient clinics study – extension*
- Dr Lauren Monds and Dr Nicole Ridley, *Implementing a Standardised Cognitive Assessment Protocol to Improve Outcomes in Drug & Alcohol Treatment Services*
- Prof Mark Brown, *Adverse cardiovascular outcome after hypertensive disorders of pregnancy altering this trajectory*

South Western Sydney Local Health District

- Prof Josephine Chow, *Targeted Education ApproaCH to improve Peritoneal Dialysis outcomes (TEACH-PD Trial)*
- Dr Michael Edwards, *Standard Care, Case Management and Psychodynamic Psychotherapy: Outcomes in alcohol-related liver disease (ARLD)*

Northern Sydney Local Health District

- Prof Gemma Figtree, *Stimulating β -3 adrenergic receptors to improve symptoms and clinical outcomes in patients with peripheral vascular disease*

Northern NSW Local Health District

- Ms Catherine Adams, *Enhancing capacity of midwives in public antenatal clinics to support pregnant smokers to quit smoking*

St Vincent's Hospital Network

- A/Prof Nadine Ezard, *Organisational change and varenicline for smoking cessation in opioid treatment programs*
- Prof Peter Macdonald AM, *A Snapshot of Heart Failure and Atrial Fibrillation Across NSW and the ACT*

Western Sydney Local Health District

- Prof Graeme Steward, *Developing a practical and affordable clinical pathway to identify and reduce the burden of heart failure due to transthyretin amyloidosis (ATTR).*

NSW Health Pathology

- Dr Michael Buckley, *Addressing the gap in genomic care of fetuses with heart anomalies*
- Dr John Killen's application titled, *Vitamin B12 supplementation in end-stage renal disease patients reduces cardiovascular risk and erythropoiesis-stimulating agent requirement: A randomised controlled trial*

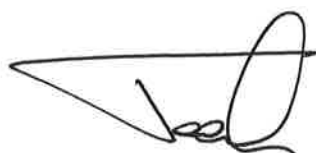
Sydney Health Partners (SHP)

The Sydney Research team continue to work closely with Prof Garry Jennings, Executive Director, SHP. Three SHP events are currently planned:

- The Sydney Health Partners' Annual Forum, to be held at RPA Hospital on Wednesday 18 October 2017. Mr Paul McClintock, Prof Gerry Jennings and Dr Antonio Penna will speak at the event, which will include a video message from Minister Greg Hunt.
- An Implementation Science Workshop to be hosted by the University of Sydney under the Sydney Health Partners Banner.
- A large symposium early in 2018.

Other

- The Sydney Research Team are working with SLHD Research and SLHD Planning to assist in development and conduct of consultations for the SLHD Research Strategic Plan.
- The NSW Health State-wide Biobank is expected to be operational from October 2017. Sydney Research has assisted in distributing pre-engagement communication with the local research community and plans to host the September Sydney Research Council meeting in the Biobank.
- The Embedding Quality Research into LHDs Working Group will continue with new direction after discussion with Dr Penna.
- Sydney Research has met with Cicada Innovations and the University of Sydney's Pro-Vice-Chancellor (Research – Enterprise & Engagement) to progress a coordinated approach to building commercialisation capacity across the hub.
- Sydney Research communications will continue to be an area of focus with a refresh of the Sydney Research website, logo and social media strategy planned. Currently 55 followers on Twitter.



Dr Teresa Anderson
Chief Executive

Date: 3.11.17