

Sydney Local Health District

Seventieth Meeting of the Board

Date: Monday 23 October 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
Dr Teresa Anderson, Chief Executive

Apologies

A/Professor Christine Giles, Member
Ms Susan Anderson, Member
A/Professor Catherine O'Connor, Chair, Medical Staff Executive Council
Ms Gina Finocchiaro, Acting Director, Corporate Services

In attendance

Adjunct Professor Annette Solman, Chief Executive, Health Education and Training Institute (HETI) (9.00am - 9.40am)
Ms Deborah Willcox, Director, Operations, SLHD
Ms Nerida Bransby, Secretariat

2. Welcome and introductions

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

Presentation:

Adjunct Professor Solman presented on HETI and its partnership with the SLHD including:

- HETI's vision for the partnership
- HETI's offerings including an overview of training, capacity building and workforce
- Our patients, families, consumers and carers
- Our community and our services
- Education to support the security round table action plan
- Investing in our staff
- Leadership and management development pathway
- Supporting leadership and management skills
- Education and research
- Opportunities to strengthen the partnership

The Chair thanked Adjunct Professor Solman for the presentation and for attending the meeting.

Dr Anderson reiterated the changes to the District Executive Staff including:

- Congratulations to Deb Willcox on her appointment as Chief Executive, NSLHD.
- Congratulations to Ms Katharine Duffy on her appointment as the Director of Nursing and Midwifery at the NNSWLHD.
- Mr Nobby Alcala will continue to act as the General Manager of RPAH.
- Ms Gina Finocchiaro will continue to act as the Director, Corporate Services.
- Ms Ivanka Komusanac will act as the Director of Nursing and Midwifery for the SLHD.
- Dr Tim Sinclair will return to the SLHD in January 2018

Dr Anderson spoke on the wonderful contribution Deb and Katharine have made to the District and congratulated them on their new appointments.

The Chair, on behalf of the Board congratulated Deb and Katharine and wished them well in their new roles.

3. Declaration / Removal of conflicts of interest

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

There were no new conflicts of interest to declare or to be added to the Register.

4. Confirmation of previous minutes

4.1 Minutes – 18 September 2017

The minutes of the Board meeting held on Monday 18 September 2017 were moved and seconded.

The Chair then signed the minutes.

4.2 CE Report – September 2017

The Chair declared that the CE Report for September 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 first meeting is being held on Monday 30 October 2017 with the CEs/Board Chairs of Lifehouse and the District.
- A tour of the Bio Bank is being held today following the Board Meeting. This agenda item can be removed from the action list.
- Performance review documentation for the Chief Executive was forwarded to all Board members. This agenda item can be removed from the action list.
- The Program for the Waterloo Workshop was forwarded to the Board. This agenda item can be removed from the action list.
- The date for the Aboriginal Health Strategic Plan launch is still being negotiated.
- The invitation for the SHP Forum was forwarded to the Board. This agenda item can be removed from the action list.

6. Patient Story

This item was discussed at agenda item 9: seventh dot point.

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 provided a verbal report including:

- Feedback from the Waterloo Redevelopment: The Future Health Impacts, Issues and Implications Forum held over two days in September 2017 was both productive and positive.
- Discussions at the Minister for Health Council of Board Chairs Forum held recently included Board Accountabilities and Capability, Board role in the NSW Health System, Stakeholder Engagement, Clinician Engagement, Quality and Safety.

A half day workshop is to be convened with the SLHD Board and the District to address the points and provide feedback on the matters raised at the forum.

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 over target for the Month of June 2017 at 16.2%. This is consistent with the result from June 2016 but a 3.2% decrease in performance from May 2017.
- The Emergency Treatment Performance (ETP) performance for the District during the month of August 2017 was 68.06%. This result falls short of the District target for ETP of 81% and is a decrease in performance of 2.7% compared to the result obtained in August 2016 of 70.76%. Need to include the number of patients within four hours in the next report.
- SLHD continues to perform at the top of the state for patient treatment timeframe targets for elective surgery. Performance is at 100% for August 2017 in all categories which is consistent with the result achieved in August 2016. The Board discussed the district's performance and recommended to include a "commentary" summary in the CE report.
- Due to a technical problem, the District's acute activity results will be impacted and should be resolved by late October to early November.
- The cost of prosthesis does not impact on the District.
- The Pitch was held Friday 29 September 2017 at the Concord Medical Education Centre. The winner entitled "Tails" Therapy Animal Intervention in SLHD looked at animal assisted therapy as a form of nidotherapy which is a systematic assessment and modification of the environment to minimize the impact of any form of mental health disorder on the individual or on the society.
- The District is one of the finalists for the Prime Minister's Awards for 2017.
- Imaging Projects for the District are now complete.
- August 2017 GF Total Expenditure was \$3.891M (2.68%) unfavourable to budget, reflecting unfavourable results for Overtime (\$1.150M), Annual Leave Provision (\$2.496M), G&S Med and Surgical Supplies (\$1.811M), G&S Special Services (\$1.278M) and G&S Admin (\$4.924M) offset by favourable variances in Salaries & Wages (\$3.148M), G&S Drugs (\$0.719M), G&S Motor Vehicles (\$0.711M) and G&S Other (\$1.724M).
- EMR Gateway meetings were held recently with Treasury.
- The court case concerning an incident in Camperdown involving a mental health patient was recently held. There were no recommendations to policies or procedures for the District.
- The Board requested the meetings dates for 2018 be circulated as soon as possible.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – August 2017

The Board received, read and noted the SLHD Board Reporting Pack for August 2017. The Board questioned the acute admitted NWAU summary for orthopaedics and were informed it was due to a coding issue.

9.1.2 Performance Indicators – August 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 – August 2017

The Board received, read and noted this report.

9.2 Project updates

9.2.1 Lifehouse

Dr Anderson provided a verbal report on matters pertaining to Lifehouse.

9.2.2 Macquarie International Private Hospital

Dr Anderson provided a verbal report on matters pertaining to Macquarie International Private Hospital.

9.3 Capital Works Report

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

9.4 Clinical Governance Report

The Board noted the Clinical Governance report for the period August – October 2017 is due in December 2017.

9.5 Audit and Risk Committee Report due October 2017

The Board received, read and noted this report for October 2017.

9.6 Facility Reports – August 2017

(i) Balmain Hospital

The Board received, read and noted the Balmain Hospital facility report. Balmain Hospital commences their ACHS survey tomorrow.

(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. Copies of the Concord Redevelopment Executive Steering Committee minutes are to be provided to the Board.

(v) Drug Health Services

The Board received, read and noted 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. Dr Anderson advised the Board that RPAH will undergo their ACHS survey on 30 October 2017. The eMM roll-out at RPAH went extremely well with no issues of concern.

(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 report due in October 2017 was not available. The Board discussed and recommended a brief be provided at the next meeting to update the Board on organ donation.

10. Matters for approval / resolution

10.1 Organisational Safety Improvement Matrix (OSIM) Post Workshop Summary

The Board adopted the recommendations for action contained in the brief.

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 11 September 2017.

11.2 Education and Research Committee

The Board received, read and noted the minutes of the meeting held 18 September 2017.

11.3 Communications Committee

The Board noted the next meeting is to be held on 23 October 2017.

11.4 Audit and Risk Committee

The Board noted the next meeting is to be held on 22 November 2017.

11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 22 September 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 meeting was held on 4 October 2017.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board noted the meeting was held on held on 11 October 2017.

12.2 Medical and Dental Appointments Advisory Committee

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

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board received, read and noted the minutes of the meeting held on 18 September 2017.

12.4 Surgical Demand Committee (bi-monthly)

The Board noted the meeting was held on 18 October 2017.

12.5 Revenue Enhancement Development Committee

The Board received, read and noted the minutes of the meeting held 27 September 2017.

12.6 NSW Health / SLHD Performance Review Meeting

The Board noted the minutes of the meeting held on 23 August 2017 were not available.

12.7 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting 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 12 September 2017. Dr Anderson advised the Board of the appointment of Mr David Gates, Director, Contracts and Procurement.

12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

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

12.10 Sydney Healthy and Active Living Steering Committee

The Board noted the meeting to be held on 25 September 2017 was cancelled.

13. Matters for noting

3.1 Brief and Reports Falls Incidents 2016/2017 and Pressure Injuries 2016/2017

The Board received, read and noted these reports.

13.2 Community Health Consumer Participation Action Plan 2017/2018

The Board received, read and noted the action plan.

13.3 Westconnex Stage 3 - SLHD Report and Comments

The Board received, read and noted this report.

13.4 Measurement for Quality Improvement for Board Members and Executives

The Board received, read and noted this correspondence.

13.5 Australia's new strategy for protecting crowded places from terrorism and related matters

The Board received, read and noted this correspondence. The Board requested an update on information concerning our disaster management plans and procedures.

13.6 Email re fining sellers of illegal tobacco

The Board received, read and noted this correspondence.

13.7 Brief - BioBank

The Board received, read and noted this correspondence.

14. Other Business

Nil to report

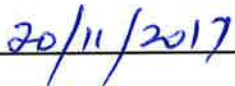
15. Next Meeting

The next meeting is to be held on Monday 20 November 2017 at 9.00am.

The meeting closed at 11.15am.



Chair



Date

Following the meeting the Board proceeded on a tour of the Bio Bank.

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

PERFORMANCE

The District remains at Performance level 0.

Safety and Quality

Mental Health Readmissions within 28 days were over target for the Month of June 2017 at 16.2%. This is consistent with the result from June 2016 but a 3.2% decrease in performance from May 2017.

The District remains under the benchmark (<2/10,000 bed days) for Staphylococcus Aureas Bloodstream Infections (SABSI) with a result of 1.1 per 10, 000 bed days for July 2017. In comparison to the result from the same period last year there has been an increase of 0.1 in the amount of SABSIs per 10,000 bed days.

There were 0 Central Line Associated Bloodstream (CLAB) infections during July 2017, which is consistent with the result achieved during the same period last year.

Workforce

Medical FTE

There was a decrease in the proportion of premium staff FTE to total FTE for Medical staff in the SLHD for August 2017 by 0.17% compared to the same time last year with a result of 8.53%.

Nursing FTE

There was an increase in the proportion of premium staff FTE to total FTE for nursing staff in the SLHD for August 2017 by 2.66% compared to the same time last year with a result of 11.74%.

Allied Health

The proportion of premium staff FTE to total FTE for SLHD allied health staff has decreased by 0.24% in August 2017 compared to August 2016 with a result of 1.72%.

Activity

There were 14, 710 attendances in the Emergency Department for August 2017 which is a 6.94% increase on the amount of attendances for August 2016.

There were 14, 889 separations in August 2017, an increase of 1.19% compared to August 2016.

YTD there has been a decrease of 0.60% separations in the Sydney Local Health District.

The District occupancy rate for August 2017 increased by 5.89% compared to the same month last year.

Emergency Treatment Performance

The Emergency Treatment Performance (ETP) performance for the District during the month of August 2017 was 68.06%. This result falls short of the District target for ETP of 81% and is a decrease in performance of 2.7% compared to the result obtained in August 2016 of 70.76%.

Transfer of Care

The Transfer of Care (TOC) for the District was 89.93% for August 2017 falling short of the 90% target rate. The TOC target (90%) was exceeded by Canterbury and Concord Hospital in August 2017 but RPA returned a result of 85.4% for August 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 72% for the month of August 2017.

Concord

Concord 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 69.91% for the month of August 2017.

RPA

RPA met triage category targets for categories 1, 4 and 5 in August 2017. Performance in category 2 was under the target of 80% with a result of 74.26% for the month of August 2017. Performance in category 3 was under the target of 75% with a result of 62.22% for the month of August 2017.

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 August 2017 in all categories which is consistent with the result achieved in August 2016.

NATIONAL FUNDING REFORM/ ACTIVITY BASED FUNDING

Acute Admitted Activity

ICD-10-AM version 10 was implemented from 1 July 2017; changes to the classification for the tenth edition were sourced from: updates to the World Health Organisation's ICD-10; revisions to the Medicare Benefits Schedule; Australian Consortium for Classification Development tasks, including public submissions and coding queries.

The State HIE Grouper is currently incorrectly grouping new codes related to version 10, as a result of mapping issues. The problem will continue to impact on the District's acute activity results until resolved in late October to early November.

Mental Health

Data quality and timely error correction is a current focus for the District's Mental Health Services, with the regular and close monitoring of the quality of data inputs and outputs. Supported by the provision of weekly error reports, the District Mental Health Services continue to work closely with the District Performance Unit to ensure a proactive approach to data correction, and a reduction in overall errors reported.

The impact of the new Australian Mental Health Care Classification continues to be analysed by both the District Mental Health Services and the District Performance Unit, with regular reporting and data received from the Ministry. The figures provided by the Ministry will continue to be monitored against local data to ensure that the performance of the Mental Health Services is in line with the activity targets set for the financial year.

Sub and non-acute (SNAP)

The District completed the 2016/17 financial year with a SNAP grouped rate of 99.86%, following the system close off at the end of August. This is the best result that the District has ever achieved, and is attributable to the sustained efforts of all facility coordinators in ensuring that data quality was of the highest standard.

Following the system close off, the District has achieved a 99.91% grouped rate. Although the 99.91% grouped rate was achieved after the close off date for ABF purposes, this result will be used to inform the costing result for the District, and has been submitted to the Commonwealth. The Performance Unit, together with facility SNAP coordinators will continue to focus on high quality data capture and reporting to ensure that a 100% grouped rate can be achieved in 2017/18.

Non-Admitted (NAP)

The classification and code standards for the reporting of non-admitted data in the EDWARD extract format have been published. SLHD will be developing its own extract but will continue to meet with the Ministry/CHIRP Project team a bi-monthly basis to ensure the extract is progressing in line with the requirements. IM&TD and the Performance Unit will also participate in the CHIRP teleconferences to keep up-to-date with the CHIRP team's progress across the other LHDs.

Clinical Costing Update

The costing team continue to work with key stakeholders across the District in the collection of data feeds to assist in the 21.2 costing, with the extraction of patient data and the preparation of feeder data nearing completion. The data loading process will commence next week, followed by the testing of linkages of feeders to patient data, with corrections made as necessary.

The Performance Unit has worked with the Transplant Retrieval Team to identify and allocate organ donation costs, as the costs associated with a single organ donation encounter can be recorded in up to five separate general ledgers. This work has been undertaken in conjunction with the ABF Taskforce and will be reported to the Independent Hospital Pricing Authority.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of August, the LHD has had its best result yet ending the month at 20.51%. This result came from a record number of private discharges totalling 2,963. This improvement resulted mainly from RPAH and Concord both completing the month at over 22%. RPAH broke its record at 22.19% and Concord had its 4th month in a row above 22%.

Single Room Utilisation

In the month of August, the LHD had 29% of all single rooms taken up by private patients (down from 31% in July). With an increased 10.2% of patients isolated for clinical alert, 36% of all private patients were accommodated in single rooms.

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 is dealing directly with health funds on a state-wide basis regarding issues also raised in SLHD.
- To ensure current accuracy is maintained, a notification process for changes in bed configurations in our Patient Administration System and in the NSW Revenue Portal is being developed.

PERFORMANCE AND REDESIGN UNIT

Innovations

- The next Pitch is scheduled for Friday 29 September 2017 at the Concord Medical Education Centre. Five innovative ideas will be presented by a variety of disciplines and facilities.
- Starting from the Pitch round held in March 2017, the winners have been asked to submit regular reports (3-month, 6-month and 12-month) on the progress of their projects which are fed to the PFCC Organisation committee.

Clinical Redesign: CHR Projects

- The '*POPI: PreOperative Iron deficiency assessment and management*' project (CHR 2017 - first intake), is currently in the 'implementation' phase. There are 4 key, interrelated solutions that are being implemented and appropriate stakeholders have been engaged in the process. The POPI team, spent additional time strengthening the project data that was sourced during diagnostics, which has had a very positive impact in the engagement of stakeholders.
- '*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 of the project although in terms of the reporting framework, they are in the process of developing the solution design report (previous project phase) for the CE's approval. The ACI is aware of the delay and is working closely with the team to assist.
- The 'Perioperative and sterilizing departments redesign' project team is currently in the 'diagnostic' phase of the project, collecting quantitative and qualitative data which will form the baseline of their 3 objectives. Ethics approval has been granted and the team is in the process of interviewing and surveying staff and patients. The official launch organised by the team was deemed very successful and while planning an official launch of their project to involve both departments.

Accelerating Implementation Methodology (AIM):

- The next AIM course is scheduled on 9th – 10th November 2017 and is nearing capacity.

CAPITAL PLANNING

Balmain

Level 5 has been handed over and is now occupied. Remediation works to existing structure on remaining levels is underway and will likely delay final completion.

Concord Repatriation General Hospital

Emergency Medical Unit

Works have commenced on the next phase of the Emergency Department refurbishment. Specifically isolation room, doctors write-up areas and associated support areas.

Canterbury

Emergency Consult Room

Works commenced August 2017. Construction and commissioning completed early September 2017.

Bridge Street, Camperdown

Internal Audit

Project started July. Completed and commissioned for occupation early September 2017.

Lifehouse

CT

CT delivered into CT room and installation and commissioning commenced. CT will be ready for use Tuesday 3/10/2017 with training to commence same day.

RPAH

Carpark

Carpark works progressing well. Completion is due end of February 2018 with commissioning expected mid to end March 2018.

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 month ended 31 August 2017 based on the District's budgeted NCoS. For the month of August 2017, Sydney Local Health District (SLHD) General Fund Expenditure was \$3.891M (2.68%) unfavourable to budget, YTD August 2017 GF Expenditure was \$2.825M (0.98%) unfavourable to budget. GF Revenue was \$0.590M (0.36%) unfavourable to budget for the month and \$1.676M (0.55%) unfavourable to YTD budget. For the YTD August 2017 the District's GF NCoS was \$4.501M 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 August 2017 GF Total Expenditure was \$3.891M (2.68%) unfavourable to budget, reflecting unfavourable results for Overtime (\$1.150M), Annual Leave Provision (\$2.496M), G&S Med and Surgical Supplies (\$1.811M), G&S Special Services (\$1.278M) and G&S Admin (\$4.924M) offset by favourable variances in Salaries & Wages (\$3.148M), G&S Drugs (\$0.719M), G&S Motor Vehicles (\$0.711M) and G&S Other (\$1.724M).
- YTD August 2017 GF Total Expenditure was \$2.825M (0.98%) unfavourable to budget. This result reflects unfavourable results for Overtime (\$1.933M), Annual Leave Provision (\$1.515M), G&S Med and Surgical Supplies (\$1.393M), G&S Special Services (\$2.783M) and RMR (\$1.452M) offset by favourable variances in G&S Drugs (\$1.619M), G&S Admin (\$2.015M) and G&S Other (\$2.177M).

Revenue

- GF Total Revenue was \$0.590M (0.78%) unfavourable to budget for the month of August 2017. The result for the month reflects unfavourable variances in User Charges (\$0.534M), Grants & Contributions (\$0.226M) and Rent Income (\$0.288M) offset by favourable variances in Patient Fees (\$0.267M), Conference & Training Receipts (\$0.193M) and Insurance Refunds (\$0.114M).
- YTD August 2017 GF Total Revenue was \$1.676M (0.55%) unfavourable to budget. The unfavourable YTD result reflects mainly unfavourable variance in User Charges (\$3.048M) offset by favourable variances in Patient Fees (\$1.175M) and Grants & Contribution (\$0.195M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$0.438M unfavourable to budget for the month of August 2017 and \$0.690M favourable to budget for the YTD August 2017. This YTD result reflects favourable budget variances for Expenditure (\$0.521M) and Revenue (\$0.169M).

CONSOLIDATED RESULT

For the period ended 31 August 2017 the consolidated year to date NCoS result for the General Fund and SP&T was \$3.811M unfavourable to budget. The result comprises unfavourable variances in Expenditure \$2.305M and Revenue \$1.507M.

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

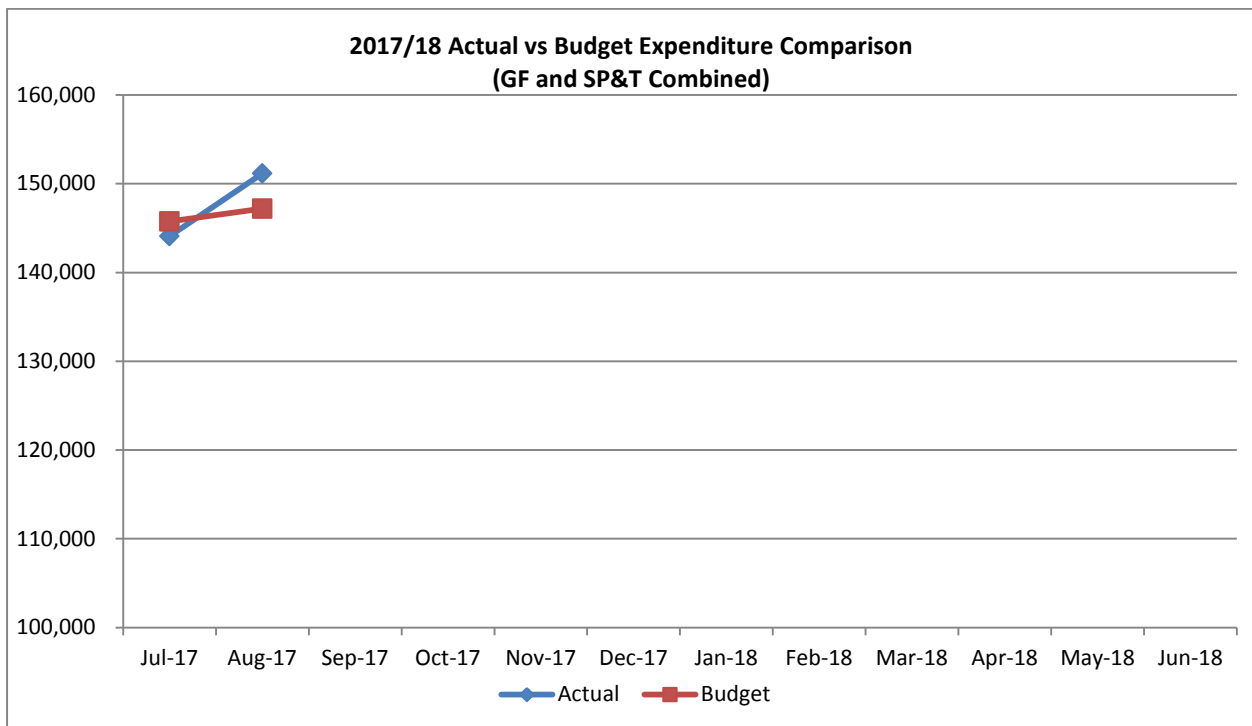
For the period ended 31 August 2017, SLHD recorded a Total Net Result of -\$24.230M (Note that Total Revenue was higher than Total Expenditure for YTD August 2017) which was \$3.937M (14%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for the YTD August 2017 was \$3.895M unfavourable to budget. The YTD Net Direct Operating Result reflects unfavourable budget variances in Expenditure (\$2.457M) and Revenue (\$1.437M).

For the month of August 2017 Total Direct Revenue was \$0.944M unfavourable to budget, comprising \$0.615M unfavourable variance for the General Fund and a \$0.329M unfavourable variance for the SP&T Fund. YTD Total Direct Revenue was \$1.437M unfavourable to budget, comprising \$1.676M unfavourable variance for the General Fund and a \$0.239M favourable variance for the SP&T Fund. The YTD result for the GF reflects unfavourable variances in User Charges (\$3.048M) offset by favourable variances in Patient Fees (\$1.175M) and Grants & Contributions (\$0.195M).

Total Direct Expenditure was \$4.854M unfavourable to budget for the month of August 2017, comprising \$4.620M unfavourable result for the General Fund and \$0.234M unfavourable result for the SP&T Fund. YTD Total Direct Expenditure was \$2.457M unfavourable to budget, comprising \$2.142M unfavourable variance for the General Fund and a \$0.316M unfavourable variance for the SP&T Fund. The YTD result for The GF reflects unfavourable variances in Overtime (\$1.933M), Salaries & Wages Oncosts (\$2.013M), G&S Direct Clinical Operating (\$3.184M). These results were offset by favourable results for G&S Corporate & Operational Admin (\$4.886M) and G&S Supporting Services & Utilities (\$0.437M).

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 August 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 August 2017.

The cash balance at 31 August 17 for the SLHD Operating bank account was \$6.031M and the Operating Cash book balance was \$6.096M.

CAPITAL WORKS – SMRS PROJECTS

The District's Full Year Capital works budget relating to SMRS Projects as of August 2017 is \$13.811M comprising \$4.138M of MoH funded and \$9.673M of locally funded projects. In August 2017, an additional budget of \$1.490M relating to Asset Refurbishment & Replacement was approved.

Actual expenditure as at YTD August 17 was \$1.182M. Out of the total amount of \$1.182M, an amount of \$0.766M relates to the Biobank project which is expected to be completed in September 2017 and \$0.401M relates to SLHD Aged Care/Rehab Network.

SYDNEY RESEARCH

Executive Director, Sydney Research

Adj Associate Professor Vicki Taylor commenced as the Executive Director, Sydney Research in August 2017. Adj Assoc Prof Taylor and Ms Lisa Daly have been meeting with leads from members of Sydney Research to discuss priorities for the Sydney Research program of work. Many of these meetings have also been attended by representatives from SLHD Planning to consult for the update of the SLHD Research Strategic Plan.

To date, meetings have been held with Prof Mathew Vadas; Prof Jenny Allison and Prof Andrew Baillie; Dr Lisa Horvath; Prof Garry Jennings; Prof Shaun Jackson and Prof Ben Freedman; Prof John Simes and Dr Vera Terry; Prof Laurent Rivory; Prof Michael Solomon, Dr Paul Bannon, Prof Jane Young and Ms Katie McBride; Prof Tim Lambert; Prof David Le Couter and Prof Victoria Cogger; and Prof Stephen Simpson.

Office for Health and Medical Research (OHMR) - TRGS

Expressions of Interest (EOIs) for the third round of the Translational Research Grant Scheme (TRGS) were submitted on 4 September 2017. SLHD submitted the following six projects, including one project supplementary to the original five as approved by Dr Antonio Penna.

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*

Conjoint Associate Professor John Worthington, *Procedural Outcomes in Stroke (POiSe)*

Sydney Health Partners (SHP)

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

Recruitment to the key positions of Chief Operating Officer and Executive Assistant will progress with SLHD Recruitment, facilitated by Sydney Research. The positions will be advertised in October.

A "Clinical Trials & Cohort Studies: Tips on How to Write a Competitive Research Grant Submission" workshop will be held at Westmead on 12 October. This may be viewed via videoconference.

The Sydney Health Partners' Annual Forum, to be held at RPA Hospital on Wednesday 18 October 2017. Mr Paul McClintock, Prof Garry Jennings and Dr Penna will speak at the event which will include a video message from Minister Greg Hunt.

An implementation science workshop, "Research Translation in a Complex Health System" will be hosted by the University of Sydney under the Sydney Health Partners Banner on 28 November 2017.

Other

The Sydney Research Council held the September meeting in the NSW Health Statewide Biobank. The Council provided positive feedback on the facility. Tours will continue to be scheduled in the Biobank to facilitate local engagement, ahead of and post- launch.

Members of Sydney Research and Capital Insight have met to reaffirm commitment and progress to the plans for the Sydney Research Facility. Key messages are being developed to ensure coordinated communication and messaging, in anticipation of potential advocacy opportunities.

The Sydney Research Team has joined the REGIS Implementation Committee.

@SydneyResearch currently has 77 followers on Twitter.

Health Pathways

Workgroups

One workgroups held in September to explore GP and AHP management and interventions for workers Compensation claims. The workgroup also served the purpose of allowing Care NSW to meet with General Practice as part of their new service build.

Next Workgroups planned include:

- Rheumatology/Lower Back Pain -1st November 2017
- Hand Trauma/Surgery – 6th November 2017
- Immunology - November 2017
- Wound Care

Pathways


Only a small amount of pathway content was finalised in September, but extensive preparation and finalisation is underway for sizeable releases in October 2017.

September 2017	
New Completes (Live)	2
Completed Periodic Review Cycle	15
Total Completed pathways on website	621
CURRENT WORK IN PROGRESS	
Currently Localising (from other HP regions)	93
New Pathways being developed	6
Live pathways currently being updated	5
Completed pathways undergoing Periodic Review	206

Usage of HealthPathways

Website usage continues to grow across a number of fronts, Sessions of use and users. The data for total and unique page views was normalised in mid-September to remove any page views associated with the CESP HN IP address. This move was taken to reduce the contamination of data by the Program's review process – which needs to interface with the live site more frequently than the normal development process.

	Sept 2017	August 2017	July 2017	Sept 2016
Sessions of use	4,631	4,575	3,901	2,756
Unique page views	14,182	14,361	12,196	9,588
Different users	1,004	980	899	692


Dr Teresa Anderson
Chief Executive
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