
Sydney Local Health District

Eightieth Meeting of the Board

Date: Monday 17 September 2018
Time: 9.00am – 11.00am
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
A/Professor Christine Giles, Member
Ms Ronwyn North, Member
Ms Joanna Khoo, Member
Dr Mary Haines, Member
Ms Frances O'Brien, Member
Dr Barry Catchlove, AM, Member
Mr David McLean, Member
Dr Tim Sinclair, Acting Chief Executive

Apologies

Dr Teresa Anderson, AM, Chief Executive
Professor Paul Torzillo AM, Member
Ms Susan Anderson, Member
Dr Alicja Smiech, Chair, Medical Staff Executive Council

In attendance

Dr Katherine Moore, Director Clinical Governance and Risk
Mr John O'Connor, Director of Finance, SLHD
Mr Paul Apps, Chair, Audit and Risk Committee (9.00am – 9.20am)
Mr Ray Bailey, NSW Audit Office (9.00am – 9.20am)
Mr Stephen Haldane, Capital Insight (9.35am -10.20am)
Mr Frank Tong, Capital Insight (9.35am -10.20am)
Mr Jon Gowdy, Director, Capital Assets, Property and Engineering (9.35am -10.20am)
Ms Nerida Bransby, Secretariat

2. Welcome and introductions

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

The Chair proceeded to agenda item 10.1.

Presentation: Asset Strategic Plan

Mr Haldane, Mr Tong and Mr Gowdy presented on SLHD Asset Strategic Plan including:

- The Asset Strategic Plan is the key asset planning and development document for the District
- Ten year planning horizon for 2018 – 2027
- Planning is based on the currently endorsed and draft clinical services plans and services strategies.
- 2018 – 2027 facility implications and proposed asset actions for each campus.
- Facility implications – where we are now and where we will be in ten years. The Board required further information to assist with understanding the full implications of the District's current and future health service needs.
- Top five capital investment priorities based on scoping documents.
- Other capital investment priorities.
- Priorities – RPAH Redevelopments
- RPAH future model of care / operating model.
- Expansion potential for main clinical streams.
- Canterbury Hospital Redevelopment and the types of services needed have shifted.
- Canterbury Hospital – operational model.
- Development and preferred masterplan model.
- Concord Hospital Stage 2 redevelopment zonal and preferred masterplan.
- Initiatives that have been needed and locally funded over four years.
- High priority maintenance.
- Next steps in planning.

The Board discussed the option of inviting representatives from Health Infrastructure to attend a future Board Meeting.

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.

There were no **new** conflicts of interests to declare or to be added to the Register at this meeting.

4. Confirmation of previous minutes

4.1 Minutes – 20 August 2018

The minutes of the Board meeting held on Monday 20 August 2018 were moved and seconded.

The Chair then signed the minutes.

The Board requested a report of the activity on the website.

4.2 CE Report – August 2018

The Chair declared that the CE Report for August 2018 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:

- A meeting with the Minister’s staff of Westconnex has been set.
- A draft document looking at Hospital Acquired Complications is still in consultation with the Clinical Directors.
- The requested changes were made to the Corporate Governance Statement prior to submission to the MoH. This agenda can be removed from the action list.
- The presentation on the Asset Strategic Plan was held today. This agenda can be removed from the action list.
- A tour of the RPAH Emergency Department/Short Stay Unit will proceed following this meeting. This agenda can be removed from the action list.

5.2 Correspondence – Key Performance Indicators and Risk Tolerance

The Board received, read and noted the information contained in the correspondence. An updated version is being developed to align with the Strategic Plan. This agenda item can be removed from the action list.

6. Patient Story

Dr Sinclair provided a verbal report on two patients who received treatment at Canterbury Hospital. Feedback from these two patient’s experience was very positive.

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 2018

The Board received and noted the Board Calendar for 2018.

8. Chairman's Report

Nil to report.

9. Chief Executive's report

The Board received, read and noted the Chief Executive's Report including:

- The District remains at Performance level zero, which is the highest level achievable.
- There were no Central Line Associated Bloodstream (CLAB) infections during June 2018. The CLAB infections discussed at the FRAPM meeting last Monday are believed to be acquired elsewhere. Investigations are ongoing.
- There was a 4.74% increase in the number of separations (14,632) for the month of July 2018 when compared to the July last year. In July the District's occupancy rate increased by 4.96%, to 92.93%, when compared to July 2017.
- The District continues to improve ETP performance, with a 0.75% increase in the month of July 2018.
- The District met target for Triage Categories 1, 2, 4 & 5 for the month of July 2018.
- There has been an increase of 247 surgical patients not ready for care for the month of July 2018, when compared to the same month last year. This can be due to patients having a holiday booked or other personal reasons.
- The District finished strong in relation to NWAU activity against target.
- The Evaluation for HealthPathways will be completed in early October 2018.
- For the month ended 31 July 2018 based on the District's budgeted NCoS. For the month of July 2018, Sydney Local Health District (SLHD) General Fund Expenditure was \$1.085M (0.71%) favourable to budget. GF Revenue was \$1.115M (0.68%) unfavourable to budget for the month. For the month ended 31 July 2018, the District's GF NCoS was \$0.030M unfavourable to budget.
- Medicare Ineligible patients are now on the National Forum Agenda following the Minister's announcement.
- The Diabetes Strategic Plan will be provided to the Board at the next meeting.
- Succession planning process for the Board and District Executive.
- Further information re the RCAs as discussed at the FRAPM meeting on 10 September 2018.
- Canterbury Hospital Accreditation Survey.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – July 2018

The Board received, read and noted the SLHD Board Reporting Pack for July 2018.

9.1.2 Selected Performance Indicators – July 2018

The Board noted this report was not available.

9.1.3 HealthPathways Dashboard Report – August 2018

The Board received, read and noted this report.

9.2 Project updates

9.2.1 Lifehouse

The Board noted there were no further updates to report.

9.2.2 Macquarie International Private Hospital

The Board noted there were no further updates to report.

9.3 Capital Works Report

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

9.4 Clinical Governance and Risk Reports

(i) Quarterly Report

The Board received, read and noted the quarterly report for the period May - July 2018.

9.5 Audit and Risk Committee Report – 22 June 2018 - 20 September 2018

The Board noted this report is due in October 2018.

9.6 Facility Reports – July 2018

(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, read and noted the Drug Health report.

(vi) Mental Health Services

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

(vii) Oral Health Services and Sydney Dental Hospital

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

(viii) Royal Prince Alfred Hospital

The Board received, read and noted the Royal Prince Alfred 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. A meeting is being held this Friday to discuss the delays in the availability of blood tests, results and blood products.

(xi) Public Health Unit

The Board received, read and noted the report.

(xii) Population Health

The Board received, read and noted the report.

(xiii) Health Equity Research and Development Unit (HERDU)

The Board received, read and noted the report.

(xiv) Croydon / Marrickville / Redfern Community Health

The Board received, read and noted the report.

(xv) Organ Donation for Transplant – Quarterly Report

The Board noted the next report for the period July 2018 - September 2018 is due in October 2018.

10. Matters for approval / resolution

10.1 Annual Financial Statements 2017/2018

The Board received, read and noted the Annual Financial Statements for 2017/2018.

Mr Apps advised the Board:

- The District has had another successful year with good relationships with Management.
- The position of a new internal auditor has been approved
- The Risk Framework is developing and improving
- Risks are being included in every day work functions
- Population Growth remains as risk number one for the District.
- Having Board Members on the Audit and Risk Committee is very positive.

Mr Bailey advised the Board:

- Unqualified Auditor's Report was issued on the District's 2018 financial statements.
- The fair value of the District's Land and Buildings was an audit focus area.
- Management reclassified Term Deposits between line items in the financial statements.
- The management letter contained two low risk findings for the HealthRoster and PBRC systems.

Following discussions, the Board endorsed the Annual Financial Statements of the 2017/2018 financial year.

The Chair thanked Mr Apps and Mr Bailey for attending the meeting.

The Board continued to discuss:

- The Workforce Education risks and change
- Workforce Strategic Plan
- Attraction and retention of staff
- Raising risks though standard committees is positive
- Competencies of middle managers
- Look at contemporary risk management for workforce education.

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 on 13 August 2018.

11.2 Education and Research Committee

The Board noted the next meeting is to be held on 16 July 2018.

11.3 Communications Committee

The Board received, read and noted the minutes of the meeting held on 4 September 2018.

11.4 Audit and Risk Committee

The Board received, read and the minutes of the meeting held on 4 September 2018.

11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 22 August 2018.

11.6 Health Care – Clinical Council

The Board received, read and noted the minutes of the meeting held on 22 August 2018.

11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 2 November 2018.

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

The Board noted the next meeting is to be held on 3 October 2018.

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board noted the next meeting is to be held on 25 September 2018.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board noted the next meeting is to be advised.

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 8 August 2018.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board received, read and noted the minutes of the meeting held on 20 August 2018.

12.4 Surgical Demand Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held on 15 August 2018.

12.5 Finance Leaders Forum (previously Revenue Enhancement Development Committee)

The Board received, read and noted the minutes of the meeting held on 22 August 2018.

12.6 NSW Health / SLHD Performance Review Meeting

The Board noted the meeting was held on 21 August 2018.

12.7 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting held on 28 August 2018.

12.8 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted the minutes of the meeting held on 14 August 2018.

12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the minutes of the meeting held on 22 August 2018 were not available.

12.10 Sydney Healthy and Active Living Steering Committee (bi-monthly)

The Board noted the meeting to be held on 27 August 2018 was cancelled.

12.11 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 25 July 2018 and 22 August 2018.

13. Matters for noting

13.1 Brief – AFM Online Project Status Update

The Board received, read and noted this correspondence.

13.2 ccCHiP Annual Report

The Board received, read and noted this correspondence.

13.3 Brief – Better Pathways to Housing (BPTH) Project Plan 2018/2019

The Board received, read and noted this correspondence.

13.4 Brief - ACHS Survey – Concord Hospital

The Board received, read and noted this correspondence.

14. Other Business

14.1 Communications Committee

The next Communications Committee meeting has been brought forward prior to the AGM being held. Any items to present at this meeting are to be provided to the Chair.

15. Next Meeting

The next meeting is to be held on Monday 15 October 2018 at 9.30am.

The meeting closed at 11.15am.

Following the meeting the Board proceeded on a tour of the Emergency Department / Short Stay Unit at RPAH.



Chair

15.10.2018

Date

Board Report

Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board September 2018

PERFORMANCE

According to the Ministry of Health Framework, the District remains at Performance level 0, which is the highest level achievable.

Safety and Quality

SLHD continues to maintain the quality and safety of our services.

The District continues to achieve the root cause analysis (RCA) target for July 2018, with all RCAs completed within 70 days.

Mental Health Readmissions within 28 days decreased for the month of May to 15.2%, from 17.1% in April 2018. There has been a slight increase (0.8%) in the percentage of Mental Health Readmissions within 28 Days as of YTD May 2018 in comparison to the same period last year.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation at 5.1% for both the month and YTD June, which is below the State rate of 5.9% for both month and YTD June. Unplanned Emergency Presentations (same ED within 48 hours) were 4.1% for both the month and YTD June, which is below the State rate of 4.7% for both month and YTD June.

The District remains under the benchmark (2.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI) with a result of 1.6 per 10,000 bed days for the month of June 2018. There were no Central Line Associated Bloodstream (CLAB) infections during June 2018. Ongoing education and training in infection control strategies and CLAB awareness discussions at ICU morbidity and mortality meetings continue.

The District has continued to have no incorrect procedures resulting in death or major loss of function.

Workforce

Premium staff usage for Medical and Allied Health decreased for July 2018 compared to the same period last year by -1.2 and 0.41 respectively. Premium nursing staff usage increased by 1.13 in July 2018 when compared to the same period in the previous year.

Activity

There was a 4.74% increase in the number of separations (14,632) for the month of July 2018 when compared to the July last year. In July the District's occupancy rate increased by 4.96%, to 92.93%, when compared to July 2017. The District has experienced a 0.50% decrease in case weighted attendances for the month of July, when compared to the same period in the previous year.

There were 13,585 attendances to the District's Emergency Departments in July 2018, representing a decrease of 2.61% when compared to the same month last year.

Emergency Treatment Performance (ETP) (formerly NEAT)

The District continues to improve ETP performance, with a 0.75% increase in the month of July 2018, to 67.64%, when compared to the same month in the previous year.

Transfer of Care

The transfer of care (TOC) target (90%) was met by all three emergency departments in July 2018, with 94.08% of all patients transferred from ambulance to our emergency departments in 30 minutes or less.

ED Triage

The District met target for Triage Categories 1, 2, 4 & 5 for the month of July 2018. Triage Category 3 performance was slightly under target at 70.35%, which is a 1.84% increase when compared to the same period in the previous year.

Elective Surgery

There was a slight (0.63%) increase in surgical admission in the month of July 2018 when compared to the same month last year. SLHD continues to perform at the top of the State for patient treatment timeframe targets for elective surgery, with all patients admitted within the clinically appropriate timeframe for their surgery. There has been an increase of 247 surgical patients not ready for care for the month of July 2018, when compared to the same month last year.

Community care and Hospital in the Home

The District has continued to manage its activity through investments in Sydney District Nursing who are managing over 1,000 patients per day in the community who would otherwise be in hospital. There has been a 25.4% increase in the number of Hospital in the Home overnight separations in July 2018 in comparison to July 2017. As previously indicated the District would have had significant difficulty in managing the demands of winter without the investments made by the District in these services.

NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

NWAU Activity against Target

The District continues to perform well in relation to NWAU activity against target, with a positive 2.80% variance to target YTD June.

Stream	Target	Actual	Variation	Variation %
Acute	157,553	159,919	2,874	1.82%
ED	22,616	22,553	-63	-0.28%
NAP	43,375	43,318	1,386	3.20%
SNAP	11,137	11,310	226	2.03%
MH Admit	15,528	16,561	1,078	6.94%
MH NAP	13,842	13,693	-149	-1.08%
Total	264,051	269,404	5,352	2.03%
Dental DWAU	63,423	81,019	17,596	27.70%
Dental NWAU#	8,234	10,518	2,284	27.74%
Total (NWAU)	272,285.22	279,921.76	7,637	2.80%

NWAU=589/4605*1.015*DWAU

The District is waiting on the Ministry to update the NWAU tables, for NWAU18, in Health Information Exchange. Once updated, the District will be able to update all STARS application and reporting for 2018/19.

Non-Admitted Patient (NAP) Activity

The District is now submitted both patient and summary level data via mLoad. While WebNAP will no longer be used for NAP data submission, the Ministry has acknowledged that LHDs will continue to utilise the system to check data quality prior to submission.

The Ministry is currently in the process of updating the State Data Mart with 2018/19 data and targets, including the introduction of Establishment Types State Weights and associated State Weighted Activity Units (SWAU).

Sub and Non-Acute Patient (SNAP) Activity

The District continues to perform well in relation to grouped SNAP episodes; with the District achieving 100% of all episodes grouped following the close off for the 2017/18 financial year.

Mental Health

Mental Health Services have made significant improvements in the reporting and capture of mental health non-admitted activity. The final 2017/18 full year result was negative 1% to target, which is a significant improvement on the negative 13% to target result of YTD September. Mental Health Services, with the support of the District Performance Unit, will continue to monitor and improve on the reporting and capture of mental health non-admitted activity for 2018/19. Additional strategies will be put into place to assist in this process, including the development of team specific activity targets.

Clinical Costing Update

The Performance Unit has commenced preparatory work for the full costing round R22.2. Financial data from the General Ledger has been extracted, mapped from Oracle codes to costing buckets, adjusted for negative expenses and reviewed and approved by Finance. Activity feeder data is being collated and quality assurance and reconciliation tests are currently being performed.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

SLHD REVENUE COMMITTEE

Private Health Insurance Usage

For the month of July 2018 SLHD recorded 19.67% of all patients discharged as privately insured.

Whilst there were an additional 50 (1.84%) patients who elected to use their private insurance compared to the same period last year there has been an increase of 612 (4.5%) in separations.

For the month ended July 2018 conversions for facilities as compared to the same period last year comprise of;

- Additional 54 private patients at RPAH
- Additional 40 private patients at Concord
- Reduction of 55 private patients at Canterbury
- Reduction of 6 private patients at IRO
- Additional 17 private patients at Balmain

Single Room Usage

For the month of July 2018 8.52% of patients were isolated as a result of clinical alert.

For the month 26% of all available single rooms were occupied by private patients and 37% of all private patients were accommodated in single rooms.

SLHD Revenue Committee

The SLHD Revenue Committee did not sit in July 2018.

PERFORMANCE AND REDESIGN UNIT / REDESIGN AND SERVICE IMPROVEMENT

Innovations

- The date of the next *Pitch* event has rescheduled to Friday 28 September from 4.00 – 6.00pm at the Kerry Packer Education Centre.

- A total of 16 applications were received for this round of the Pitch, with the following 5 applicants progressing to the live *Pitch* event:
 1. *Microsurgery for the Masses- A multidisciplinary approach to microsurgical education.* This project aims to incorporate a microsurgical training program at RPA across multiple disciplines.
 2. *Take on the #TheatreCapChallenge - Improve communication, teamwork and clinical outcomes with this simple initiative.* This project aims to improve theatre staff communication, teamwork and clinical outcomes by providing staff with hats that identify staff names and roles.
 3. *Assertive Outreach Team's new Young Men's.* This pitch aims to provide a social outlet for young men.
 4. *'Wake- Sense' - Awakening the senses of cognitively impaired patients on Wakefield Ward.* This pitch aims to create a safe and comfortable sensory area in the Wakefield Ward at Balmain Hospital where patients with a cognitive impairment can participate in activities.
 5. *Ortho Sonata.* This project aims to improve patient's surgical perioperative experience by offering musical or visual entertainment.

Clinical Redesign: CHR Projects

- The "A Joint Effort – Patient Centred Redesign in the Rheumatology Outpatient Services at RPA" Project (CHR 2018 – first intake) has recently received Ethics approval from the Research Ethics and Governance Office (RPAH Zone) (Protocol Number X018-0250) as well as Site Specific Authorisation (SSA). Data collection has commenced and will continue for the next 7 weeks. Negotiations have been had with the ACI to extend project timelines. The team were granted timeline extensions with a proposed graduation date in April 2019.
- The Sterilizing and Perioperative Clinical Redesign (CHR 2017 – third intake) project team is graduating from the University of Tasmania on 31 August 2018. The project implementation is being led by the team together with the Sterilizing manager and the Operating Theatres Nurse Manager.
- A new reporting pathway has been agreed upon to facilitate the successful progression of CHR projects beyond the pre-determined Graduation Day set by the Agency for Clinical Innovation. The CHR project teams are now expected to present a project evaluation to the PFCC Services working group. The interim checkpoints will be as follows:
 - 3 months post-graduation: verbal update to the SLHD Redesign Leader
 - 6 months post-graduation: written report to the SLHD Redesign Leader
 - 12 months post-graduation or when implementation is completed: presentation at the PFCC Services Working Group

Accelerating Implementation Methodology (AIM):

- The 3rd 2-Day AIM course for 2018 was held on 9-10 August 2018. Fifteen applicants completed the course. The next AIM training is scheduled on 8-9 November 2018.

HealthPathways

Workgroups

No Workgroups conducted due to the non-availability of PHN facilities ahead of the move to a single PHN office in Mascot on the 27 August 2018.

Workgroups scheduled:

A workgroup for Sleep Health is being organised for mid-September, workgroup to cover a wide range of issues relating to sleep health: Sleep apnoea and interventions, restless limb syndromes, medications and general sleep health advice.

Usage of HealthPathways

Provisional August (1–23) usage figures have exceeded those for the same period in both June and July 2018, though may not reach the levels of May 2018, which remains the highest recorded activity month since the program began. The program will be watching with interest the effect, if any, that the launch of the South Eastern Sydney HealthPathways program will have on usage following their launch in early September.

	August 1-23 2018	July 2018	May 2018	August 2017
Users	1,028	1,200	1,299	980
Sessions of use	4,288	5,455	6,022	4,575
Total Page Views	17,668	23,259	24,786	19,586
Unique Page Views	13,299	17,178	18,409	14,361

Platform Improvements

The program is now awaiting a commencement date, from Streamliners NZ, to begin the transformation of the current website to a new mobile friendly platform. The conversion to the new site will allow for easier accesses and browsing of the HPS website from phone and tablet devices, whilst also incorporating a more engaging experience to the desktop platform. Clinical and referral content will remain in the same format but with the added features for easier searching, scrolling and cross referencing etc. There will be an improved user experience for tables and charts. The migration will initially mean we run two 'live' sites from the same source, allowing for those on older web browsers to continue to use the current set up with the usual content updates.

Over the last eight months the program team has been undertaking all the base requirements in preparation for the migration to the new platform, such as adoption of the HealthPathways Style Guide and Health Provider Directory. All new and reviewed content for this period has also undergone transformation to the pending format.

FINANCIAL PERFORMANCE

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

GENERAL FUND (GF)

The 2018/19 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 July 2018 based on the District's budgeted NCoS. For the month of July 2018, Sydney Local Health District (SLHD) General Fund Expenditure was \$1.085M (0.71%) favourable to budget. GF Revenue was \$1.115M (0.68%) unfavourable to budget for the month. For the month ended 31 July 2018, the District's GF NCoS was \$0.030M unfavourable to budget.

The Chief Executive and the A/Executive Director of Finance are confident that the District will have an on budget NCoS result (excluding Doubtful Debt) for the 2018/19 financial year despite the continued challenges that are facing the District. To achieve the 2018/19 NCoS target the District will continue to maintain the good controls that it has in place and monitor performance on a daily basis. The major variances for the month were:

Expenditure

- For the month of July 2018 GF Total Expenditure was \$1.085M (0.71%) favourable to budget, reflecting favourable results for Annual Leave Provision (\$1.720M), RMR (\$1.222M), Grants (\$0.452M), Other Employee (\$0.110M), G&S Admin (\$0.339M), G&S Prosthetics (\$0.533M) and VMO Payments (\$0.081M) offset by unfavourable results in Salaries & Wages (\$0.971M), Overtime (\$0.367M), Superannuation (\$0.402M), G&S Drugs (\$0.157M), G&S Special Services (\$1.039M), G&S Medical & Surgical Supplies (\$0.578M).

Revenue

- GF Total Revenue was \$1.115M (0.68%) unfavourable to budget for the month of July 2018. The result for the month reflects unfavourable variances in Facility Fees (\$0.771M), High Cost Drugs (\$0.601M), User General Rendered Services (\$0.647M), and Grants & Contributions (\$0.272M) offset by favourable variances in Patient Fees (\$0.602M), Rent Income (\$0.327M) and Intra Health Hosted Services (\$0.547M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$0.484M favourable to budget for the month of July 2018. This result reflects an unfavourable budget variance for Expenditure (\$0.108M) and a favourable budget variance for Revenue (\$0.592M).

CONSOLIDATED RESULT

For the period ended 31 July 2018, the consolidated year to date NCoS result for the General Fund and SP&T was \$0.454M favourable to budget. The result comprises a favourable variance for Expenditure (\$0.977M) and an unfavourable variance in Revenue (\$0.522M).

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

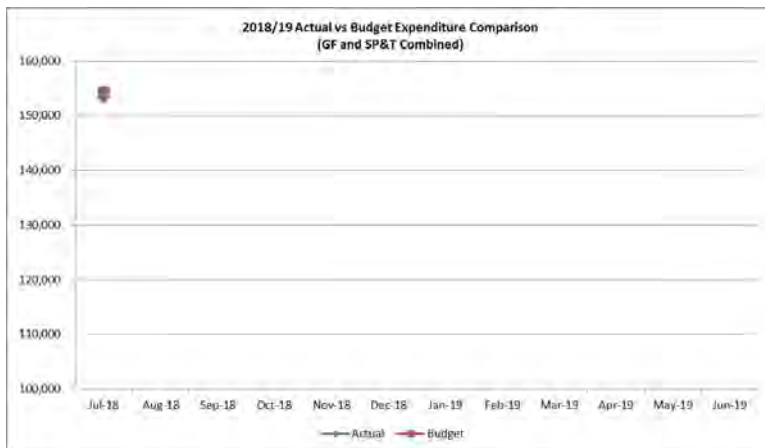
For the period ended 31 July 2018, SLHD recorded a Total Net Result of -\$21.045M (Note that Total Revenue was higher than Total Expenditure) which was \$0.286M (1%) favourable to budget. The Net Direct Operating Result (GF and SP&T) for the period was \$0.079M unfavourable to budget. The Net Direct Operating Result reflects a favourable Expenditure variance of \$0.361M offset by an unfavourable Revenue variance of \$0.440M

For the month of July 2018, Total Direct Revenue was \$0.440M unfavourable to budget, comprising \$1.047M unfavourable variance for the General Fund and \$0.608M favourable variance for the SP&T Fund. The GF reflects favourable results in Patient Fees and Other Income offset by unfavourable variances in User Charges and Grant Income

Total Direct Expenditure was \$0.361M favourable to budget for the month of July 2018, comprising favourable result for the SP&T Fund (\$0.498M) offset by unfavourable result for the General Fund (\$0.137M). The General Fund result reflects unfavourable variances in Salaries & Wages (\$0.971M), Overtime (\$0.367M) and Direct Clinical Operating (\$1.241M). These results were offset by favourable results for On-costs (\$1.428M), G&S Corporate & Operational Admin (\$0.339M), Grants & Subsidies (\$0.452M) and G&S Support Services (\$0.143M).

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 2018.

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 2018.

The cash balance at 31 July 18 for the SLHD Operating bank account was \$12.496M and the Operating Cash book balance was \$12.270M.

CAPITAL WORKS – SMRS PROJECTS

The District's Full Year Capital works budget relating to SMRS Projects as of July 2018 is \$9.660M comprising \$1.151M of MoH funded projects and \$8.509M of locally funded projects.

Actual expenditure as at the end of July 2018 was \$0.520M which was marginally below budget.

OTHER CAPITAL PROJECTS

As at the end of July 2018, the District has expended a total amount of \$0.060M on the project relating to Patient Billing and Tracking System. The total expenditure of \$0.060M was sourced from General Fund.

CAPITAL WORKS

RPA QEII Level 6 East Refurbishment

Door protection has been ordered and will be installed once delivered. As the ward will be operational the installation will be programmed around clinical requirements. The Unit is expected to be operational in early September.

RPA QEII Level 6 West – Orthopaedics

Administration office building works have been completed with joinery installed early June. Bathroom akril splash backs have now been installed. Defects inspection is now complete. The site has been cleaned and is ready for occupation.

RPA Building 63 – Level 5 Emergency Resus Bays

Demolition and wall framing have been completed. Medical gas, electrical and hydraulic rough-ins have commenced and orders placed for the new pendants.

RPA Building 75 – Level 4 Volunteers Relocation

Walls and wall settings have been completed. Flooring and painting has commenced and joinery is underway in the workshop.

RPA Building 77 Plant Room

Temporary relocation of existing services has occurred. Drawings have been revised by engineering and steel work orders have been placed. Mechanical and hydraulic documentation are being finalised.

RPA Building 63 - RPU

Concrete slab to undercroft has been completed and mechanical consultants have been engaged.

Balmain Sorrie Street – Boundary Fence – Car Park

Excavation works have been completed. Footings have been poured and brickworks are underway. New Plantings to occur early September 2018.

PLANNING

Royal Prince Alfred Hospital Clinical Services Strategy and Redevelopment

The Planning Unit has undertaken considerable work to prepare the draft RPA Clinical Services Strategy for the consideration of the Ministry of Health. The Strategy has revised beds and service forecasts based on new MoH tools and updated activity data.

The draft outcomes of this have been discussed at a workshop held between the District, Health Infrastructure NSW and the NSW Ministry of Health.

Planning Consistent with the SLHD Strategic Plan

A planning workshop has been organised for all SLHD General Managers to ensure the development of Facility Strategic plans that are consistent with the SLHD Strategic Plan. A template for these plans has been developed by the Planning Unit to ensure that each of these plans is consistent in layout, data and themes but has the capacity to reflect the institution's history, culture, services and approaches. Thus, Facility Strategic Plans will be revised, led by the relevant General Manager. It is expected that these plans will be completed by the end of the year. Similarly it is expected that Clinical Stream Position Papers will be refreshed by early 2019. Enabling plans will be revised as they fall due. The first of these, the SLHD Research Strategic Plan has now been completed and launched.

Urban Development

- A workshop was held with a consortium of developers, University of Sydney, Inner West Council (IWC), UTS and SLHD to discuss the proposed Biotechnology Hub, zoned by the Inner West Council, on Parramatta Road. The IWC will host a further workshop in September to derive a clearer strategic view of the nature of the biotechnology hub, which they will negotiate with proponents.
- Camperdown-Ultimo Collaboration Area Place Strategy has been drafted and the SLHD has commented on the draft. The Brookings Institute will provide a set of workshops as part of the planning to further develop the health, education and creative strategy.
- The NSW government has announced that a NSW Government taskforce, headed by Jobs for NSW chair Mr David Thodey, would be created to lead the design and development of the new technology and innovation precinct, stretching from Central to Eveleigh.
- The options for the Waterloo social housing estate master plan have been released for community and stakeholder input.

Youth Health and Wellbeing Plan

Further meetings have been held to organise the launch of the Youth Health and Wellbeing Plan, with Ministerial invitations being issued for a potential launch in early November.

RPA HealthOne (HO) East (Green Square)

Two sites are being explored in greater depth for the Green Square, RPA HealthOne East service.

A preliminary Business Case for Waterloo HealthOne has been prepared. Health Infrastructure has engaged a consultant to develop this document to a full Business case. This will be issued to UrbanGrowth NSW as an expression of interest for inclusion in the Waterloo Metro development.

A service plan for the Green Square Health “Pop-Up” has been finalised and issued to the RPA HealthOne East Steering Committee. The plan outlines the likely usage of the Pop-Up and the ambulatory requirements of the current population of Green Square.

The SLHD is writing to seek the support of each of the participating universities and the CESPAN for a Clinical Director position for the HealthOne.

The Planning Unit is completing the write-up of the second Waterloo Forum and is drafting the Waterloo Health and Wellbeing Plan which will articulate to the FACS-led Waterloo Human Services Framework and Plan.

Diabetes Strategic Plan

The Planning Unit is finalising the Diabetes Strategic Plan for the consideration of the SLHD Diabetes Steering Committee.

SYDNEY RESEARCH

Office for Health and Medical Research (OHMR) – Translational Research Grants Scheme (TRGS)

The fourth round of the TRGS was launched on 10 July 2018 and the total number of Expressions of Interest (EOIs) that can be submitted is again capped at *five* (5) per Host Organisation. 23 abridged expressions of interest were submitted with SLHD nominated as the Host Organisation. Five projects have been chosen by SLHD to complete the EOI for submission to OHMR:

- Rowena McMullan, *The ‘Gloves On’ trial*
- Brad de Vries, *Implementation of a new strategy for prevention of caesarean section following induction of labour*
- Annie Hepworth, *Implementation of the Safe Recovery program to improve care of older adults in NSW hospitals: local adaptation of a successful fall prevention program.*
- David Celermajer, *Optimising “Whole of Life Care” for patients living with Congenital Heart Disease*
- Michelle Barakat-Johnson, *A model for translating evidence-based incontinence-associated dermatitis guidelines into practice.*

Note: a sixth EOI is likely to be submitted (subject to OHMR approval) after a specific project approach after the SLHD internal closing date. This is an identified Ministry of Health initiative and as such will be submitted in addition to the projects reviewed by the selection panel.

The Big Idea

Winner of the inaugural Big Idea 2017, Prof Gerard Sutton presented to the Sydney Research Council on 31 July to update the Council on the progress the team was able to make using the pre-seed funding over the 12 months of the award.

It was announced on 8 August 2018 that Prof Sutton and his team have been awarded \$1.15 million in funding from the NSW Medical Devices Fund for the iFix System.

Sydney Health Partners (SHP)

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

- Representatives from Siemens visited SLHD on 6-7 August 2018 to progress discussions towards a potential partnership. A high level, non-binding MOU was signed, indicating the good will and intention of potential partners to explore the proposed partnership further.
- Of 68 applications that were submitted to SHP for Rapid Applied Research Translation grants, 33 projects nominated SLHD as the “lead” LHD. These have been reviewed and submitted to SHP and are currently being reviewed by the Executive Panel.
- Sydney Research represented SLHD at the AHRA Health Systems Improvement & Sustainability Face to Face Meeting on Tuesday 31 July 2018.

Campus Master Planning: Sydney Research Centre - Project Planning and Collaboration Steering Group

On 17 July 2018, a meeting was held with the Directors and Board Chairs of those MRIs who could be co-located in the Sydney Research building.

As a result of this meeting, the first *Sydney Research Centre - Project Planning and Collaboration Steering Group* has been scheduled for Thursday 30 August 2018. Invitees include representatives from SLHD, the University of Sydney, MRIs and Capital Insight.

This group will facilitate finalisation of spatial requirements, capital costings, a cost allocation model/ contributions and possible funding options for consideration and agreement. The first meeting will cover the proposed process/framework to advance the planning; review the sizing, space sharing principles and staging, within and of the facility, as assumed in the preliminary work to date; and enable the indicative scope and cost estimate to be confirmed for an imminent updated business case.

Other Activities

- Adj Assoc Prof Vicki Taylor, Executive Director, Sydney Research delivered a presentation to the SLHD Board on 20 August 2018 updating the Board on the portfolio including major initiatives and progress to date.
- Sydney Research have met with a number of stakeholders to progress initiatives including:
 - The IDE group (“IDE”), who are located in Leichhardt, and provide capabilities in a number of areas related to research commercialisation including entrepreneurship, strategy, investment, technology research and development, market research, design and engineering. It is expected IDE will participate in the Big Idea 2019 and be an important stakeholder for Sydney Research going forward.
 - The Centenary Institute to discuss potential consolidation of cell and gene therapy wet and dry research spaces.
 - Will Ryder regarding the Ministry of Health’s call for EOIs for *Funding for medical imaging supervisor/training positions (Medical Physics and Radiopharmaceutical Science)*.
 - A/Prof Martin Ng to discuss funding models for the RESTORE MI project.
 - Prof Robyn Ward to personally welcome her into her new position of Executive Dean, Faculty of Medicine and Health, University of Sydney and discuss areas of alignment and priority.
 - Prof Paul Young to discuss Ab Initio, the pharmaceutical manufacturing facility and company of which SLHD is a consortium member.
 - Prof Paul Young to discuss a proposed Bio-Design program. This program would see multidisciplinary teams formed to focus on clinical areas for intensive observation, with concurrent completion of an education course about the process of innovation.

Board Report



Health
Sydney
Local Health District

- Sydney Research attended a number of events representing Sydney Research and/or SLHD including the NSW Health Medical Devices Fund announcement (8 August), Healthcare Leaders Forum (21-22 August) and the Committee for Sydney report launch – Making the most of our talent: Sydney as a global hub (24 August).
- Sydney Research has secured CE approval to purchase advertising space in The Australian's Research Journal 2018. SLHD Strategic Relations and Communications have drafted the op-ed piece and have designed the accompanying photo spread. A photo shoot will be held during the Sydney Research Council meeting on 28 August 2018.
- @SydneyResearch currently has 457 followers on Twitter.

Dr Teresa Anderson AM

Chief Executive

Date: 17.9.18