
Sydney Local Health District

Ninety Ninth Meeting of the Board

Combined with the One Hundredth Meeting of the Finance Risk and Performance Management Committee

Date: Monday 18 May 2020
Time: 9.00am
Venue: Zoom Meeting
Chair: The Hon. Ron Phillips AO, Chair

1. Present and apologies

The Hon. Ron Phillips AO, Chair
Ms Victoria Weekes, Member
Dr Thomas Karplus, Member
Mr Richard Acheson, Member
Mr David McLean, Member
A/Professor Christine Giles, Member
Professor Paul Torzillo AM, Member
Ms Frances O'Brien, Member
Ms Susan Anderson, Member
Ms Ronwyn North, Member
Ms Kerry-Anne Hartman, Member
Dr Mary Haines, Member
Dr Teresa Anderson, AM, Chief Executive

Apologies

Nil

In attendance

Dr Alicja Smiech, Chair, Medical Staff Executive Council, SLHD
Ms Nerida Bransby, Secretariat
Dr Tim Sinclair, Executive Director of Operations, SLHD
Mr Ross Sinclair, Executive Director, Financial Operations, SLHD
Ms Lou-Anne Blunden, Executive Director Clinical Service Integration and Population Health, SLHD (9.00am - 10.30am)
Mr Richard Taggart, Chief Information Officer, SLHD (9.00am - 10.30am)
Ms Sharon Campbell, Director, Clinical Governance and Risk, FRAPM Member, SLHD (9.00am - 10.30am)
Ms Gina Finocchiaro, Executive Director, Workforce and Corporate Operations, FRAPM Member, SLHD (9.00am - 10.00am)
Ms Hannah Storey, A/Director, Performance Monitoring, Systems Improvement and Innovation, SLHD, FRAPM Member (9.00am - 10.30am)
Dr Margy Halliday, Risk Manager, FRAPM Member, SLHD (9.00am - 10.30am)

Adj Assoc Prof Vicki Taylor, Executive Director Sydney Research, SLHD (9.00am - 10.30am)
Ms Miranda Shaw, Acting General Manager, RPA Virtual Hospital, SLHD (9.00am - 10.30am)
Ms Jenny Thorncraft, Nurse Manager, COVID-19 Flying Squad, SLHD (9.00am - 10.30am)
Ms Sue McGrady, Nurse Manager, Covid-19 Operations, SLHD (9.00am - 10.30am)
Ms Paula Caffrey, Acting General Manager, Community Health, SLHD (9.00am - 10.30am)
Ms Natalie Shiel, Nurse Manager Clinical Practice, SLHD (9.00am - 10.30am)
Dr Pam Garrett, Director of Planning, SLHD (9.00am - 10.30am)
Ms Lisa Parcsi, Director Integration and Partnerships, SLHD (9.00am - 10.30am)
Mr Paul McClenaghan, Manager, Community and Partnerships, Mental Health Services, SLHD (9.00am - 10.30am)
Mr Sven Nilssen, Disaster Manager, SLHD (9.00am - 10.30am)
Mr Jay Jiang, Associate Director, Operations, SLHD (9.00am - 10.30am)
Ms Karinya Bellea, Trainee, GHMP, SLHD (9.00am - 10.30am)
Ms Michaela Christy, Trainee, GHMP, SLHD (9.00am - 10.30am)

2. Welcome and introductions

The Chair welcomed members and guests to the ninety ninth meeting of the Sydney Local Health District (SLHD) Board combined with the one hundredth meeting of the Finance, Risk and Performance Management Committee via zoom.

3. Declaration / Removal of conflicts of interest

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

The Chair advised the Board that the information on IVF contained in the Chief Executive's Report was not associated to his role of Director of IVF at Westmead Hospital therefore remained for the discussions.

There were no other **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 April 2020

The minutes of the Board meeting held on Monday 20 April 2020 were moved and seconded with the following amendment:

Dr Mary Haines, Member was in attendance.

As the Chair was off site for the meeting, the minutes will be forwarded via email to the Chair for signing.

4.2 CE Report – April 2020

The Chair declared that the CE Report for April 2020 was ready for publication.

Presentations:

1. RPA Virtual Hospital

Ms Shaw presented on the RPA Virtual Hospital including:

- Rapid response to COVID-19
- Virtual Health Care connecting clinicians to patients to deliver healthcare remotely
- Primary goals and technology considerations
- Current technology
- Virtual monitoring
- Determine level of risk of COVID-19 patients
- Patient activity – admission and discharges data and geographical distribution
- Feedback from patients
- Lesson learnt
- Media

2. SLHD Flying Squads

Ms Thorncraft and Ms Shiel presented on the SLHD Flying Squads including:

- Who is in the team?
- Who do we collaborate with?
- Why did it start?
- Where did it start?
- What have we done?
- Where we have been including cruise ships, airport, headquarters, hospital accommodation and in the community
- Questions

3. SLHD COVID-19 Testing Drive Through

Ms Caffrey and Ms McGrady presented on the COVID-19 Testing Drive Throughs including:

- Background
- Site requirements
- Set-up requirements
- Staff requirements
- Standard operating procedures
- Communications
- Expanding the service
- Drive through presentations
- Learnings

4. **Summer Hill Drive Through Testing Clinic**

Ms Caffrey reported on the Summer Hill Drive Through Testing Clinic including:

- Set-up
- Average number of daily swabs data
- Average number of staff managed by Community Health
- Amazing support from the SLHD Emergency Operations Centre Team, SLHD Information, Communications and Technology Team, Tiger Teams and the Strategic Relations and Communications Team
- Reflections

5. **“We are Keeping You Safe” An integrated strategy for supporting vulnerable and homeless communities during the COVID-19 Pandemic.**

Dr Garrett, Ms Parcsi and Mr McClenaghan presented on “We are Keeping You Safe” including:

- Our goals for people sleeping rough, living in boarding houses and vulnerable populations
- 2020-2023 Inter-Sectoral Homelessness Health Plan
- People experiencing homelessness data
- Heat map of wellness clinics, boarding houses and social housing
- Operation planning
- Our partnerships
- Creation of new teams
- Creation of a new model of care
- Outcomes
- Learnings
- Thoughts about what next
- Next steps – strategic directions
- Photo gallery

Following the presentations the Board discussed:

- The importance of maintaining the testing in the community
- Request for data on the number of people tested and the number of positive results as at 14 May 2020 includes:
 - Total people swabbed = 29, 685
 - Total swabs completed = 33,183
 - Total people positive = 300
 - Total positive swabs = 369
 - No of staff tested at Drive Through = 795
 - The Board noted that people may be swabbed more than once and may receive more than one positive swab.
 - The Board noted that this data is only inclusive of the people who have a swab ordered in the eMR – swabs completed at the airport are processed through SESLHD and are not included in the above data.

Minutes

The Chair thanked everyone for the presentations and for attending the meeting.

The Chair and the Board discussed the outstanding performance of the District staff and offered their congratulations to all including:

- Proved deep understanding of the pandemic situation
- Actions developed quickly with care and understanding
- Impressive generosity to the vulnerable
- Ability to develop teams and collaboration with internal and external stakeholders
- Staff are efficient, caring and generous
- The drawing of the skills and expertise of all staff.

5. Matters arising from the previous minutes

5.1 Action sheet

The Board discussed this agenda item briefly and agreed to remove the action items that have been resolved.

6. Patient Story

The Chief Executive provided a verbal report of two patients at Concord Hospital and a patient that was a crew member of the Ruby Princess.

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 2020

The Board received and noted the Board Calendar for 2020.

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 0, which is the highest level achievable.

Minutes

- Mental Health Readmissions within 28 days have increased for the month of January to 16.3%, from a December result of 13.7%. YTD January 2020, there has been a slight decrease in the percentage of Mental Health Readmissions at 15.9%, when compared to 18.1% for the same period in the previous year. The District continues to focus on strategies to improve mental health performance.
- The District continues to focus on strategies to ensure our workforce has the appropriate skill mix and levels to meet demand. Premium staff usage has decreased for Medical and Nursing for March 2020 when compared to the same period last year by -1.07 and -2.81 respectively. Premium staff usage has increased for Allied Health for March 2020 compared to the same period last year by 0.18.
- There were 20,278 attendances to the District’s Emergency Departments in March 2020, which is an increase from 15,056 when compared to the same month last year. The increase is associated with the District’s establishment of COVID Clinics, which were initially captured through the Emergency Department. YTD March Emergency Department attendances have increased 7.92% in comparison to the same period last year. YTD March case weighted attendances have increased by 5.31%, when compared to the previous year.
- The District met the target for all Triage Categories 1, 2, 3, 4 and 5 for the month of March.
- There were 27 more emergency surgeries performed in the month of March 2020 when compared to the same month last year, representing a 2.33% increase. YTD March emergency surgery has increased by 857 cases (8.51%) across the District.
- The District has continued to manage its activity through investments in Sydney District Nursing who continue to manage over 1,000 patients per day in the community who would otherwise be in hospital. There has been a 2.4% increase in the number of Hospital in the Home overnight separations in March in comparison to the same month last year, again reflecting the increase in activity across the District.
- The information on the RPAH IVF Project summary was noted.
- The information on trialing an electronic ICU model of care was noted.
- For the month of March 2020, 16.44% (2,061 separations) of all patients discharged by SLHD facilities were classified as privately insured. This is one of the lowest rates experienced by the District and reflects the decrease in elective surgery associated with COVID-19.
- The District Performance Unit is working with Strategic Relations and Communications to plan for a Mega Virtual Pitch event to be held at the end of June 2020.
- The Chief Executive and the Executive Director of Finance have forecasted an \$81M unfavourability to NCoS Budget (excluding the impact of Doubtful Debts) for 2019/20. This is on the basis of full occupancy of ICUs associated with COVID-19. This will be reviewed monthly based on actual activity. The Board discussed and agreed to do deep dive presentation into the finances at the next Finance, Risk and Performance Management Committee meeting to ensure it is measured and monitored correctly.
- The information on Research was noted.
- The feedback received from staff to celebrate Nurses’ Day virtually was very positive. A big thank you to the Strategic Relations and Communications Team for their assistance.

The Board noted the development of new ways of doing business the new models of care, which will service the District and its community well into the future. The Board also noted the extent to which the District had ensured that all of its community is well served during this difficult time.

Minutes

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – March 2020

The Board received, read and noted the SLHD Board Reporting Pack for March 2020.

9.1.2 Selected Performance Indicators – March 2020.

The Board noted this report was not available.

9.1.3 HealthPathways Dashboard Report

The Board received, read and noted this report.

9.1.4 MoH Board Report for the SLHD – October - December 2019

The Board received, read and noted this report for the period October - December 2019.

9.2 Project updates

9.2.1 Lifehouse

The Board received, read and noted the report.

9.2.2 Macquarie International Private Hospital

The Board received, read and noted the report.

9.3 Capital Works Report

The Board received, read and noted the Capital Works report. It was noted that the Engineering Department have been remarkable in a number of capital works projects to repurpose existing facilities through March 2020 as a result of SLHD's COVID-19 response.

9.4 Clinical Governance and Risk Reports

(i) Quarterly Report

The Board noted the report for the period January – March 2020 is due in June 2020.

(ii) Privacy

The Board received and read this report.

(iii) SLHD Risk Register

The Board noted this report is due in June 2020.

9.5 Audit and Risk Committee Report – Period 16 March – 5 June 2020

The Board noted this report is due in July 2020.

9.6 Facility Reports – March 2020

(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 Services 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 Services 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) Population Health

The Board received, read and noted the report.

(ix) Royal Prince Alfred Hospital

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

(x) RPA Virtual Hospital

The Board received, read and noted the RPA Virtual Hospital report.

(xi) Tresillian

The Board received, read and noted the Tresillian report.

(xii) Lifehouse

The Board received, read and noted the Lifehouse report.

(xiii) Public Health Unit

The Board received, read and noted this report.

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

The Board received, read and noted this report.

(xv) Croydon / Marrickville / Redfern Community Health

The Board received, read and noted this report.

10. Matters for approval / resolution

Nil to report

11. Board Committee reports / minutes

11.1 Finance, Risk and Performance Management Committee

Motion: A motion was moved that the Finance, Risk and Performance Management Committee Members received, read and noted the papers for the One Hundredth Meeting.

11.2 Education and Research Committee

The Board noted the meeting to be held on 18 May 2020 was cancelled. The Chair, A/Professor Giles, advised the Board that she has been in discussions with Executive Director of Research, SLHD about the SLHD priorities, its response to grants and its focus on COVID-19 research efforts.

11.3 Communications Committee

The Board noted the next meeting is to be held on 2 June 2020.

11.4 Audit and Risk Committee

The Board received, read and noted the minutes of the meeting held on 17 April 2020.

11.5 Health Care – Clinical Council

The Board noted the next meeting is to be held on 27 May 2020.

Minutes

11.6 Health Care – Clinical Quality Council

The Board noted the meeting held on 22 April 2020 was cancelled.

11.7 Medical Staff Executive Council

The Board noted the meeting to be held on 1 May 2020 was cancelled.

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

The Board noted the next meeting is to be held on 3 June 2020.

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board noted the next meeting is to be held on 26 May 2020.

11.10 Organ Donation for Transplant – Quarterly Report (January 2020 – March 2020)

The Board received, read and noted this report for the period January 2020 – March 2020.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board noted these meetings are temporarily suspended.

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 10 March 2020.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board noted the meeting to be held on 16 April 2020 was cancelled.

12.4 Surgical Demand Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held on 15 April 2020.

12.5 Finance Leaders Forum (previously Revenue Enhancement Development Committee)

The Board received, read and noted the minutes of the meeting held on 15 April 2020.

12.6 NSW Health / SLHD Performance Review Meeting

The Board received, read and noted the minutes of the meeting held on 11 February 2020.

12.7 Organ Donation for Transplantation

The Board noted the meeting to be held on 24 March 2020 was cancelled.

12.8 Major Procurement, Assets and Imaging Steering Committee

The Board noted the meeting held on 14 April 2020 was cancelled.

12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the meeting to be held 21 April 2020 was cancelled.

12.10 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 15 April 2020.

12.11 Sydney Healthy Eating and Active Living Committee (SHEAL) (bi-monthly)

The Board noted the next meeting is to be held on 4 June 2020.

12.12 Minutes of the District Security Co-ordination Committee

The Board noted the meeting was held on 13 May 2020.

13. Matters for noting

13.1 Report on Medication Safety

The Board received, read and noted this correspondence. The Board requested information from Mental Health Services and Sydney Dental Hospital which was omitted from the report.

13.2 Brief - Support for Older Residents during COVID-19 Pandemic

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 15 June 2020 at 9.00am.

The meeting closed at 11.40am.



Chair

24 June 2020

Date

Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board May 2020

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.

There were no RCAs for the month of March.

Mental Health Readmissions within 28 days have increased for the month of January to 16.3%, from a December result of 13.7%. YTD January 2020, there has been a slight decrease in the percentage of Mental Health Readmissions at 15.9%, when compared to 18.1% for the same period in the previous year. The District continues to focus on strategies to improve mental health performance.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation at 5.1% for the month of February and 5.4% YTD February 2020, which is below the State rate of 6.0% for the month and 6.1% YTD February 2020. Unplanned Emergency Representations (same ED within 48 hours) were 2.7% for the month of March and 4.2% YTD March 2020, which is below the State rate of 4.4% for the month of March and below the State rate of 4.8% YTD March 2020.

The District remains below the benchmark (2.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI) with a result of 0.6 per 10,000 bed days for the month of February 2020. There was 1 Central Line Associated Bloodstream (CLAB) infection during February 2020. Ongoing education and training in infection control strategies and CLAB awareness discussions at ICU morbidity and mortality meetings continue.

The District is performing at or better than the target for 10 of the 14 reported Hospital Acquired Complications (HACs) for the 12 month period February 19 - January 2020. The remaining 4 HACs are performing within the acceptable tolerance range. Hospital Acquired Renal Failure has a rate of 2.9 per 10,000 episodes, which is slightly above the target of 2.7. 3rd and 4th degree perineal tear has a rate of 409.7 per 10,000 episodes, which is above the target rate of 382.9 per 10,000 episodes. Hospital Acquired Neonatal Birth Trauma has a rate of 76.6 per 10,000 episodes, which is slightly above the target rate of 65.6 per 10,000 episodes. Hospital Acquired Medication Complications has a rate of 32.1 per 10,000 episodes, which is slightly above the target rate of 31.3 per 10,000 episodes. Work is continuing to address these four HACs.

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

Workforce

The District continues to focus on strategies to ensure our workforce has the appropriate skill mix and levels to meet demand. Premium staff usage has decreased for Medical and Nursing for March 2020 when compared to the same period last year by -1.07 and -2.81 respectively. Premium staff usage has increased for Allied Health for March 2020 compared to the same period last year by 0.18.

SLHD facilities continue to meet both nursing hours per patient bed day and birth-rate plus as per Award. The strategies to ensure compliance requires significant monitoring and mobility of resources.

Activity

There was a decrease of 13.91% in the number of separations (13,068) for the month of March 2020 when compared to March last year. This is consistent with the decrease in elective surgery and reduced inpatient activity associated with COVID-19. YTD separations have decreased slightly across the District by 1.14% in comparison to last year. In March 2020, the District's occupancy rate decreased by 9.16%, to 81.33% when compared to the 90.49% in March 2019. Again this was a deliberate strategy to prepare for COVID-19 by reducing elective surgery.

There were 20,278 attendances to the District's Emergency Departments in March 2020, which is an increase from 15,056 when compared to the same month last year. The increase is associated with the District's establishment of COVID Clinics, which were initially captured through the Emergency Department. YTD March Emergency Department attendances have increased 7.92% in comparison to the same period last year. YTD March case weighted attendances have increased by 5.31%, when compared to the previous year.

Emergency Treatment Performance (ETP) (formerly NEAT)

The District continues to work on ETP performance. There was a 8.57% increase in the month of March 2020, to 77.9%, when compared to the same month in the previous year. YTD there has been a 0.5% increase in ETP to 69.6% when compared to the same period in the previous year. Despite the significant activity, 7,744 additional patients have been admitted, referred or discharged within 4 hours of presentation YTD March, when compared to the same period in the previous year.

Transfer of Care

The District was slightly under the transfer of care (TOC) target (90%) in March 2020, with 89.7% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. Given the significant increase in demand associate with managing COVID-19 activity, it is very positive that the District is maintaining its performance on this indicator.

ED Triage

The District met target for all Triage Categories 1, 2, 3, 4 and 5 for the month of March.

Elective Surgery

There were 457 less elective surgeries performed in March 2020 when compared to the same period in the previous year, representing a decrease of 18.20%. The decrease is associated with the Government's requirement to cease all non essential surgery, as part of the national response to COVID-19. YTD March the number of elective surgeries performed has increased by 557 (2.69%) when compared to the same period last year. The District's strategy of increasing elective surgery in preparation to manage this years winter activity has provided the District with a buffer for COVID-19.

SLHD continues to perform at the top of the State for patient treatment timeframe targets for elective surgery achieving 000, with all patients admitted within the clinically appropriate timeframe for their surgery. YTD March there has been a 14.99% decrease in surgical patients not ready for care, when compared to the same period last year.

Emergency Surgery

There were 27 more emergency surgeries performed in the month of March 2020 when compared to the same month last year, representing a 2.33% increase. YTD March emergency surgery has increased by 857 cases (8.51%) across the District.

Community care and Hospital in the Home

The District has continued to manage its activity through investments in Sydney District Nursing who continue to manage over 1,000 patients per day in the community who would otherwise be in hospital. There has been a 2.4% increase in the number of Hospital in the Home overnight separations in March in comparison to the same month last year, again reflecting the increase in activity across the District.

RPA

IVF Project Summary – May 2020

SLHD was successful in securing funding for an expansion of the RPA Hospital Fertility Service, as part of a NSW Government initiative to improve access to IVF Services.

SLHD has been granted a total of \$0.5M in capital funding and \$3.92M in budget supplementations over 4 years from the NSW Ministry of Health, for the delivery of low cost IVF treatment services at the Fertility Unit, RPA Hospital.

SLHD will use this project funding to ensure the RPA Fertility Unit delivers lower cost IVF treatment services to 1,700 women over 4 years. This service expansion will be delivered in collaboration with Genea Limited.

Implementation to date has focussed on the following:

- a) Recruitment to additional nursing and administrative positions (with further medical and nursing recruitment to occur in subsequent FYs)
- b) Planning for capital works to increase the capacity of RPA Fertility Unit (due to commence in May 2020)
- c) Fixtures, fittings and equipment procurement to accommodate planned increase in service provision
- d) Review of models of care and referral pathways to increase outreach, particularly to women living in rural and regional areas and/or disadvantaged groups

eICU

SLHD is working towards trialling an electronic ICU model of care. An eICU is a form of telemedicine that provides an additional layer of critical service and allows for remote surveillance and continuous monitor of multiple critically ill patients remotely. The basic service model is a hub and spoke model where nursing and medical staff within the care centre provide additional guidance and support to lower service level delimitation ICU services to assist in the management of appropriate patients in their home district.

The project team led by the Executive Director of Operations within SLHD aims to collaborative with Western NSW Local Health District and Far West NSW Local Health District to trial an e-ICU across Canterbury, Broken Hill, Bathurst, Orange and Dubbo Hospitals. The first eICU Governance Committee met in April 2020 which defined the e-ICU service, scope of the project and working towards a project initiation plan.

CAR T cell therapy

Chimeric Antigen Receptor (CAR) T-cell Therapy is a type of immunotherapy that alters T-cells to directly and precisely target cancer cells. The Therapeutic Goods Administration (TGA) has approved Novartis' CAR-T product Kymriah® (tisagenlecleucel, formerly CTL019) for the treatment of paediatric and young adolescent ALL and DLBL.

RPA Hospital is one of the 2 designated NSW sites for CAR-T therapy, but is the only NSW site that is presently ready for performing Kymriah treatment. RPA received its first patient referral for the treatment of ALL in April 2020 and the District continues to explore options for DLBL treatment at RPA.

Institute of Precision Medicine and Bioinformatics (IPM&B)

Professor Ronald Trent, Head of Medical Genomics at RPA has been formally appointed as the inaugural Clinical Director of the IPM&B. Unfortunately due to the COVID-19 response, the official launch of the institute was postponed in March 2020. The Institute was formed to foster research, collaboration and development on genomic medicine within the SLHD recognising the significant growth in this field so far and into the future. The focus for IPM&B in 2020 will be genomic medicine but there are aspects of proteomics and metabolomics that are emerging from research work that will soon impact directly on patient care. IPM&B will provide a home for staff who work across NSW Health Pathology and the University of Sydney and allow them to interface between with clinical care.

CRGH

SLHD Electronic Referral Project

Electronic referrals from General Practic will be made available to Ambulatory Care and Outpatient Services at Concord Hospital. In collaboration with the Central and Eastern Sydney PHB, SLHD is enabling local GPs to refer electronically to SLHD Ambulatory Care services via HealthLink Smartforms and the HealthLink referral management system (RMS lite).

Concord Hospital has been chosen as the first all of service facility to be e-Referral enabled. The introduction of secure electronic referral from General Practice into our services is a positive step towards an integrated referral and scheduling process.

Concord Radiation Oncology Tender Process

SLHD is in the process of conducting a tender for third-party Radiation Oncology Services to be provided within Concord Cancer Centre of the \$341.2 million redevelopment of Concord Hospital. SLHD has commenced negotiations with the Preferred Tenderer, with contract close scheduled for the end of July 2020. NSW Ministry of Health, Minter Elison, Capital Insight and PWC continue to assist SLHD during the procurement process.

NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

NWAU Activity against Target

The District continues to perform well in relation to the NWAU activity against target, with a -1.10% variance to target YTD March, excluding Dental. The cessation of non essential surgery and subsequent reduction in inpatient activity will impact on the District's NWAU generation over the coming months.

Stream	Target	Actual	Variation	Variation %
Acute*	123,750	120,766	- 2,985	-2.41%
ED	17,863	18,349	486	2.72%
NAP**	36,056	35,941	-115	-0.32%
SNAP***	9,445	9,323	-122	-1.29%
MH Admit	13,140	13,897	757	5.76%
MH NAP****	7,090	6,795	-295	-4.16%

Board Report



Total	207,344	205,071	-2,273	-1.10%
Dental DWAU	45,228	55,761	10,533	23.29%
Dental NWAU#	5,679	7,001	1,323	23.29%
Total (NWAU)	213,023	212,072	-951	-0.45%

* 8 uncoded episodes

** Additional NAP data still being loaded

*** 83 ungrouped episodes

**** YTD February

NWAU=589/4691*DWAU

Clinical Costing

Requirements for patient costing information has continued to evolve along with the COVID-19 pandemic. As previously advised Round 24.1 of the DNR was ceased by the Ministry, however consideration is now being given to the utilisation of this Round to set the 2020-21 NSW State Price. The District Performance Unit is now working towards making a submission.

The District along with Western Sydney Local Health District are also undertaking detailed cost analysis of COVID-19 and all associated encounters, particularly inpatient encounters, to assist in determining the veracity of the National Partnership Agreement payment rates. The Ministry is assisting both Districts through this process with the first COVID costing submission due by end May.

Non Admitted (NAP)

Significant work has been undertaken by ICT Services to ensure all clinics are appropriately set up to enable appointments to be provided via telehealth. Data on the increase in telehealth services will be provided in next months report, following the reload of the NAP activity data.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of March 2020, 16.44% (2,061 separations) of all patients discharged by SLHD facilities were classified as privately insured. This is one of the lowest rates experienced by the District and reflects the decrease in elective surgery associated with COVID-19.

There was a decrease of 608 (22.78%) patients who elected to use their private insurance compared to the same period last year and a decrease of 234 (10.19%) in total separations from previous month.

For the month ended March 2020 conversions for facilities as compared to the same period last year were:

- RPAH – a decrease of 102 (14.43%) private patients.
- Concord – a decrease of 201 (18.64%) private patients.
- Canterbury Hospital – a decrease of 92 (49.46%) private patients.
- IRO – an increase of 1 (3.85%) private patient.
- Balmain Hospital – an increase of 4 (40.00%) private patients.

Single Room Usage

For the month of March 2020, 10.31% of patients were flagged as infection control across the District.

For the month, 20% of all available single rooms were occupied by private patients and 40% of all private patients were accommodated in single rooms.

SLHD Strategic Revenue Network

Key notes:

- SLHD Strategic Revenue Committee has been postponed to May 2020.
- Clinician Billing Portal (CBP) has been put on hold due to recent competing priorities. There are 65 registered users and total \$165K has been raised through the portal to date.

REDESIGN AND SERVICE IMPROVEMENT

Innovations

- The District Performance Unit is working with Strategic Relations and Communications to plan for a Mega Virtual Pitch event. This will be held at the end of June 2020 and will have a total pool of funding of \$100,000 which will replace the two normal Pitches which had a total pool of funding of \$50,000 each.

Clinical Redesign: CHR Projects

- The “A Joint Effort – Patient Centred Redesign in the Rheumatology Outpatient Services at RPA” Project (CHR 2018 – first intake) is in the process of implementing nine solutions. Due to the focus of resources towards COVID-19 safety measures, there have been nil changes since the last reporting month.

Other Projects

- Hand Clinic
 - The Redesign Team was consulted by the Director, Allied Health to assist with conducting some diagnostics work within Hand Clinic at RPAH.
 - A process map and stakeholder map has been developed from feedback given at the session conducted on the 12 February. This is in the process of being validated.
 - Data is also being collected by the Allied Health Performance & Data Analyst for analysis.
- RPAH Transfer of Care Project
 - Diagnostics – STARS extracted for discharge times and day of week by clinical stream and speciality units, Length of stay data complete for RPA & IRO
 - Diagnostics - interviews have been conducted with relevant stakeholders
 - Project Plan updated and shared with Director of Performance Unit and RPAH – General Manager.

Accelerating Implementation Methodology (AIM):

- As part of the measures the SLHD are taking to protect our staff, patients and community against any potential transmission of COVID-19 (coronavirus), all group education sessions (including AIM) were cancelled until further notice. As a consequence the May AIM course has been cancelled.
- The next AIM course is scheduled for the 10 and 11 September 2020.

HealthPathways

Content development

No Workgroups held in March-April as the team adjusts its focus to development and maintenance of COVID-19 content and supporting the SLHD Pandemic Action Plan.

COVID content

COVID-19 content continues to be updated and developed in-line with latest Health advice and testing and treatment options. Current COVID-19 content includes

Board Report

- COVID-19 Practice Management
- COVID-19 Requests
- COVID-19 Information
- COVID-19 Impact on Local Services
- COVID-19 Recent Changes
- COVID-19 Telehealth
- COVID-19 Initial Assessment and Management

Currently we are developing specific content for the ongoing assessment and management of COVID-19 cases in General Practice. This content will be providing GPs direction with home monitoring and appropriate escalation to RPA Virtual and Emergency Departments. The program team is finalising the implementation of a specific GP e-referral form into RPA Virtual. A significant amount of work has also occurred with the placing of multiple specific service provision notifications across our referral information pages.

Content in Development

April and May will see the publication of pathways and referral information for Neurology, Neurosurgery and Urology.

Usage of HealthPathways

March 2020 usage is higher than 2019, with a 44% increase in page views, with COVID-19 content making up 21.38% of page views.

1-20 April shows an 8.6% increase of content views in 2020 compared to 2019 with 16.87% of page views being COVID-19 related. This is skewed by Easter falling earlier this year.

	1-20 April, 2020	March 2020	Feb 2020	March 2019
Users	880	1,879	1,177	1,023
Sessions of use	4,209	8,428	6,528	5,312
Unique Page Views	10,887	21,998	19,994	15,390
Total Page Views	13,759	27,476	25,526	19,075

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

GENERAL FUND (GF)

The 2019/20 Service Level Agreement between the Board and Ministry of Health has key financial performance targets for Expense and Revenue. The following analysis reflects the result for the period ended 31 March 2020 based on the District's budgeted NCoS.

For the month of March 2020, Sydney Local Health District (SLHD) General Fund (GF) Expenditure was \$0.705M unfavourable to budget. YTD March 2020 GF Expenditure was \$14.481M (1.05%) unfavourable to budget. YTD March 2020 Expenditure increased significantly (by \$88.923M or 6.80%) compared to YTD March 2019. The average monthly expense rate increased from \$145.289M from July 2018 to March 2019 to \$156.819M from April to June 2019 and has decreased to an average of \$155.169M YTD March 2020. Increase in FTE numbers is contributing to these results.

GF Revenue was \$1.567M (0.77%) favourable to budget for the month and \$4.790M (0.33%) unfavourable to YTD March 2020 budget. For the period ended 31 March 2020, the District's GF NCoS was \$19.271M unfavourable to budget.

The District has assessed the YTD March 2020 costs of providing services for the following unforeseen events: COVID-19 \$14.15M, Bushfire support (including Mental Health) \$0.84M and New Zealand (NZ) Volcano \$0.88M.

The Chief Executive and the Executive Director of Finance have forecasted an \$81M unfavourability to NCoS Budget (excluding the impact of Doubtful Debts) for 2019/20. This is on the basis of full occupancy of ICUs associated with COVID-19. This will be reviewed monthly based on actual activity.

This comprises: the management of the COVID-19 process (\$73.65M Expense), the impact of treating NZ Volcano burns patients (\$1.35M Expense) and Own Source Revenue reductions (\$6M) related to COVID-19 (due to decrease in elective surgery activity, clinic workload and overseas patients), the reduction in actual single room bed day rates paid by health funds and the continued reduction in the number of private patients entering our Facilities.

The District has continued to maintain the good controls that it has in place and monitors performance on a daily basis despite the material increase in all activity challenging the LHD in the first nine months of the 2019/20 financial year.

The major variances for the month were:

Expenditure

- For the month of Month 2020, GF Total Expenditure was \$0.705M unfavourable to budget, reflecting unfavourable results for Annual Leave Provision (\$2.357M), Superannuation (\$0.587M), G&S Clinical (\$0.207M) and RMR (\$2.360M) offset by favourable results for Salary & Wages (\$2.869M), Other Employee (\$0.198M), VMO Payments (\$1.216M), G&S Support (\$0.155M) and G&S Admin (\$0.312M).
- YTD March 2020, GF Total Expenditure was \$14.481M (1.05%) unfavourable to budget. This result reflects unfavourable results for Salaries & Wages (\$3.443M), Overtime (\$2.277M), Annual Leave Provision (\$10.096M), Superannuation (\$1.387M), G&S Drugs (\$9.863M), G&S Medical & Surgical Supplies (\$2.861M) and G&S Prosthetics (\$4.049M) offset by favourable variances in Other Employee (\$1.737M), VMO Payments (\$0.698M), G&S Admin (\$15.233M) and G&S Support (\$0.977M).

Revenue

- GF Total Revenue was \$1.567M (0.77%) favourable to budget for the month of March 2020. The result for the month reflects unfavourable variances for Facility Fees (\$0.455M), Prosthesis Income (\$0.629M) and Doubtful Debts (\$0.115M) offset by favourable variances in Patient Fees (\$1.878M), High Cost Drugs (\$1.875M) and Grants & Contributions (\$0.832M).
- YTD March 2020, GF Total Revenue was \$4.790M (0.33%) unfavourable to budget. The unfavourable YTD result reflects unfavourable variances in Patient Fees (\$3.212M), Facility Fees (\$2.768M), Prosthesis Income (\$3.058M), Rent Income (\$0.860M) and Doubtful Debts (\$3.661M) offset by favourable variance in High Cost Drugs (\$10.040M) and Grants and Contributions (\$2.134M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$0.653M unfavourable to budget for the month of March 2020 and \$9.781M unfavourable to budget for YTD March 2020. This YTD result reflects unfavourable budget variances for Expenditure (\$7.211M) and Revenue (\$2.570M).

Board Report



CONSOLIDATED RESULT

For the period ended 31 March 2020, the consolidated YTD NCoS result for the General Fund and SP&T was \$29.050M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$21.690M), Own Source Revenue (\$3.486M) and Doubtful Debts (\$3.661M).

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

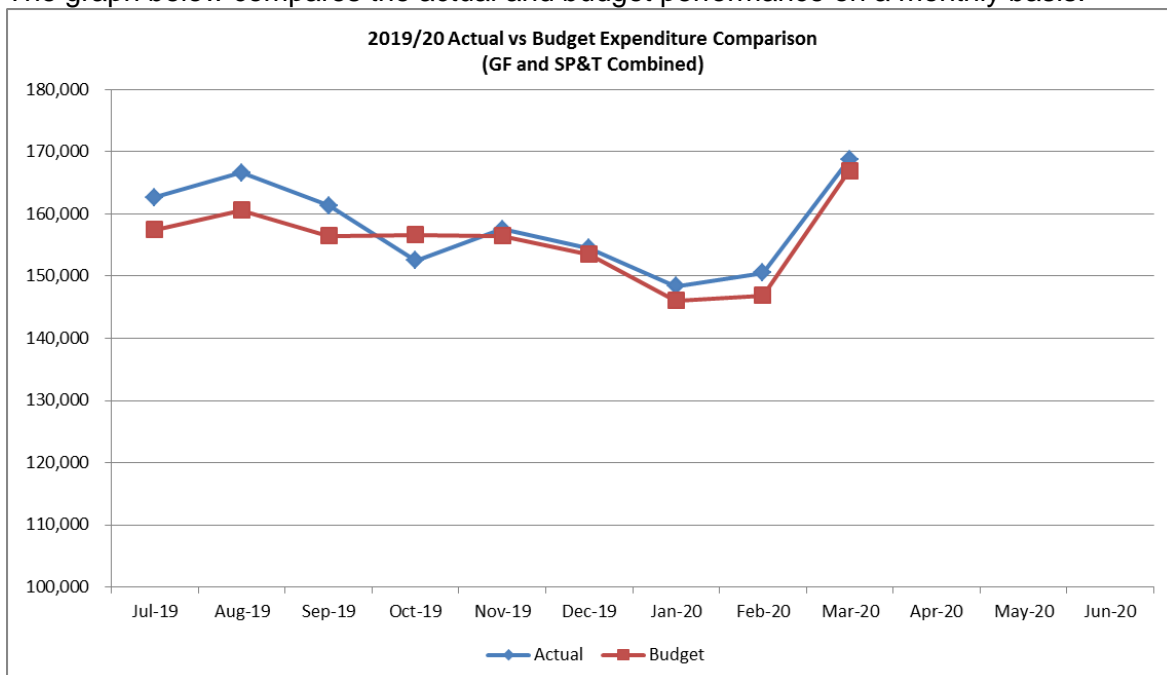
For the period ended 31 March 2020, SLHD recorded a Total Net Result of -\$57.358M (Note that Total Revenue was higher than Total Expenditure for YTD March 2020) which was \$29.209M (34%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD March 2020 was \$21.724M unfavourable to budget, reflecting unfavourable budget variances for Expenditure (\$18.574M) and Revenue (\$3.150M).

For the month of March 2020, Total Direct Revenue was \$2.542M favourable to budget, comprising favourable variances for the SP&T Fund (\$0.422M) and the General Fund (\$2.120M). YTD Total Direct Revenue was \$3.150M unfavourable to budget, comprising unfavourable variances for the General Fund (\$0.627M) and the SP&T Fund (\$2.522M). The YTD result for the GF reflects unfavourable variances in Patient Fees and Other Income offset by favourable variance for User Charges and Grant Income.

Total Direct Expenditure was \$0.450M favourable to budget for the month of March 2020, comprising a favourable result for the General Fund (\$1.724M) offset by an unfavourable result for the SP&T Fund (\$1.274M). YTD Total Direct Expenditure was \$18.574M unfavourable to budget, comprising \$12.902M unfavourable variance for the General Fund and a \$5.672M unfavourable variance for the SP&T Fund. The YTD result for the General Fund reflects unfavourable variances in Salaries & Wages (\$3.443M), Overtime (\$2.277M), On-costs (\$9.746M) and Direct Clinical Operating (\$14.416M) offset by favourable results for G&S Corporate (\$15.233M), G&S Supporting Services & Utilities (\$0.977M) and VMOs (\$0.698M).

MONTHLY BUDGET PERFORMANCE

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



Board Report

LIQUIDITY

The Ministry of Health Finance Branch has advised that due to the change of payment terms from 20 calendar days to 5 business days for Small Vendors there is no data or % available for now. This will be available in May 2020. The District remains concerned that this will impact on the ability of the District to appropriately manage its cashflow.

The cash balance at 31 March 2020 for the SLHD Operating bank account was \$10.200M and the Operating Cash book balance was \$10.039M. Please see the attached.

CAPITAL WORKS – SMRS PROJECTS

As at 31 March 2020 the District's Full Year Capital works budget relating to SMRS Projects is \$34.757M comprising \$15.823M of MoH funded and \$18.934M of locally funded projects. In March 2020, six MoH funded projects (ARRP - \$1.580M and Statewide Cataract Surgeries Equipment - \$0.103M) were approved by MoH.

Actual expenditure as at the end of March 2020 was \$15.720M which is marginally under budget.

Additionally the actual and committed expenditure for MoH funded Minor works & Equipment for COVID-19 is \$14.263M at the end of March 2020.

OTHER CAPITAL PROJECTS

As at the end of March 2020, the District has expended an amount of \$2.570M relating to PowerChart Maternity, Balmain Hospital Lift Controller Upgrade and Energy Efficiency Upgrade for Croydon and Redfern Community Health Centres. The total expenditure of \$2.570M was sourced from the General Fund.

CAPITAL WORKS

SLHD COVID Response – Capital Works Overview

As a result of SLHD's COVID-19 response, a number of capital refurbishment projects were undertaken in March to repurpose to existing facilities. An overview of these projects include:

Project	Overview of works
RPA ICU 'Red'	Repurpose of the TPU (Day Procedure Unit) at RPA to create a dedicated ICU for COVID-19 patients. Works included: <ul style="list-style-type: none">• 19 additional ICU beds• Installation of 12 ventilators• Construction of the ICU command centre• Provision of the ICU retrieval support system to transport patients from wards or ED to ICU
RPA NICU	Supply and installation of 2 x additional isolator systems
RPA Wards 10W1, 10W2 and 11W	Refurbishment works including the installation of double doors at each four bed bay, access control at entry and exit points, installation of temporary showers between wards and COVID line marking
rpaVirtual Expansion	Expansion of the rpaVirtual to allow for an additional 7 care pods
CRGH Medical Assessment Unit (MAU)	Refurbishment of the MAU at Concord Hospital to expand capacity of the ICU department
CRGH Operating Theatres	Capital works including 'COVID-19' line marking and the

CRGH	installation of 2 additional hand wash basins
CRGH Level 1 Building 75	Fast track of works to Fussell House Level 1 Building 75 to create temporary accommodation for staff
Balmain Wakefield Ward	Refurbishment works to create additional capacity
Canterbury Telopea Ward	Refurbishment works to create additional capacity
Arcadia Lodge Rozelle	Refurbishment works to create temporary accommodation for staff

RPA

Building 63 RPU

Mechanical services site inspection and show drawings are complete. Tenders for the clean room have been reviewed and the successful tenderer has been notified. A supply requisition for the works has been approved and procurement will commence once the vendor has been added onto the prequalification scheme. Medical gases have been ordered and rough is underway.

Concord

Concord Redevelopment update

The Project remains on program with no measurable impacts as a result of the COVID-19 response measures at this time. Key project milestones for the period include:

- Ongoing concrete pours
- West wing Level 4
- Central Wing Level 1
- Eastern Wing Lower Ground
- Atrium works – continuation of the structural steel installation within the atrium

Upcoming project milestones include:

- Lift lobby breakthroughs in the multiblock (May 2020)

Building 75/76 – Fussell House

Tiling works to Level 1 Building 75 are complete. Works to the Ground Floor Building 75 including service rough in and sheeting and bathroom works are complete. Works that have been completed in Building 76 during March included ground floor demolition and fire rated ceiling works. The construction of the outdoor terrace also commenced.

Building 31 – Midwifery Group Practice

Removal of damaged and rotten framework, in ground drainage works and external framing were all completed in March. Floor replacement is nearing completion and structural beams have been installed.

Canterbury Hospital

ED Expansion

Brickwork, fire protection and external window installation are all complete. Lead shielding has been installed and roof installation and Level 4 framing is nearing completion. The Mechanical plant room has been constructed and the plant is in position with duct work close to finalisation.

PLANNING

Community Wellbeing Clinics

The Planning Unit has been involved with Community Mental Health and Integrated Care in organising and providing a series of pop-up Community Wellbeing Clinics for populations with significant vulnerability; boarding house residents, people who are homeless, people living in social housing, people who speak limited English.

The clinics have been organised in collaboration with local councils, Land and Housing Corporation, Newtown Neighbourhood Centre, Riverwood Community Centre, Counterpoint and local GPs.

Clinics include COVID-19 screening and testing, vaccination against influenza, provision of a meal and the provision of health and hygiene packs.

To date over 460 people have attended clinics at three Assisted Boarding Houses, the Exodus Foundation, Riverwood Community Centre (social housing) and town halls at Petersham and Marrickville (boarding houses).

In the first week of May additional clinics will be held at Waterloo Neighbourhood Centre (social housing estates) and Glebe Town Hall (boarding house residents).

Canterbury-Bankstown Integration

The Ministry of Health (MoH) have asked that SLHD work together with SWSLHD to address the wider integration of the Bankstown and Canterbury Hospitals. The Planning unit is undertaking a piece of work to analyse the most recent flow patterns, especially the ambulatory flows.

Camperdown-Ultimo Collaboration Area Alliance (C-U Alliance)

ARUP has been appointed as the consultants to lead this major Transport for NSW, study across the Camperdown-Ultimo Collaboration Area. Health Infrastructure and SLHD are working together on this to assess movement and place issues beyond traffic to public transport, pedestrian and cycling access and amenity.

The Camperdown Study is nearing completion, with land use and strategic employment studies being drafted. Integral to this piece of work is the long term siting of a Metro station at RPA and the establishment of a biotechnology hub in Camperdown.

SLHD Surgical Services Plan

Consultations with all RPA surgical and related departments have now been completed. The Options Paper for Surgical Realignment has been drafted.

Clinical Stream Position Papers and final Strategic Plans

The following Position Papers and Strategic Plans have now been completed and will be presented to the Board for consideration:

- Aged Care, Rehabilitation and Chronic Care Position Paper
- Allied Health Strategic Plan
- Cardiovascular Services Position Paper
- Cancer Services Position Paper
- Gastroenterology and Liver Position Paper
- Neurosciences Position Paper
- Pharmacy Strategic Plan
- Respiratory and Critical Care Position Paper
- Women's Health, Neonatology, Paediatrics Position Paper.

SYDNEY RESEARCH

COVID-19 Operational Support

Sydney Research have been supporting Sydney Local Health District (SLHD) in response to COVID-19. The team has taken part in regular committee meetings, reviewing COVID-19 related correspondence prior to distribution, keeping partners of SLHD and Sydney Research informed with latest information on COVID-19 and managing meeting attendance records for the District. Ms Imogen Baker has also been seconded to the COVID-19 Operations team as of 9 March 2020 until further notice.

OHMR – Embedding Quality Research

The Embedding Quality Research (EQR) Steering Committee meeting scheduled for 27 March 2020 has been postponed to 22 May 2020 due to COVID-19 and a scheduling conflict with the Senior Executive Forum.

The EQR Working Group continues to work on the four agreed priorities within the EQR Clinical Trial Project:

1. National Clinical Trials Governance Framework;
2. Clinical Trial Management System (CTMS);
3. Clinical Trial Workforce Development; and
4. Clinical Trial Consumer and GP Engagement.

The Working Group met on Wednesday 1 April 2020 and discussed the recently released draft National Clinical Trials Governance Framework from the Australian Commission on Safety and Quality in Health Care and the CTMS online survey that was distributed across NSW Health. The CTMS sub-group of the Working Group are in the process of developing an options paper based on these responses, which will be submitted to the EQR Steering Committee for their consideration.

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

Sydney Research continues to support TRGS recipients from Round 1 – 4.

TRGs Round 4 winner Dr Michelle Barakat-Johnson, with the project 'A novel implementation of best available evidence on incontinence-associated dermatitis into practice', will be undergoing a low activity period spanning 6 months focussing on data analysis and the toolkit development for the safety of patients, visitors and staff involved in the project during the current COVID-19 crisis. The project will recommence usual activity on October 2020 and the revised end date will be February 2022.

Applications for Round 5 of the TRGS opened on 27 February 2020 with the priorities identified as the following:

1. Alcohol and other drugs
2. Integrated Care
3. Potentially preventable hospitalisations
4. Pregnancy and the first 2000 days
5. Value Based Health Care
6. Aboriginal Health
7. Locally identified priorities

Stage 1 of the TRGS application process requests participants to submit Expressions of Interest (EOIs) to the TRGS Coordinator of each Host Organisation. All SLHD EOIs are due to be submitted by 9 June 2020 to Ms Imogen Baker, SLHD TRGS Coordinator and Deputy Director, Sydney Research.

Patient Family Centred Care (PFCC) Research Working Group

The resubmitted Consumer and Community Engagement manuscript, 'Engaging Consumers in Health Research: A Narrative Review', was accepted on 24 February 2020 for publication in the *Australian Health Review*. Publication date is yet to be determined.

The PFCC Research Working Group continues to work on the focus strategy to improve and engage consumers in research across the SLHD using a digital communications campaign titled '#WhyWeDoResearch'. A project proposal for this campaign has been developed by the members of the working group that will be presented at the next PFCC Steering Committee meeting for their endorsement.

Representatives from the Working Group will be participating in a 'Tweetchat' co-hosted by the Australian Clinical Trials Alliance (ACTA) and PRAXIS Australia on 28 and 30 April 2020, which will discuss the important role of consumer involvement in COVID-19 research.

Sydney Health Partners (SHP)

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

- SLHD is the lead organisation for the implementation of the Sydney Health Partners Strategic Platform 2 "*Transforming how research improves patient outcomes to meet the needs of our community*".
- Platform 2 has identified another project examining the effects of mental health on the average length of stay post-surgery, which it will pursue concurrently with the multi-platform cellulitis project. Both projects will be piloted in SLHD later this year.
- Platforms 1, 2 and 5 met on 17 March 2020 to discuss the findings of the data working group as part of the collaborative project focusing on cellulitis. The data working group, comprised of statisticians and Allied Health clinicians, demonstrated that potential interventions and effective treatment options can be identified using data. SLHD Representatives within the working Group developed the 'Power BI' Dashboard using de-identified data to further shape the discussion at this collaborative workshop.
- Platform 2 are considering developing a consumer piece based on the multi-platform cellulitis project and the findings from the data working group.
- The Byrne report of the Governance Review of SHP has been released and circulated to Sydney Research partners. An action plan is being finalised for SHP to implement.
- Sydney Research are progressing the 'Encouraging More Clinical Trials in Australia' project by co-ordinating the recruitment of an externally funded Project Manager. Advertising for this position is currently underway with applications closing 26 March 2020.
- Sydney Research continues to assist with the recruitment for the SHP Executive Director position. A position description has been developed and finalised with the next round of recruitment starting soon.

Biodesign

Sydney Research continues to support the coordinators in the planning of the Biodesign 2.0 and its potential expansion across NSW. The program was initially planned to start in June 2020 but has since been postponed in line with COVID-19 directions. A new start date is yet to be determined.

Franklin Women

SLHD is pleased to continue to participate in the Franklin Women Mentoring Program for 2020. The Mentoring Program aims to support the career development of women over a 5-month program. The 2020 Mentoring program will kick-off on 9 June 2020 and workshop sessions will be delivered virtually in line with COVID-19 guidelines.

SLHD have nominated Professor Joy Ho, Acting Director of Haematology and Director of Research, Institute of Haematology, RPAH as mentor and Dr Amali Mallawaarachchi, Clinical Geneticist, RPAH as mentee for the 2020 program.

Precinct Planning

Sydney Research continues to participate in the Camperdown Ultimo Alliance (CUA) Meeting Group and to participate in and support the land-use study across the Camperdown-Ultimo area. The meeting scheduled for 15 April 2020 has been postponed to 20 May 2020 due to COVID-19.

Sydney Biomedical Accelerator

A second virtual workshop was held on 6 April with the Board Chairs and representatives from the Centenary, Heart Research and Woolcock Institutes, the SLHD and University of Sydney (USyd) representatives. This workshop continued discussion on the detailed business plan that was requested by the Minister as well as next steps for the project.

Additional workshops have been scheduled on a monthly basis and an Executive Sponsors Committee has been established to assist with the planning for the facility and ensure milestones are met to meet the Minister's request

Digital Health Cooperative Research Centre (DHCRC)

Sydney Research will formally establish local governance arrangements to ensure full utilisation of our new membership with the DHCRC. Options continue to be explored for the Sydney-based National DHCRC team to be co-located at King George V building at RPAH.

Australian Clinical Trials Alliance

ACTA have been providing regular summaries keeping its members informed of the up-to-date guidance relating to COVID-19 and the conduct of clinical trials. Sydney Research has been ensuring that this information is circulated to study coordinators and researchers across SLHD and regularly including these summaries in the weekly e-Update.

ACTA holds an annual National Tribute and Award Ceremony to highlight the best in Australian clinical trials. As a member of ACTA, SLHD is able to submit a nomination/s to be considered for ACTA's prestigious Trial of the Year Award that is announced at this ceremony. Sydney Research is co-ordinating SLHD's nomination/s for this award. A call was distributed to SLHD Research on 24 April 2020 asking groups to submit a nomination form to Ms Penny Vogelzang, Executive Officer, Sydney Research by 15 May 2020. Adjunct Associate Professor Vicki Taylor will review each application and will submit nominations of the preferred trial/s to the SLHD CE for consideration and approval.

Sydney Research 2020-2025 Strategic Plan

Sydney Research continues to work on its 2020-2025 Strategic Plan in consultation with our partners. The results of the survey distributed to members of the Sydney Research Council on 25 February 2020 is being used to shape the ongoing and future vision, mission and priorities for Sydney Research.

Other Activities

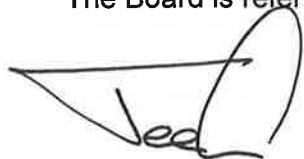
- Sydney Research continues to support and explore:
 - The establishment of the Pharmaceutical Manufacturing Lab to be located within the NSW State Biobank. Project costs are being finalised
 - The NSW State Biobank by linking them with potential partners, clinicians and researchers.
 - The Tissue Analytics digital wound application project.
 - The Royal Prince Alfred Immune Effector Cell Quality Service Steering Committee

- CHERP Precinct Committee support
- CHERP Planning and Development Committee support
- Sydney Research attended a number of events representing Sydney Research and/or SLHD including:
 - Franklin Women Mentoring Program Briefing Session – 2 March 2020
 - OHMR Gene and Cell Therapy Stakeholder Forum – 6 March 2020
 - OHMR teleconference COVID-19 Impact on Research – 26 March 2020
 - OHMR teleconference Research Roundtable on COVID-19 – 3 April 2020
- Sydney Research has commenced a process of updating its branding across all digital communication platforms. New branding has been applied to the Sydney Research Twitter account, the weekly e-Update and has commenced steps towards updating the website.
- Through the Sydney Research Council, weekly e-update, communications and social media, Sydney Research continues to promote internal and partner educational, research and grant activities to its audience of 756 subscribers.
- @SydneyResearch currently has 952 followers on Twitter.

Corona Virus

SLHD has continued to undertake a wide range of activities to manage and plan for COVID-19. A detailed series of presentations of the District's preparedness for and response to COVID-19 will be given to the May Board Meeting.

The Board is referred to the Daily Situation Reports for details on activities during the month.



Dr Teresa Anderson AM

Chief Executive

Date: 3-7-20