
Sydney Local Health District

Meeting One Hundred and Sixteen of the Board

Date: Monday 18 October 2021
Time: 9.00am - 11.00am
Venue: Via Zoom
Chair: The Hon. John Ajaka, Chair

1. Present and apologies

The Hon, John Ajaka, Chair
Ms Ronwyn North, Member
Dr Mary Haines, Member
Ms Kerry-Anne Hartman, Member
Mr Richard Acheson, Member
Mr John McGee, Member
Dr Teresa Anderson, AM, Chief Executive

Apologies

A/Professor Christine Giles, Member

In attendance

Ms Nerida Bransby, Secretariat
Mr Ross Sinclair, Executive Director of Operations, SLHD
Dr Alicja Smiech, Chair, Medical Staff Executive Council
Ms Kristina Zarkos, Redevelopment Manager, SLHD Project Lead, RPAH (9.00am - 9.50am)
Mr Steve Hall, Senior Project Director, RPAH, Health Infrastructure (9.00am - 9.50am)
Ms Olivia Armitage, GHMP Trainee

2. Welcome and introductions

The Chair acknowledged the traditional owners of the land.

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

3. Declaration / Removal of conflicts of interest

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

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

Minutes

4. Confirmation of previous minutes

4.1 Minutes of the previous meeting held 20 September 2021

The minutes of the Board Meeting held on Monday 20 September 2021 were moved and seconded as a true and accurate record of the meeting.

The Chair signed the minutes.

4.2 CE Report – September 2021

The Chair declared that the CE Report for September 2021 was ready for publication.

Presentation: *Royal Prince Alfred Hospital Redevelopment*

Mr Hall and Ms Zarkos presented on the Royal Prince Alfred Hospital Redevelopment including:

- Acknowledgement of Country
- Overview – preliminary architectural render
- Project status
 - background planning and announcements
 - project structure and team
 - Business case
 - Governance
 - Policy and Strategic alignment
- Camperdown Health Education and Research Precinct (CHERP)
- Service need – the case for change and service priorities for Stage one
- RPAH Vision
- RPAH Today – data on any given day
- RPAH by 2031
- Case for change and service priorities
- Clinical capacity requirements
- Masterplan
- Preferred option – development of the preferred design solution and scope refinement.
- Stakeholder management, approach and Aboriginal and Torres Strait Islander Engagement
- Value for money and affordability
 - Budget estimate and cash flow
 - Financial impact statement
- Benefits realization and change management
- Sustainability
- Next steps
- Questions

Following the presentation the Board discussed:

Minutes

- Temporary disruption of services will be minimal and well planned
- Get the assistance of Concord Hospital if required during the redevelopment
- Staff accommodation is available at Concord, Balmain and Rozelle
- RPAH redevelopment will include overnight rooms
- Australian natives to be used as part of the greening
- The importance of the CE and Clinicians to be active members on the Project Control Group Meetings.

The Chair thanked Ms Zarkos and Mr Hall for the presentation and for attending the meeting.

5. Matters arising from the previous minutes

5.1 Action sheet

The Board received and discussed the action list including:

- The presentation on RPAH redevelopment was provided today. This agenda can be removed from the action list.
- The remainder of the action items are still pending.

6. Patient Story

Dr Anderson provided a verbal report on the amount of “thank you” letters received from local school children. Copies of these letters are to be provided to the Board.

7. Standing Items

7.1 Acronyms List

The Board received and noted this list.

7.2 Financial Classification Codes

The Board received and noted this list.

7.3 Board Calendar 2021

The Board received and noted the Board Calendar for 2021.

8. Chair’s Report

The Chair provided a verbal report including:

- Acknowledgement to all the SLHD staff on the extraordinary work achieved during the pandemic.
- Confusion re mixed messaging and the need to make it clearer

- Correspondence has been sent to the Secretary re new Board Members.

9. Chief Executive's report

The Board received and discussed the Chief Executive's Report including:

- According to the Ministry of Health Framework, the District remains at performance level zero, which is the highest level achievable.
- Detailed workforce transition plans due to the wind down will need to proceed gradually and sensibly. COVID testing clinics will remain open.
- A brief will be provided to the FRAPM on what we have been doing during COVID in the Wards, ICU, RPAV, SHA and patients receiving ECMO.
- Christmas planning has commenced, this will also include opportunities for the staff to rest.
- HealthPathways has proved to be successful for GPs with interest from SESLHD.
- The District is looking at the Committee Structure for example Patient and Family Centred Care eight working groups to be reduced to two.
- Retired staff continue to assist in the vaccination centres and RPA Virtual due to the low risk.
- Separating COVID costs, the District should be on budget for the end of the financial year.
- SLHD will enter a partnership with the George Institute Join Us Registry. This is a national electronic research register designed by The George Institute to engage the Australian community in diverse forms of health and medical research. This will make it easier to recruit patients and community members as participants in research studies.
- The information on COVID was noted.
- The Board requested minor amendments to this report prior to publication.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – August 2021

The Board received, read and noted the SLHD Board Reporting Pack for August 2021.

9.1.2 Selected Performance Indicators – August 2021

The Board received, read and noted this report.

9.1.3 HealthPathways Dashboard Report

The Board received, read and noted this report.

9.1.4 MoH Board Report for the SLHD

The Board noted this report for the period April to June 2021 was not available

9.1.5 HAC Committee Report

The Board received, read and noted this report.

Minutes

9.2 Project updates

9.2.1 Lifehouse

Nil to report.

9.2.2 Macquarie International Private Hospital

Nil 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 noted the next report for the period July – September 2021 is due in December 2021.

(ii) Accreditation

The Board received, read and noted this report.

(ii) SLHD Risk Register

The Board noted this report is due in December2021.

9.5 Audit and Risk Committee Report (period 14 June 2021 – 14 September 2021)

The Board received, read and noted this report for the period 14 June 2021 – 14 September 2021.

9.6 Facility Reports – August 2021

(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, in particular, the positive Patient Experience Survey Results.

(iii) Community Health

The Board received, read and noted the Community Health Services report, in particular, finalising the recruitment processes for the Domestic Violence Counselling and Sexual Assault Services.

(iv) Concord Hospital

The Board received, read and noted the Concord Hospital facility report. Celebrations for Concord's 80th Birthday this year has been deferred to next year.

(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, in particular, the creation of the Suicide Prevention Outreach Team and the creation of a "Safe Haven" model of care.

(vii) Oral Health Services and Sydney Dental Hospital

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

- Back to business as usual soon
- Staff have enjoyed their roles during redeployment
- Gradual resumption of University and TAFE students
- The 4.4% of staff who were not vaccinated and redeployed to low risk areas. It is to be noted that vaccinations were not mandatory for staff in August 2021.

(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) SLHD Special Health Accommodation

The Board received, read and noted this report, in particular, Police are now located outside all sites, twenty four hours, seven days per week.

(xii) Tresillian

The Board received, read and noted the Tresillian report.

(xiii) Lifehouse

The Board received, read and noted the Lifehouse report.

(xiv) Public Health Unit

The Board received, read and noted this report.

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

The Board received, read and noted this report.

(xvi) Croydon / Marrickville / Redfern Community Health

The Board received, read and noted this report.

10. Matters for approval / resolution

10.1 Community Health Services Strategic Plan 2019 – 2024

The Board received, read and noted this document. The Board requested some additional information to be added to this plan including:

- Statement about what the District does, tertiary and quaternary care
- Where Community Health fits in the District
- Inclusion of the extra million visitors within our District at any one time
- Include improvements to lower waitlists for certain services.

Following these inclusions the document will be circulated for endorsement by the Board.

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 September 2021.

11.2 Education and Research Committee

The Board noted the meeting to be held today 20 September was cancelled.

11.3 Communications Committee

The Board received, read and noted the minutes of the meeting held on 5 October 2021. Ms Haines reported on the name change and refresh of the Terms of Reference for this Committee. A copy will be provided to the Board for endorsement. The District works with the MoH and Minister's Office for all media matters.

11.4 Audit and Risk Committee

Minutes

The Board received, read and noted the minutes of the meeting held on 23 September 2021.

11.5 Health Care – Clinical Quality Council

The Board noted the meeting held on 22 September 2021 was cancelled.

11.6 Health Care – Clinical Council

The Board noted the next meeting is to be held on 24 November 2021.

11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 5 November 2021.

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

The Board noted the meeting was held on the 8 October 2021.

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board noted the meeting is to be held on 28 September 2021 was cancelled.

11.10 Organ Donation for Transplant – Quarterly Report
(July 2021 – September 2021)

The Board noted the report for the period July 2021 – September 2021 is due in November 2021.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board received, read and noted minutes of the meeting held on 21 September 2021. The Board requested a copy of the Terms of Reference for this Committee and to consider making it a Board sub-committee especially during the redevelopment. A Sustainability Workshop was held last Friday.

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 11 August 2021.

12.3 Surgical Demand Committee (bi-monthly)

The Board noted the next meeting is to be held on 20 October 2021.

12.4 Finance Leaders Forum

The Board received, read and noted the minutes of the meeting held on 15 September 2021.

Minutes

12.5 NSW Health / SLHD Performance Review Meeting

The Board noted these meetings are postponed due to the COVID response.

12.6 Organ Donation for Transplantation

The Board noted the meeting held on 24 August 2021 was cancelled.

12.7 Major Procurement, Assets and Imaging Steering Committee

The Board noted the meeting held on 14 September 2021 was cancelled.

12.8 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the next meeting is to be held on 19 October 2021.

12.9 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 18 August 2021.

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

The Board noted the meeting to be held on 7 October 2021 was cancelled.

12.11 Security and Violence Prevention Committee

The Board noted the meeting to be held on 7 September 2021 was cancelled.

13. Matters for noting

Nil to report

14. Other Business

14.1 Gateway Review – RPAH Redevelopment

Positive feedback has been received in relation to the Gateway review including valued RPAH history and sustainability.

14.2 Security in Hospitals

Security in our facilities was discussed including:

- The District has a large Security workforce in placed in all our facilities
- Patients are risked assessed
- Following a risk assessment a patient can be provided with a nurse and security special if required
- Code Black Policy

14.3 SafeWork Investigation

Dr Anderson provided a verbal report on the SafeWork investigation on an incident that occurred in May 2019.


14.4 Tour of Facilities

Dates and times have now been set for our Board Members to tour our facilities.

15. Next Meeting

The next meeting will be held on Monday 15 November 2021 at 9.00am.

The meeting closed at 11.00am.


Chair

15. 12. 21
Date

Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board October 2021

PERFORMANCE

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

Safety and Quality

Despite the significant demands placed on staff due to the COVID-19 response, SLHD continues to maintain the quality and safety of our services.

There were no Serious Adverse Events overdue during the month of August 2021.

Mental Health Readmissions within 28 days have increased for the month of June 2021 to 17.1% in comparison to 15.3% 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 5.8% for the month of July, which is slightly below the State rate of 6.0%. Unplanned Emergency Representations (same ED within 48 hours) were 4.1% for the month and 4.2% YTD August 2021, which is less than the State rate of 4.6% for the month and below the State rate of 4.5% for YTD August 2021.

The District remains under the benchmark (2.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI) with a result of 1.1 per 10,000 bed days for the month of June 2021. There was 0 Central Line Associated Bloodstream (CLAB) infections during June 2021. Ongoing education and training in infection control strategies and CLAB awareness discussions at ICU morbidity and mortality meetings continue.

Hospital acquired endocrine complications has a rate of 32.7 per 10,000 episodes, with a target of 29.7 for the 12 month rolling period of June 2020 – July 2021 which is an improvement on last year. Hospital acquired endocrine complications decreased by 53 instances during this period, when compared to the same period in the previous year.

Work continues to improve the District's performance in relation to all HACs, with facilities/services providing monthly updates to their HAC Action Plans. This work is overseen by the SLHD HAC Steering Committee. District HAC Operational Coordinators and Clinical Leads for each of the HACs have been appointed to further support facilities and services in the development of strategies to reduce HACs District wide.

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 by 0.80 and increased for Nursing and Allied Health by 2.65 and 0.33 respectively for the month of August 2021 when compared to the same period last year.

The District is continuing to work with the NSW Health Workforce branch to ensure its workforce surge plans are in place for an escalation in the COVID-19 response. There is ongoing focus on specific workforce escalation plans to ensure alignment to current and ongoing work within the SHEOC.

The District has focused on ensuring its hospitals are appropriately staffed to manage the increasing activity associated with COVID-19 in the Emergency Departments, COVID-19 wards and Intensive care units. There has been ongoing focus on the workforce challenges in ICU surge activity which has been required to manage the recent COVID-19 outbreak since June 2021.

The District has also been continuing to focus on ensuring appropriate nursing, medical and administration staff to support the COVID-19 Vaccination Program in NSW and in particular the NSW Health Vaccination Centre at Sydney Olympic Park 7 days per week, the mobile vaccination clinics and the Special Health Accommodation which now has over 900 patients at any one time. New models of workforce have been developed to ensure that nursing and medical staff are released to support the hospitals as hospital admissions have increased.

Activity

Significant pressure has continued to be placed on all hospitals in the District with the significant increase in the presentation and admission of COVID-19 positive patients and patients on COVID-pathways during July 2021 associated with the recent COVID-19 outbreak. Hospital capacity to deal with the outbreak has been increased through stopping all non-urgent elective surgery and reducing outpatient clinics across the District.

As a result there was a decrease of 19.01% in the number of separations (11,138) for the month of August 2021 when compared to the same period last year. This is consistent with the decrease in elective surgery and reduced non-COVID-19 inpatient activity associated with COVID-19. YTD August separations have decreased by 11.47% when compared to the same period in the previous year. In August 2021, the District's occupancy rate decreased by 5.67% to 81.94% when compared to the 87.61% reported in August 2020.

There were 12,585 attendances to the District's Emergency Departments in August 2021, which is a 0.7% increase from 12,431 when compared to the same month last year. YTD Emergency Department attendances have increased by 0.24% to 24,842 when compared to the same period in the previous year. For the month of August, case weighted attendances have decreased by 4.81%, when compared to the same month in the previous year. The District is investigating the impacts of COVID-19 on the reduction of Emergency Department presentations in partnership with the George Institute.

Emergency Treatment Performance (ETP) (formerly NEAT)

The District continues to work on ETP performance. There was a 7.32% decrease in ETP in the month of August 2021 to 59.86%, when compared to the same month in the previous year. YTD August there has been a 6.71% decrease in ETP to 61.84%. Admitted ETP was below target (50%) for the month at 28.19%, which is a 13.34% decrease on the same period in the previous year.

Transfer of Care

The District is performing below the transfer of care (TOC) target (90%) for August 2021, with 77.9% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. This has been due to the significant increase in the number of patient on a COVID-19 pathway presenting to the Emergency Department which has significant increased processing times due to PPE and Infection Prevention and Control measures required.

ED Triage

The District achieved triage Categories 1, 4 and 5 targets for the month of August. Triage Categories 2 and 3 performance is below the revised targets at 77.85% (target 95%) and 72.25% (target 85%) respectively.

Elective Surgery

There were 1,663 less elective surgeries performed in August 2021 when compared to the same period in the previous year, representing an decrease of 71.31% (excluding collaborative care). This is in line with the reduction in all non-urgent elective surgical procedures as above.

For the month of August, 99.74% of Category A, 98.54% of Category B, and 100% of Category C elective surgery patients were admitted within the clinically appropriate timeframe for their surgery. YTD August there has been a 11.10% (294) decrease in surgical patients not ready for care, when compared to the same period last year.

To supplement operating capacities within Royal Prince Alfred Hospital, Concord Repatriation General Hospital and Canterbury Hospital, collaborative care arrangements are continuing to be utilised with private facilities. Facilities currently engaged in Collaborative Care arrangements include Chris O'Brien Lifehouse, East Sydney Private, Hurstville Private, The Mater Private, North Shore Private, Sydney Day Surgery, Sydney Adventist Hospital, Strathfield Private, Chatswood Private, St George Private, Westmead Private, St Luke's Private, Waratah Private and Macquarie University Hospital. As at the 12 October, 1,317 public patients have received care within these private facilities under the Collaborative Care arrangement (1,077 RPA, 149 CRGH, 81 IRO and 10 Canterbury). A surgical recovery program is currently being coordinated by the SLHD Surgical Leadership group, in order to effectively surgical programs back to facilities, and decrease wait list pressures, following the COVID-19 period.

A Surgical Taskforce has been established at RPA, Concord and Canterbury Hospitals to over see the surgical recovery program. Membership of the taskforce in each facility includes the District and Facility Executive, Senior medical, nursing and allied health clinicians and clinical directors from surgical departments, operating theatres, anaesthetics, emergency departments, ICU and wards.

Emergency Surgery

There were 62 more emergency surgeries performed in the month of August 2021 when compared to the same month last year, representing a 5.10% decrease. This reflects the impact of delays in elective surgery due to COVID-19.

Community care and Hospital in the Home

The District has continued to manage its activity through 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 34% increase in the number of Hospital in the Home overnight separations in YTD August 2021 in comparison to the same period last year, due to the impact of COVID-19. This has been replaced by an increase in virtual health care.

NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

NWAU Activity against Target

Despite the impact of COVID-19, the District continues to perform well in relation to the NWAU activity against target, with a 19.76% variance for July, excluding Dental.

Board Report

Stream	Target	Actual	Variation	Variation %
Acute*	13,837	13,678	-159	-1.15%
ED	2,002	1,744	-258	-12.87%
NAP**	3,702	8,647	4,945	133.58%
SNAP	1,096	1,171	75	6.84%
MH Admit***	1,426	1,409	-17	-1.21%
MH NAP^	947	907	-40	-4.22%
Total	23,010	27,557	4,547	19.76%
Dental DWAU	5,496	2,376	-3,120	-56.77%
Dental NWAU#	690	298	-392	-56.77%
Total (NWAU)	23,700	27,855	4,155	17.53%

* 11 uncoded episodes

** inclusive of COVID clinics and the Special Health Accommodation

*** 1 uncoded episode

NWAU=589/4691*DWAU

All values are currently in NWAU20

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of August 2021, 15.00% (1,526 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was a decrease of 643 (29.64%) patients who elected to use their private insurance compared to the same period last year and a decrease of 434 (22.14%) in total separations from previous month. This is consistent with the decrease in elective surgical cases.

For the month ended August 2021 conversions for facilities as compared to the same period last year were:

- RPAH – a decrease of 372 (32.98%) private patients.
- Concord – a decrease of 199 (22.09%) private patients.
- Canterbury Hospital – a decrease of 40 (43.01%) private patients.
- IRO – a decrease from 25 to 0 private patients.
- Balmain Hospital – a decrease of 7 (31.82%) private patients.

Single Room Usage

For the month of August 2021, 6.59% of patients were flagged as infection control across the District. For the month, 14% of all available single rooms were occupied by private patients and 34% of all private patients were accommodated in single rooms.

SLHD Strategic Revenue Network

Key notes:

- SLHD Strategic Revenue Network meeting was not held in July 2021 and is scheduled for August 2021.

- Clinician Billing Portal (CBP) is progressing with RPAH, CRGH and TCH working to identify and sign up staff specialists to bill through the application. There are currently 139 registered users and total \$1.2M has been raised through the portal to date.

REDESIGN AND SERVICE IMPROVEMENT

Innovations

The Pitch

- Due to the current COVID restrictions, the next round of the Pitch has been placed on hold.

CHR

- The GPCanShare Project was approved to participate in the Centre for Healthcare Redesign's Graduate Certificate Program and the team attended the first 3-day workshop last month. However, the team has now been redeployed to Rpvirtual to assist with the COVID response. As a consequence, the project team has requested leave of absence from the University of Tasmania in the hope that they will resume the project and studies in early 2022.

Other Projects

- Hands Up Project (RPA Hand Clinic)
 - Due to the current COVID-19 restrictions, the Project Team are at maximum capacity. As such, the project has been placed on hold from 16 July 2021.
- RPAH Transfer of Care Project – 'Good to Go, Discharge by 10 and 2'
 - The COVID-19 response requires the complete attention of patient flow unit resources. The unit is currently undertaking recruitment toward a management restructure. Once this period has subsided and the restructure of the unit is finalised with new positions filled, the team will re-commence the implementation of agreed solutions.
 - A workshop for medical attendees is being planned to drive engagement with solutions given they all need strong medical buy in / culture change.
- Diabetes Model of Care Redesign
 - The diagnostic phase of the project has been completed.
 - The new SLHD Outpatient Diabetes Model of Care has been finalised and is to be shared with diabetes leads, GMs and DMS's on 31 August.
 - The current state of the SLHD Outpatient Diabetes in Pregnancy Model of Care is to be tabled and discussed with SLHD executive once the COVID-19 situation becomes less pressing.

Accelerating Implementation Methodology (AIM):

- *Remaining date for the AIM course in 2021 are:*
 - 15-16 November

HealthPathways

Content development

The development and maintenance of COVID specific content remains the Program's main focus, outside of providing Team Leader resources to the SLHD Mobile vaccination services.

Board Report



COVID-19 vaccination pathways were added to with a specific **Myocarditis and Pericarditis following mRNA vaccination** pathway and promotion of the **COVID-19 Vaccine-induced Thrombosis with Thrombocytopenia Syndrome (TTS)** to General Practice through a specific CESPAN GP CPD event. Use of both pathways has been significant.

We are currently revising our Assessment and ongoing management of COVID-19 pathway to reflect the new RPA Virtual model of enhanced GP care for low level COVID-19 infections in the community. First draft is completed and we expect final version to be available to general practice by the 30th September.

Dr Kate George and Dr Amy Nguyen from the Sydney HP team are also collaborating in the ACI supported development of a new COVID-19 care in the community pathway, based on the model from RPA Virtual and the local pathway we are developing for GP care and support. Further updates are also being made to our GP supporting COVID-19 in an RACF, again this model supports the work of the SLHD Outreach team.

Currently we have the following COVID-19 vaccine specific content accessible to General Practice:

	Page views September 1 - 23	Page views August 2021	Page views July 1-31 2021
COVID-19 Vaccination Information	180	227	205
COVID-19 Vaccination Procedure	112	230	110
Preparing for COVID-19 Vaccination		37 Pathway merged with Vaccination Procedure	50
COVID-19 Vaccine-induced Thrombosis with Thrombocytopenia Syndrome (TTS)	142	326	
Myocarditis and Pericarditis After mRNA COVID-19 Vaccines	107		

Usage of HealthPathways

Usage continues to track at a favourable level with steady consistent usage rates.

	*September 1 - 23 2021	August 2021	July 2021	*September 1-23 2020
Users	1,199 ↑ 12.79%	1,450	1,473	1,063
Sessions of use	7,432 ↑ 10.66%	9,370	8,843	6,716
Total Page Views	25,153 ↑ 13.67%	30,951	31,277	22,127

- Comparison data

SLHD e-Referral Project

Service recruitment

The e-Referral Project Team are assisting with COVID-19 response activities.

Development work has been completed on forms for the Royal Prince Alfred Hospital implementation. Phase 1 of the e-Referral implementation will go live 13 October 2021, with phase 2 anticipated to occur early 2022.

e-Referral form design is now finalised for SLHD Maternity, and Royal Prince Alfred Hospital's Gynaecology and Fertility service, as part of the Engage Outpatients Program. Development work has commenced by the e-Referral vendor. The anticipated go live date of this project is February 2022.

Service	Deployment	Stage
Haematology	October 2018	Live
Rheumatology	June 2019	Live
Osteoporosis and Community Paediatrics	September 2019	Live
COVID-19 Monitoring – RPA Virtual	May 2020	Live
Haematology, Osteoporosis (ORP) , Rheumatology (OACCP) – Canterbury Hospital	August 2020	Live
Concord Hospital Phase 1 (22 services)	October 2020	Live
Concord Hospital Phase 2 (6 services)	TBC	Design
Direct Access Colonoscopy and Inflammatory Bowel Disease – Royal Prince Alfred Hospital	November 2020	Live
Podiatry - SLHD	November 2020	Live
High Risk Foot Service and Palliative Care – Concord Hospital	November 2020	Live
Andrology – Concord Hospital	February 2021	Live
Royal Prince Alfred Hospital (13 services)	October 2021	Testing and Training
Engage Outpatients Program: Gynaecology, Pelvic Mesh and Maternity – Royal Prince Alfred Hospital	2022	Build
Royal Prince Alfred Hospital (5 services)	Early 2022	Design

Platform development

Active Directory integration work to recommence, with support from SLHD ICT once resources are available.

Referrer update:

- A total of 1381 referrals have been received.

- 70% of referrers using HealthLink to refer to SLHD have referred more than once.

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

GENERAL FUND (GF)

The 2021/22 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 August 2021 based on the District's budgeted NCoS.

For the period ended 31 August 2021, GF Expenditure was \$72.457M (19.45%) unfavourable to budget. The District has assessed the YTD August 2021 COVID-19 Incremental cost as \$124.581M. The District's unfavourable result for YTD August 2021 was primarily due to COVID-19 Incremental expense of \$72.569M pending budget supplementation for Elective Surgery, Clinics and Screening, COVID-19 Wards, Pathology testing, Special Health Accommodation, PPE, Cleaning, Contract Tracing and Vaccination Program. The District has received the July 2021 COVID-19 Stimulus Budget of \$52.012M in August 2021. Excluding the impact of COVID-19, the District is \$0.112M favourable to YTD August 2021 Expense budget.

YTD August 2021 Expenditure increased significantly (by \$83.799M or 23.2%) compared to YTD August 2020 due to the significant response required to manage the current COVID-19 outbreak. The average monthly expense rate increased from \$160.292M (excluding LSL adjustment in June 2020) for the 2019-20 Financial Year to \$188.249M (excluding LSL adjustment in June 2021) for the 2020-21 Financial Year and to \$222.513M YTD August 2021. Increase in FTE numbers and the impact of COVID-19 is contributing to these results.

GF Revenue (including Doubtful Debts) was \$13.789M (5.8%) favourable to budget for the month and \$31.527M (8%) favourable to YTD August 2021 budget. The District continues to see unfavourable results in a number of Own Source Revenue categories including Patient Fees, Facility Fees, Prosthesis income and Pharmacy Sales as a result of the impact of COVID-19. Excluding the impact of Quarantined Hotel Passenger Fees on Own Source Revenue and Doubtful Debts, the District is \$9.054M unfavourable to August 2021 GF Revenue budget primarily due to the impact of COVID-19.

The NCoS for August 2021 was \$5.560M unfavourable to budget. For YTD August 2021, the District's NCoS was \$40.93M unfavourable to budget. Excluding the impact of COVID-19 (Expenditure, Quarantine Hotel Passenger Fees and Doubtful Debts) SLHD is \$8.942M unfavourable to NCoS budget. This unfavourability in NCoS is primarily due to the impact of COVID-19 on Own Source Revenue as mentioned above.

The table below shows the summary of the YTD August 2021 Financial Performance – including and excluding the impact of COVID-19:

Board Report



	YTD Actual \$000	YTD Budget \$000	Variance (Actual vs Budget) \$000	
Expense (incl COVID)	445,026	372,570	-72,457	Unfav
Pending COVID-19 budget supplementation	124,581	52,012	-72,569	Unfav
GF Expense (excl COVID-19 impact)	320,445	320,558	112	Fav
Own Source Revenue	-80,451	-42,825	37,626	Fav
Quarantined Hotel Passenger Fees	-45,766	0	45,766	Fav
GF Revenue (excl the impact of Quarantined Hotel Passenger Fees)	-34,685	-42,825	-8,139	Unfav
Doubtful Debts (incl Quarantined Hotel Passenger Fees)	6,070	128	-5,941	Unfav
Loss on Sale of Asset	158	0	-158	Unfav
Doubtful Debts (Quarantined Hotel Passenger Fees)	5,185	0	-5,185	Unfav
Doubtful Debts & Loss on Sale of Asset (excl the impact of Quarantined Hotel Passenger Fees)	1,043	128	-915	Unfav
NCoS (excl the impact of Quarantined Hotel Passenger Fees)	286,803	277,861	-8,942	Unfav

Unfavourable to budget due to the impact of COVID-19

Unfavourable to budget primarily due to the impact of COVID-19

The District, based on MoH requirement to show full year COVID-19 impact, projects the NCoS to be unfavourable for the 2021/22 financial year by \$410M relating to unfavourable results for: Expense (\$600M) related to the management of the COVID-19 response and Doubtful Debts (\$20M) offset by a favourable result for Own Source Revenue (\$210M) due to the impact of COVID-19 Quarantined Hotel Passenger Fees.

Excluding the impact of COVID-19, the District forecasts a break-even position for Expense and unfavourability of \$5.3M in Doubtful Debts. Excluding Quarantine Hotel Passenger Fees, the District forecasts unfavourability of \$30M in Own Source Revenue due to the impact of COVID-19.

The Chief Executive and the A/Executive Director of Finance are confident that the District would have an on budget NCoS result (excluding the impact of COVID-19 and Doubtful Debt) for the 2021/22 financial year despite the challenges that are facing the District. 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 (prior to the advent of COVID-19) and the impact of the management of the COVID-19.

The major variances for the month were:

Expenditure

- GF Total Expenditure for the month of August 2021 was \$19.349M (8.91%) unfavourable to budget. The result for the month was primarily attributable to unfavourable results for Goods and Services Expenses (\$0.07M), Employee Related Expenses (\$13.974M), VMOs (\$0.489M) and RMR (\$3.537M).
- YTD August 2021, GF Total Expenditure was \$72.457M unfavourable to budget, primarily reflecting unfavourable results for Salaries & Wages (\$16.366M), Overtime (\$9.137M), Annual Leave Provision (\$2.444M), Superannuation (\$4.897M), VMO Payments (\$1.567M), RMR (\$4.045M) and Goods & Services (\$33.471M). Excluding the impact of COVID-19, the District is \$0.112M favourable to YTD August expense 2021 budget.

Revenue

- GF Total Revenue for the month of August 2021 was \$13.789M (5.8%) favourable to budget, reflecting the favourable results from User charges (\$21.366M) and unfavourable results in Grants and Contributions (\$1.057), Patient Fees (\$2.395M), Other Sources of Revenue (\$1.026M) and Doubtful Debts (\$3.018M).
- YTD August 2021 GF Revenue was \$31.527M (8%) favourable to budget. This result reflects favourable variance in Quarantined Hotel Fees (\$45.766M), High Cost Drugs (\$1.157M) and Car Park Fees (\$0.632M) offset by unfavourable variances in Facility Fees (\$0.964M), Prosthesis Income (\$0.867M), Pharmacy Sales (\$0.02M), Patient Fees (\$3.612M), Grants and Contributions (\$0.795M) and Doubtful Debts \$5.941M. The unfavourability in Patient Fees, Facility Fees, Prosthesis Income and Pharmacy Sales is predominantly due to the impact of COVID-19. Excluding the impact of Quarantined Hotel Passenger Fees on Own Source Revenue and Doubtful Debts, the District is \$9.054M unfavourable to August 2021 GF Revenue budget primarily due to the impact of COVID-19.

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$2.62M unfavourable to budget for the period of August 2021. This result reflects unfavourable budget variance for Expenditure (\$0.67M) and Revenue (\$1.95M).

CONSOLIDATED RESULT

For the period ended 31 August 2021, the consolidated YTD NCoS result for the General Fund and SP&T was \$43.55M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$73.127M), Doubtful Debts (\$5.941M), Loss on Sale of Asset (\$0.158M) and favourable variances for Own Source Revenue (\$35.676M).

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

For the period ended 31 August 2021, SLHD recorded a Total Net Result of \$11.459M which was \$43.488M unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD August 2021 was \$33.110M unfavourable to budget, reflecting an unfavourable budget variance for Expenditure (\$68.849M) offset by favourable variance for Revenue (\$35.739M).

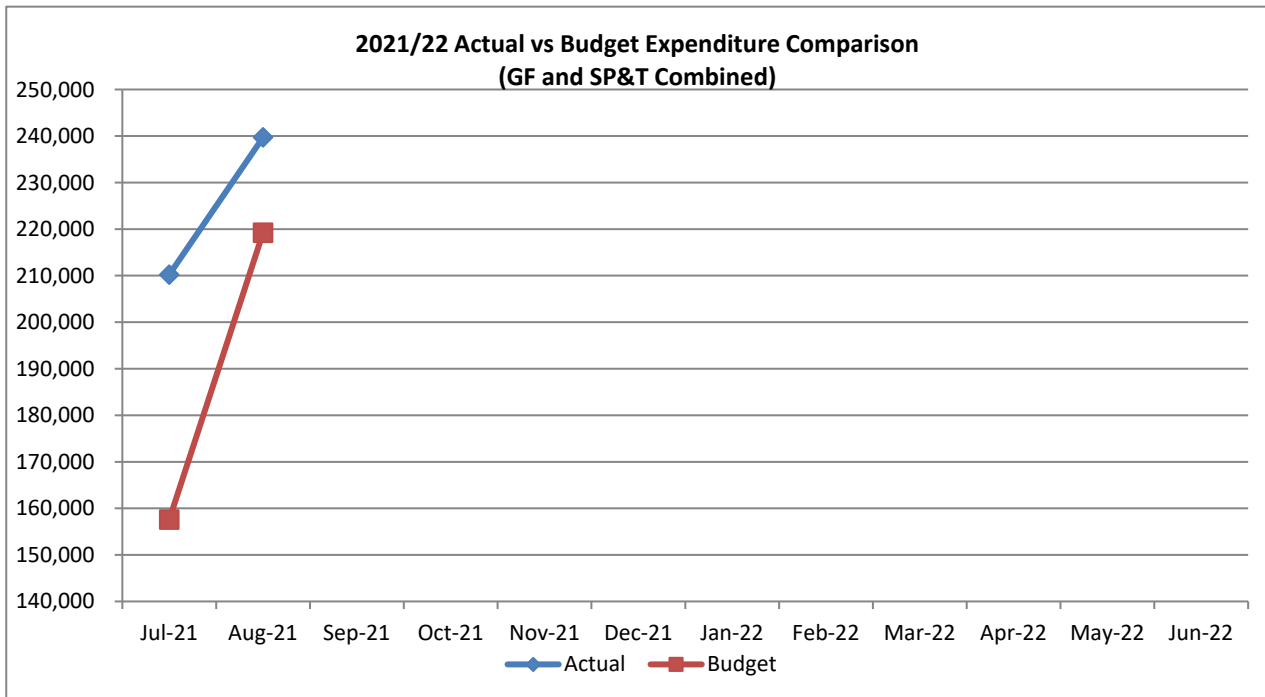
For the YTD August 2021, Total Direct Revenue was \$35.739M favourable to budget, comprising a favourable variance for the General Fund (\$37.626M) and unfavourable variance for SP&T Fund (\$1.888M). This result for the GF reflects favourable variances in User Charges offset by unfavourable variances in Patient Fees, Other Income and Grant Income.

YTD August 2021 Total Direct Expenditure was \$68.849M unfavourable to budget, reflecting an unfavourable variance for General Fund (\$68.387M) and SP&T Fund (\$0.462M). The result for the

General Fund reflects unfavourable variances in Salaries & Wages (\$16.366M), Overtime (\$9.137M), On-costs (\$7.19M), VMOs (\$1.567M), Grants (\$0.657M), Direct Clinical Operating (\$15.929M), G&S Corporate (\$15.798M) and G&S Supporting Services & Utilities (\$1.744M).

MONTHLY BUDGET PERFORMANCE

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



LIQUIDITY

The cash balance at 31 August 2021 for the SLHD Operating bank account was \$23.249M and the Operating Cash book balance was \$23.027M.

CAPITAL WORKS – SMRS PROJECTS

As at 31 August 2021 the District's Full Year Capital works budget relating to SMRS Projects is \$12.975M comprising \$7.801M of MoH funded and \$5.174M of locally funded projects.

Actual expenditure as at the end of August 2021 was \$0.114M which is on budget.

Additionally in the current pandemic circumstances, the actual expenditure for MoH funded Minor works & Equipment for COVID-19 was \$0.262M at the end of August 2021.

OTHER CAPITAL PROJECTS

As at the end of August 2021, the District has expended an amount of \$0.127M relating mainly to RPAH Paediatrics Stage 3 and CRGH Research Centre. The total expenditure of \$0.127M was sourced from the General Fund.

CAPITAL WORKS

COVID-19 Projects

As part of SLHD's COVID-19 response, a number of capital refurbishment projects have recently been undertaken to repurpose to existing facilities. An overview of these projects include:

- COVID-19 Vaccination Clinic – Ultimo Community Centre
- Ward 5 East 1 RPA
- Ward 8 West 2 RPA
- Ward 9 East RPA
- ED RAFT RPA
- Neurology ICU RPA
- Cardiac Care Unit RPA
- Paediatrics Building 63 RPA

RPA

RPA Redevelopment

Key activities undertaken for the RPA Redevelopment in September 2021 are as follows:

- Finalisation of SBC and associated inputs.
- Development of design competition brief in consultation with Government Architect of NSW (GANSW), DPIE and CoS Council to define the process, brief, criteria and parameters for the design competitions
- Finalisation of Functional Briefs and Schedules of Accommodation following receipt of feedback from Project User Groups.
- Ongoing fitout works for the delivery of the Renal Satellite relocation from Building 12 to PMBC.

Parent and Baby Unit

Over the course of this reporting period, the external framing and structural steel works have been successfully completed. Activities including internal framing, service rough-ins for the nurse call system and roof penetrations have been underway. Hydraulic mains and mechanical rough-ins are nearing completion and fireproofing and detection works commenced.

Building 63 RPU Hot Cells

Capital works activities that commenced during this reporting period include the installation of new pneumatic tubes and commencement of lead shielding for the RPU hot cells. Mechanical service works and cladding for the external exhaust pipes have also continued throughout the month. COVID-19 restrictions have continued to impact the delivery of this project including materials unable to be delivered as well as technicians that reside in areas outside of NSW unable to attend site.

Renal Dialysis PMBC Level 2

Installation of the new ceiling and RO loop works have been successfully completed in September. The laying of new vinyl flooring is well underway and the installation of new flooring and service fit-offs for sprinklers and fire detection commenced.

Ophthalmology Clinic Rooms

Demolition works have been completed and new stud walls have been successfully installed in September. Rough-ins for electrical, mechanical and hydraulic services were nearing completion and the installation of new ceilings and nurse call are underway.

Concord

Concord Redevelopment

Key milestones achieved for the Concord Hospital redevelopment during September included:

- Accelerated completion of the redevelopment building to assist SLHD in the COVID-19 response
- Handover of Levels 1, 2 and 3
- Completion of link bridges to existing building
- SLHD defect walks underway
- Interim occupation certificate issued

CSSD Sterilising

Over the course of this reporting period, Stage 1 demolition works and electrical disconnections were completed. Mechanical service rough-ins and building works were underway however due to current COVID-19 restrictions, mechanical technicians have been unable to attend site which has impact the delivery of works.

Sydney Olympic Park

SLHD Training Hub

Works completed in September for the new SLHD training hub include demolition, sprinkler installation, partition framing and sheeting and installation of new joinery. Service fit-offs are underway and laying of the new floor and painting is nearing completion.

Callan Park

Building 106 Remedial Repairs

Remedial works including repairs and painting of Building 106 was successfully completed in September 2021. Waterproofing works to the balconies was underway and the installation of new aluminium glass doors and frames was nearing completion.

PLANNING

Vaccination Roll-Out

The Planning Unit continues to support the state-wide roll-out of the COVID-19 vaccinations as its prime and priority activity.

Canterbury – Stage 0 Planning

The Planning Unit has worked with MoH and HI to clarify expectations of Stage 0, including the relationship with the District's Asset Strategic Plan.

The CIP, as per the Process of Facility Planning, will include:

- an outline of Canterbury's strategic need and benefit, which will be substantially provided through the Clinical Services Statement
- a demonstrated networked approach to planning with primary and community care and with other (hospital) tiers of the service
- consideration of the strategies and plans of the statewide entities
- based on shifting volume from the inpatient/hospital setting to virtual and community and preventative care
- evidence of attention to financial sustainability and efficiency

In parallel with the CIP, the Clinical Services Statement (CSS) will update the endorsed Clinical Services Plan (CSP), ensuring that the plan's underpinning approach addresses service transformation, networking and sustainability. The CSS will update the principles, health service activity, forecasts, and demand management strategies.

Canterbury Hospital Dialysis Unit

The Planning Unit has collaborated with the Canterbury Hospital Executive and the Renal Medicine and Urology Clinical Stream to complete the service plan for the Canterbury Hospital dialysis service.

Tech Central (Camperdown-Ultimo Collaboration Area)

- Planning continues in collaboration with the Greater Sydney Commission for a Tech Central brand, website, narrative, a set of case studies and a place collaboration tool (map).

Other Plans

The following plans are being supported to some extent by the Planning Unit, although much of this has been suspended due to COVID.

- SLHD Mental Health Strategic Plan.
- SLHD Workforce Strategic Plan.
- SLHD Education Strategic Plan.
- SLHD Digital Health Strategy.

SYDNEY RESEARCH

Sydney Research Update

Two new members have joined the Sydney Research team - Ms Mariam Damen, A/Executive Officer and Ms Asra Gholami, Project Manager (Embedding Quality Research). Both Mariam and Asra commenced in their new roles in August 2021, and have been working closely with Adj A/Prof Vicki Taylor, Executive Director and Penny Vogelzang, A/Deputy Director in supporting the strategic initiatives and projects under the Sydney Research portfolio.

The Sydney Research team have continued to support the District's COVID-19 response as members of the SLHD COVID-19 Steering Committee; in ensuring that our research, clinical, academic and industry partners are informed of the latest guidance, restrictions and data; and in coordinating approximately 90 individuals from across our partnership to support the vaccination centres managed by the District as well as with the Special Health Accommodation, **rpavirtual** and general hospital services.

The pandemic has demonstrated the crucial role of research on a local, state, national and international level in developing testing and vaccinations, new models of care delivery, performing clinical trials and in examining the short and long term impact of COVID-19. It is for this reason that our team has been committed to maintaining momentum on a range of exciting research projects and initiatives (COVID-19 and non-COVID-19 related) across the District, as well as remaining strongly connected with and supporting our research, academic and industry partners. The following report summarises the key initiatives and achievements over the past month.

Research Australia

Sydney Local Health District has become a member of the Research Australia partnership. Research Australia was established by the Australian Government 20 years ago to advise on the policy settings relating to health and medical research. It has since become the national peak body for health and medical research, representing the entire health and medical research pipeline – from laboratory, the

health service, to the marketplace. There are currently 137 members of Research Australia, representing research organisations, health providers, academic institutions, charities and foundations, venture capitalists, representative bodies, pharmaceutical, biotechnology and medical technology companies, and community special interest groups.

As a partner, the District will be able to:

- Be involved and influence state and national policy, contribute to policy submissions and engage with Ministers and senior government officials;
- Attend the well-known Health Economics roundtable, or the University Roundtable with the major universities across Australia;
- Nominate SLHD staff for the prestigious annual Research Australia Health and Medical Research awards; and,
- Participate in a range of local, state, national and international initiatives led by or involving Research Australia.

Research Australia will also be promoting the research and innovation activity, capability and success of the District and on the Camperdown campus, in particular they are excited to give more visibility to the breadth of medical research and projects like the Sydney Biomedical Accelerator.

The District's membership was coordinated by Sydney Research, and the team will be meeting with the General Manager, Director of Partnerships and Marketing, and Director of Policy from Research Australia on Tuesday 28 September 2021. This meeting will focus on further collaboration opportunities, including a potential new case study on SLHD to champion research translation and its ability to improve patient outcomes and health services. This case study would be included in a report for state and national Government officials, charities and the general public focussing on how research is embedded into health care and how it reduced health costs.

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

Sydney Research continues to support the successful projects in Rounds 1-5 of the Translational Research Grant Scheme (TRGS).

TRGS Round 5

The recent outbreak and lockdowns in Sydney have significantly delayed Round 5 TRGS projects – the EVIDENCE Study led by Dr Mark Dennis and Prof Brian Burns, as well as the SHAReD trial led by Dr Andrew McDonald. In particular, staff redeployment and the increased burdens on NSW Ambulance and across LHDs/health facilities have meant participant recruitment for these studies has been minimal or put on hold. As part of their first progress report submission, Sydney Research requested a 6 month extension for both projects given the impact of the pandemic. OHMR confirmed on 27 September 2021 that this extension was approved and both projects have a revised completion date of 31 December 2023. Both projects will be required to provide annual progress reports and financial acquittals aligning with FY2021-22 and FY2022-23, and will need to provide their final summation report by 29 February 2024.

TRGS Round 6

The SLHD internal deadline for TRGS Expressions of Interest (EOIs) closed midnight 16 August 2021, and Sydney Research received 10 EOIs. After Sydney Research had expressed concerns about the impact of COVID-19 for the application and consultation process on behalf of SLHD and the

other participating Public Health Organisations, OHMR announced a 4 week extension to allow for application refinement, review and relevant approvals.

With the additional time and feedback of the Review Panel, Sydney Research worked closely with all the Chief Investigators to revise and strengthen their applications prior to submission to the Chief Executive. Five (5) applications have been endorsed by the Chief Executive. Sydney Research will be arranging the required approvals from partnering organisations across each project prior to their submission to OHMR on Monday 22 October 2021. Applicants will be notified of the outcomes from the internal review process following SLHD EOI submission to OHMR.

NSW Office for Health and Medical Research (OHMR) – Embedding Quality Research Research Governance Project

NSW OHMR and Sydney Research are leading a project investigating potential solutions towards a more effective and efficient research governance model. Ms Asra Gholami joined Sydney Research as the Project Manager for this initiative, to be guided by Adj A/Prof Vicki Taylor and Prof Terry Campbell, Research Director, St Vincent's Hospital Network.

Since her commencement, Ms Asra Gholami has developed a draft work plan covering the three phases of the project (Understanding the Problem, Formulating Potential Solutions, and Reforming the Process), undertaken an literature review and presented initial findings to the Expert Working Group, and is currently investigating a promising UK Governance model and its potential applicability within NSW.

The Expert Working Group have agreed and co-developed an anonymous survey for researchers and Research Governance Offices across NSW Local Health Services and Specialty Health Networks, which will be crucial as part of the first phase of the project in understanding the critical issues and barriers that currently exist with research governance.

The initial project direction has been endorsed by the Secretary, NSW Health, and will be presented at the next Embedding Quality Research Steering Committee on 21 October 2021. The project proposal will be refined according to the feedback received from the Steering Committee, and then presented to the Secretary for final review and endorsement. It is anticipated that the project proposal and initial data illustrating the problem that exists will be presented to the Senior Executive Forum in early 2022.

Intellectual Property and Commercialisation Support

Sydney Research have been in discussions with the Anne O'Neill, Director of Enterprise and International Partnerships and the OHMR team on a new initiative to provide structured business development support within NSW Local Health Districts to researchers with projects of commercial potential. Given the potential commercial exploitation of research and associated intellectual property matters, it has become evident that LHDS need increased support for innovation and commercialisation beyond what is currently provided both locally and through OHMR.

In tandem with a new NSW Health Intellectual Property and Commercialisation Framework that will be released over the coming month, OHMR have suggested a 12-month program to engage a service provider who will be embedded within the LHDs to work with research projects to develop business plans. The pilot program will seek to target high-quality research projects that are directly relevant to clinical, health service and population health practice in NSW. The program will be at no cost to the LHD's and will be sourced from the OHMR Commercialisation budget. If the pilot program is successful, OHMR will seek to implement the Program on a rolling basis.

With the support of Sydney Research, the initiative will be presented to the Embedding Quality Research Steering Committee on 21 October 2021 for their endorsement.

Clinical Trial Management System (CTMS) Initiative

On 9 September 2021, OHMR announced the successful vendor and implementation schedule for CTMS. The CTMS is an online system that will act as a central repository for clinical trial management, including electronic document storage, financial management, participant management, forecasting and automatic reporting.

Advarra (formally Bio-Optronics) were announced as the chosen vendor, due to their impressive system functionality, capacity to centrally manage large scale dispersed healthcare organisations and demonstrated experience in both the Australian sector and internationally.

The CTMS will be tested and developed over the remainder of 2021 with the guidance and support of the CTMS Steering Committee (involving Adj A/Prof Vicki Taylor and Penny Vogelzang) and the CTMS Working Group (involving Prof David Cook and Merela Ghazal). The pilot implementation of the system will occur at ISLHD and NSLHD from November 2021, with SLHD scheduled to implement the CTMS from August 2022 (Q3). Sydney Research have been working with OHMR on developing a communications and training strategy for the CTMS, which will include a NSW Health-wide communique, monthly webinars, onsite presentations, change managers and quick reference guides.

The Chief Executive, Director of Research, and Sydney Research have a meeting with Dr Tony Penna on Friday 1 October 2021 to discuss ongoing financial arrangements for the CTMS. OHMR will fully fund the cost of the CTMS for the first 3 years, LHDs will be responsible for contributing from 1 September 2024. It has been suggested that the cost per LHD is proportional to their current trial portfolio and forecasted growth.

Clinical Trials Alliance

Sydney Research has been involved in discussions to establish a collaboration between SLHD, NSW OHMR, the University of Sydney and Sydney Health Partners to strengthen the capacity, efficiency and impact of clinical trials in NSW. The primary objective of the Alliance is to establish processes and new infrastructure that will be universally accessible and secure NSW as a global destination for clinical trials

A monthly Think Tank series led by Prof Meg Jardine, Director, NHMRC Clinical Trial Centre has been arranged with Sydney Research, Dr Teresa Anderson AM, Dr Antonio Penna, Executive Director, OHMR, Prof Robyn Ward, Executive Dean and Pro-Vice Chancellor (Medicine and Health), University of Sydney, and Prof Don Nutbeam, Executive Director, Sydney Health Partners. The most recent meeting was held on Tuesday 28 July 2021, where it was agreed that a proposal outlining an initial strategy for the Alliance would be developed to seek the support of the NSW Health Secretary and University of Sydney. A Project Manager has been appointed by the NHMRC Clinical Trial Centre to support the development of this proposal prior to the next Think Tank meeting on Monday 25 October 2021.

Medihood

Dr Duncan Macinnis, Director of Stakeholder Engagement (NSW and ACT), MTPConnect and member of the Sydney Research Council contacted Sydney Research to inform the District of the Medihood device that potentially could support our services during COVID-19. Medihood is a personal ventilation hood and portable solution to the negative pressure room created to improve the care of COVID-19

patients in isolation, while also protecting hospital staff from infection. It is a transparent hood designed to contain expired aerosols, which are then drawn out by an extraction unit and filtered through a H13 HEPA filter.

Sydney Research coordinated a demonstration of the device and meeting with the Medihood, Melbourne based team, with the Executive Director of Medical Services, Clinical Governance and Risk, and a number of Staff Specialists and Clinical Nurse Consultants in Infection Control, Infectious Diseases, Emergency Medicine and Intensive Care. An additional internal meeting was also held to determine the clinical applicability, use and risks associated with the device. There were some concerns raised by the SLHD staff in attendance with regards to potential complacency with PPE use, limiting use to patients who were calm and compliant with treatment, the bulky nature of the device, and the potential burdensome nature of cleaning the device. The infection control team also raised that there was insufficient data to demonstrate the effective use of multiple devices in the same room, cleaning instructions did not specify how to decontaminate the frame, and that may encourage complacency with infection control as it was constructed to be intuitive and no training required. Given these concerns, it was agreed with the Chief Executive and A/Executive Director of Operations that the District would not proceed with a pilot of the device at this stage, but would keep it in mind as a future option for a red alert, high transmission situation.

The George Institute's Join Us Registry

Adj A/Prof Vicki Taylor and Penny Vogelzang participated on the Join Us Steering Committee on Monday 20 September 2021, where a new communications approach was discussed and all partnering organisations would be provided with a series of communication materials and messaging to encourage their staff to become involved in the registry. Sydney Research have provided SLHD Research and SLHD Strategic Relations and Communications team with this material, and have circulated via the Sydney Research e-Update and Twitter platforms.

Sydney Research have also arranged for Prof David Cook, Clinical Trials Governance, Innovation and Operations Lead to be involved in the Join Us Governance Sub-Committee, and Dr Karena Conroy, PFCC Consumer Engagement in Research Coordinator, SLHD.

Sydney Biomedical Accelerator Complex

Together with Health Infrastructure NSW and the University of Sydney, Sydney Research continues to lead the planning for the Sydney Biomedical Accelerator (SBA) Complex, a new world-class biomedical innovation complex to be located within the RPA and University of Sydney campuses. Dr Teresa Anderson AM and Adj A/Prof Vicki Taylor remain the SLHD Executive Leads on this project.

An internal deadline of December 2021 has been set for a revised Strategic Business Case which has been requested by the Secretary, NSW Health and SLHD Chief Executive. The Business Case will comply with the requirements set for a Gate 1 Assurance Review reinforcing that the SBA is aligned with local service needs, system-wide objectives and Government policy using a collaborative approach.

To facilitate the delivery of the Business Case and according to the NSW Health Facility Planning Process, the following committees have been established

- SBA Executive Steering Committee, chaired by Rebecca Wark, Chief Executive, Health Infrastructure NSW
- SBA Project Planning and Delivery Committee, chaired by Dr Teresa Anderson AM, Chief Executive, SLHD

- SBA Internal Working Group, chaired by Adj A/Prof Vicki Taylor, Executive Director, Sydney Research and Steve Hall, Senior Project Director, Health Infrastructure NSW
- SBA Joint Working Group (SLHD/HINSW/USYD), chaired by Adj A/Prof Vicki Taylor, Executive Director, Sydney Research and Steve Hall, Senior Project Director, Health Infrastructure NSW

Dr Teresa Anderson and Adj A/Prof Vicki Taylor as her delegate have also been invited to join the University of Sydney SBA Project Working Group, which is predominately focussing on the infrastructure planning process and design competition application for the University's Building C with their confirmed \$150 million investment.

Sydney Research have been working closely with Steve Hall, Senior Project Director, Health Infrastructure NSW to engage the appropriate consultants to facilitate planning. Mr Sam Sangster, Managing Director, KLOK Advisory and former Chief Executive Officer for Health Infrastructure NSW has been engaged to develop an industry engagement and market sounding approach for the SBA. Health Infrastructure are currently advertising for a new Project Director and will soon engage a Probiy Advisor and Ernst and Young as the Project Manager to support Business Case development and market sounding.

Sydney Health Partners

The Sydney Research team continues to work closely with the Sydney Health Partners (SHP) team to support the following key initiatives:

Encouraging More Clinical Trials in Australia

- The SHP Clinical Trials Advisory Panel (CTAP) has been established to progress this SHP initiative, in collaboration with the NHMRC Clinical Trials Centre and the NSW OHMR. SLHD is a key contributor to this initiative with both Sydney Research and SLHD Research represented on the Advisory Panel, which will next meet on Monday 1 November 2021 to discuss the progression of the centralised recruitment service that was implemented at the Institute of Bone and Joint Research, Royal North Shore Hospital to support and reduce the administrative burden associated with participant recruitment for clinical trials.
- SHP have also partnered with the University of Sydney to develop Electronic Trial Management Folders and associated Guidelines, which will be made publicly available on the SHP website later this year.

SHP Clinical Academic Groups

- Groups of clinicians and translational researchers are now invited to apply to establish a Sydney Health Partners (SHP) Clinical Academic Group.
- Under a specific clinical discipline or population group, these Clinical Academic Groups aim to accelerate the transfer of research innovation into health care improvements, and replace the previous themes and streams component of the SHP Strategy.
- Financial support will be available for each CAG with funding up to \$50,000 per annum as well as substantial in-kind support from the SHP Secretariat.
- The deadline for applications is 4 October 2021.
- Sydney Research has circulated the opportunity and will assist with any applications submitted by SLHD staff.

Sydney Research Council

The next Sydney Research Council meeting has been scheduled for Tuesday 28 September 2021, and will have presentations by Prof Richard Scolyer and Prof Georgina Long, Co-Medical Directors,

Melanoma Institute Australia – a new partner of Sydney Research - and Dr Kate McBride and Dr Daniel Steffans from the RPA Institute of Academic Surgery and Surgical Outcomes Research Centre (SOuRCe).

MTP Connect – Targeted Translation Research Accelerator

Federal Health Minister, the Hon. Greg Hunt has announced 5.2 million in funding for seven diabetes and cardiovascular disease research projects through the MTPConnect Targeted Translation Research Accelerator (TTRA) Initiative. Sydney Research have recognised and would like to congratulate the following successful recipients:

- **A/Professor Steven Wise and Professor Martin Ng (Sydney Local Health District, University of Sydney)** was awarded \$739,128 for their project titled, Local Regulation of Inflammation for the Treatment of Peripheral Arterial Disease.
- **Professor Shaun Jackson (Sydney Local Health District, Heart Research Institute, University of Sydney)** was awarded \$750,000 for his project titled, Development of novel safe adjunctive antithrombotic therapies for the improved treatment of acute ischaemic stroke

NHMRC Successful Grants

The outcomes for the 2021 National Health and Medical Research Council (NHMRC) Investigator Grant and Centres of Research Excellence were released, a total of \$40.25 million successfully secured across the partnership. Sydney Research have recognised the success of the following individuals via written correspondence and through the Sydney Research social platforms – Twitter and e-Update. A summary of the recent NHMRC Investigator Grant and Centres of Research Excellence outcomes across the Sydney Research Partnership:

- **Professor Nicholas Buckley (Royal Prince Alfred Hospital, University of Sydney)** Investigator Grant and \$1.5 million in funding for the project '*applied research to tackle the Australian poisoning epidemic*'
- **Professor Georgina Long (Co-Medical Director, Melanoma Institute Australia)** Investigator Grant and \$3.9 million in funding for '*Towards Zero Deaths from Melanoma: Innovative Clinical Trials with Multi-omics Analyses*'
- **Professor Gregory Fox (Woolcock Institute, Royal Prince Alfred Hospital, University of Sydney)** Investigator Grant and \$3.1 million in funding for '*New directions in global tuberculosis control*'
- **Dr Sudarshini Ramanathan (Concord Repatriation General Hospital, Brain and Mind Centre)** Investigator Grant and \$1.5 million for '*Defining pathogenic mechanisms to improve diagnosis and treatment of antibody-associated neurological disorders*'
- **Professor Julie Redfern (George Institute, University of Sydney)** Investigator Grant and \$2.8 million in function for '*Modernising cardiac rehabilitation and secondary prevention of heart disease*'
- **Dr Angela D'Rozario (Woolcock Institute, University of Sydney)** Investigator Grant and \$1.5 million in funding for '*Investigating sleep biomarkers of cognitive impairment and improving cognitive outcomes through targeted sleep interventions in adults at risk for dementia*'
- **Professor Oliver Piguet (Brain and Mind Centre)** Investigator Grant and \$2 million in funding for '*Maximising quality of life in frontotemporal dementia*'
- **Professor Sharon Naismith (Charles Perkins Centre and Brain and Mind Centre)** Investigator Grant and \$2.1 million in funding for '*Improving dementia outcomes with new targets, trials and national standards*'

- **Professor Peter Cistulli (Charles Perkins Centre)** Investigator Grant and \$2.4 million in funding for '*A deadly duo: Defining the link between Obstructive Sleep Apnoea and Cardiovascular Disease*'
- **Dr Jacob Crouse (Brain and Mind Centre)** Investigator Grant and \$650 thousand in funding for '*Investigating body clock dysfunction in mood disorders using wearable sensors*'
- **Professor Anne Cust (University of Sydney, Melanoma Institute Australia)** Investigator Grant and \$2 million in funding for '*Tailored approaches to improve prevention and early detection of melanoma and other skin cancers*'
- **Dr Elie Matar (Royal Prince Alfred Hospital, University of Sydney)** Investigator Grant and \$250 thousand in funding for '*From dreams to delirium and dementia: Cognitive fluctuations as a window into novel biomarkers and therapeutic targets for neurodegeneration*'
- **Dr Anna Lene Seidler (NHMRC Clinical Trials Centre)** Investigator Grant and \$600 thousand in funding for '*NextGen evidence synthesis to maximise data utility and improve health outcomes*'
- **Professor Ollie Jay (Charles Perkins Centre and Sydney School of Health Sciences)** Investigator Grant and \$2 million in funding for '*Heat and Health: Building resilience to a warming planet across the human lifespan*'
- **A/Professor Chee Khoon Lee (NHMRC Clinical Trials Centre)** Investigator Grant and \$1.8 million in funding for '*Improving outcomes in advanced lung and gynaecological cancers through innovations in clinical trials*'
- **Professor John Simes (NHMRC Clinical Trials Centre)** Investigator Grant and \$2.7 million in funding for '*Innovations in Clinical Trials Research: from personalised medicine to population health*'
- **Dr Giovanni Ferreira (Institute for Musculoskeletal Health)** Investigator Grant and \$650 thousand in funding for '*Improving back pain care in Australia*'
- **Dr Ramon Landin-Romero (Brain and Mind Centre)** Investigator Grant and \$1.5 million in funding for '*Bridging the clinico-pathological divide: improving neuroimaging analysis and applications in dementia*'
- **Professor Julie Leask (Sydney Nursing School)** Investigator Grant and \$2.3 million in funding for '*Behavioural and social science to close gaps in vaccination coverage*'
- **Professor Simone Pettigrew (The George Institute)** Centres of Research Excellence and \$2.5 million in funding for '*Healthy Food, Healthy Planet, Healthy People*'
- **Professor Kirsten McCaffery (University of Sydney)** Centres of Research Excellence and \$2.5 million in funding for '*Wiser healthcare: better value care for all Australians*'

Other Activities

In addition to the above, Sydney Research have participated or continue to support the following key activities within SLHD and across interagency partners:

- One Gov Committee – Deep Dive into the new Tech Central branding
- EVIDENCE Steering Committee
- SLHD Staff forums
- Consultation with MTPConnect to discuss potentially introducing a new Clinical Entrepreneur Program in Australia
- Join Us Steering Committee
- Catch-up with Prof Paul Young to discuss the launch of Ab Initio Pharma and planning for Biodesign Sydney 2022.
- Camperdown Ultimo Alliance
- Clinical Trials Steering Committee

- Introductory briefing with the Research Australia team
- Consultation with Matthew Proft, Director, Tech Central on innovation community activation

Through the Sydney Research Council, communications and social media, Sydney Research is promoting internal and partner educational and research activities.

- The Sydney Research weekly electronic newsletter, e-Update, has an audience of 823 subscribers
- The PFCC Research Working Group bi-monthly newsletter, 'Consumers in Research', has an audience of 140 subscribers.
- @SydneyResearch currently has 1,163 followers on Twitter

COVID-19 UPDATE

On 30 September, staff who are not compliant with the Public Health Order in relation to mandatory vaccinations will not be able to perform work, whether from a NSW Health site or remotely. The District has worked towards this requirement including a comprehensive review of all staff with the District and their vaccination status. As at 30 September, all staff who are working have at least their first dose of COVID-19 vaccine.

SLHD

- Central coordination of COVID-19 activities through the SLHD Emergency Operations Centre (EOC), central coordination of supply and ordering of PPE, equipment and other issues.
- Special Flying Squad Teams established to support community testing, Special Health Accommodation and other sites.
- Mobile Vaccination Clinics established to provide access to vulnerable communities to COVID-19 vaccination.
- Dedicated Outbreak Management Teams established to provide oversight and coordination for outbreaks within Social Housing Complexes, Residential Aged Care Facilities (RACFs), Disability Homes and Commercial Venues.
 - 18 RACF OMTs have been established, 16 have been declared closed and two sites are ongoing (St Vincent Haberfield and Greek Orthodox Community).
 - 38 Group Homes impacted by COVID-19 since 20 July 2021, 37 have been declared closed and one is ongoing (Aruma 42 Moore Street Campsie).

SLHD Facilities

- Expanded ICU capacity at RPA, Concord and Canterbury Hospitals in the event of surge in demand due to an outbreak.
- Expanded Renal Dialysis surge capacity to match projected need in the event of an outbreak developed.
- Expanded inpatient COVID-19 ward spaces made available and utilised to manage COVID-19 positive and close contacts at RPA, Concord and when required Canterbury Hospitals.
- Continued Staff and Visitor Screening Stations to check all people entering the health facilities established at all sites.
- Expanded community based COVID-19 Screening Clinics established Eddy Ave, Redfern, Summer Hill, and Roselands, capable of seeing between 1-2,000 people per day. Working closely with private providers to ensure rapid establishment of COVID-19 testing sites to assist with outbreak management.

- Continued to ensure COVID-19 Clinic surge capacity
- Expanded facility based COVID-19 Screening Clinics established at RPA, Concord and Canterbury Hospitals capable of seeing between 400-1000 people per day.

SLHD Public Health Unit

- Continued the expansion of Environmental Health Officer inspections of food outlets and commercial businesses with SLHD to ensure they have and comply with appropriate COVID-19 Safety Plans.
- Continued inspections by Environmental Health Officer inspections of commercial businesses within the quarantine hotels to ensure they have and comply with appropriate COVID-19 Safety Plans.
- Enhanced Environmental Health Officer inspections of food outlets with SLHD to ensure they have and comply with appropriate COVID-19 Safety Plans.
- Enhanced and expanded Contact Tracing through the SLHD Public Health Unit for locally acquired cases. Support to NSW Health and the State of Victoria in providing contact tracing to assist their outbreak management team.
- Assistance provided to NSW Health in providing Special Health Accommodation for incoming international passengers under the Public Health Order requiring medical supervision.

Airport and Railway Operations

- Continued the SLHD COVID-19 Testing team to support the SESLHD Screening Team at the international airport terminal.
- Continued the COVID-19 Screening, Testing team and Health Border Control team at the Domestic Airport (T2 & T3) to screen and validate permits for all passengers alighting from flights originating from other states in response to outbreaks.
- Continued the NSW Health Testing Program able to be established at the Central Train Station as required to support NSW Health

SLHD Tiger Teams and Flying Squad

- Continued the use of the Special Flying Squad Teams to support community testing, Special Health Accommodation and other sites and support to facilities and services in COVID-19 operations.
- Continued the use of the special purpose vehicle to run mobile COVID-19 Testing Clinics.
- Tiger teams remain available to support staff if required
- Continuation of Fit Testing for staff
- Commencement of Fit Testing for staff from high risk areas, note this is on top of existing Fit Checking that currently occurs.

SLHD COVID-19 Support Centre

- Continued the SLHD COVID-19 Support Centre to answer enquiries regarding from people seeking assistance with general COVID-19 enquiries.
- Continued enhancement of the SLHD COVID-19 Support Centre to assist with enquiries regarding NSW Health Testing Program (Saliva Testing).
- Continued enhancement of the SLHD COVID-19 Support Centre to provide assistance to GPs with results from patients undertaking COVID-19 testing.

- Provision of assistance with members of the general public who have difficulty booking into either the NSW Health Vaccination Centre or the RPA Vaccination Centre or require to change their appointment date due to illness, self-isolation or other factors.
- Support to the Quarantine Facility Vaccination Program.

NSW Health Testing and Vaccination Program for COVID-19

- Coordination and support to establish the NSW Health Testing Program (Saliva Testing) for Quarantine Facilities (NSW Police managed quarantine hotels).
- Continued management of the SLHD COVID-19 Support Centre to provide phone support to people required to undertake saliva testing as part of the NSW Health Testing Program.
- Continued management of NSW Health Testing Program for quarantine and border workers at Sydney Airport.
- Daily compliance monitoring of Quarantine Hotel, SHA and International Airport saliva testing and vaccination status. 100% of staff working in these areas are at least partially vaccinated.
- Opening and running drive through saliva testing clinic for airport transport drivers to ensure they have the ability to quickly and efficiently participate with the NSW Health Testing Program.
- Daily compliance monitoring of International Flight Crew drivers saliva testing and vaccination status.

COVID-19 Vaccination Hub and Vaccination Clinic

Since February 2021, Sydney Local Health District has completed more than 1.3 million COVID-19 vaccinations. It has continued to support the NSW Health Vaccination Program through a range of fixed and mobile vaccination clinics including the following:

- NSW Health Vaccination Centre – (1 Figtree Drive) with an ability to vaccinate 12,500 per day
- WaterView in Bicentennial Park – with the ability to vaccinate 4,000 per day.
- Canterbury Hospital Clinic – with the ability to vaccinate 500 per day
- RPA Vaccination Clinic – with the ability to vaccinate 4,500 per day
- Sydney Airport Clinic – with the ability to vaccinate 600 per day
- Redfern (Koori) Clinic – now opened in 119 Redfern Street 5 days per week.
- Ultimo Clinic – now open in Ultimo Community Centre 5 days per week.
- Mobile Vaccination Clinics x 3 with the ability to vaccinate between 400-750 per clinic per day.
- Outbreak Management vaccination teams to support and vaccinate people identified by the Outbreak Management Team leads.
- Aboriginal Task Force established to provide assistance to aboriginal families who have been affected by COVID-19.
- Commenced vaccination for returned travellers prior to discharge across 18 Quarantine Hotels.
- Social Housing Vaccination teams established to target residents of various social housing areas with the District. On 4 October over 76% of Social Housing tenants with the District received at least their first dose and 65% are fully vaccinated.

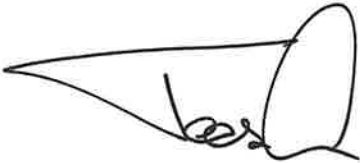
Continued management and enhancement of Flying Squad model to provide COVID-19 vaccinations to RACF, Ports, Disability Homes and other areas, in addition to in-reach to selected speciality clinics at RPA and Concord Hospital.

Special Health Accommodation

- Continued to provide Special Health Accommodation for incoming international travellers under the Public Health Orders who are symptomatic on arrival or who become positive during quarantine in a NSW Police managed hotel.
- Continued to provide accommodation for international travellers requiring additional care that is not available within the NSW Police managed quarantine hotels
- Continued to provide specialist accommodation for aircrew who require to use CPAP.
- Continued to provide accommodation for people from the community who are positive or close contacts who are unable to safely self-isolate in their own homes.
- At the end of August 2021, the SHA had 907 patients of which 709 were positive cases.

rpavirtual

- On 31 August, 2021, Rpavirtual was providing clinical care to 1057 COVID positive patients in the community and 709 positive patients in the SHA.



Dr Teresa Anderson AM

Chief Executive

Date: 18.12.21