

Sydney Local Health District

Meeting One Hundred and Forty Five of the Board

Date: Monday 15 April 2024
Time: 9.00am – 11:00am
Venue: Teams / SLHD Boardroom
Chair: The Hon, John Ajaka, Chair

1. Present and apologies

The Hon, John Ajaka, Chair
Dr Mary Haines, Member
Mr Richard Acheson, Member
Dr Paul Hosie, Member
Mr John McGee, Member
Ms Kerry-Anne Hartman, Member
Ms Ronwyn North, Member
Ms LaVerne Belleair, Member
Mr Raymond Dib, Member (joined 9:20 until meeting close)
Dr Teresa Anderson, AM, Chief Executive

Apologies

Adj/Professor Karen Crawshaw PSM, Member
Mr Rob Furolo, Member

In attendance

Ms Sarah Reeves, Acting Secretariat (9.00am – 10.30am)
Dr Alicja Smiech, Chair, Medical Staff Executive Council (9.00am – 10.30am)
Mr Sydney Pham, GHMP Trainee (9.00am - 10.30am)
Mr Marc Pelusi, Acting Chief Information Officer (10:15am – 10:30am)
Ms Claire Peirce, Executive Officer, Digital Health and Innovation (10:15am – 10:30am)
Mr Sushil Gyawali, End User Support Officer, Digital Health and Innovation (10:15am – 10:30am)

2. Welcome

The Chair acknowledged the traditional owners of the land.

The Chair welcomed members and guests to meeting one hundred and forty five 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.

John McGee advised that he was no longer on the board of Infrastructure Australia.

There were no additional new conflicts of interests to declare or to be added/removed in the Register at this meeting.

4. Confirmation of previous minutes

4.1 Minutes of the previous meeting held 25 March 2024.

The minutes of the meeting held on 25 March 2024 were moved and seconded as a true and accurate record of the meeting.

The Chair signed the minutes.

4.2 CE Report – March 2024

The Chair declared that the CE Report for March 2024 was ready for publication.

5. Matters arising from the previous minutes

5.1 Action sheet

The Board received, read and noted the items on the action sheet.

6. Patient Story

The Board received, read and noted the de-identified positive patient story from RPA Virtual Hospital.

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 2024

The Board received and noted the Board Calendar for 2024.

8. Chair's Report

The Chair provided a verbal report.

9. Chief Executive's report

The Board received, read and noted the Chief Executive's Report for March 2024 including:

- The District continues to be at Performance Level 1.

- SLHD is maintaining high safety and quality standards. Endocrine and peritoneal complications have improved.
- NWAU is increasing. The work staff are doing around NWAU is coming to fruition.
- SLHD is performing well against other KPI's in relation to peer districts.
- Discussion occurred on factors driving the increase in expenditure
- There is significant expense in premium staffing.
- SLHD is working with the ministry to return to budget.
- The expenditure review committee is addressing the budget issues. The Executive Director of Operations is working with the managers within her portfolio to address the issue of hours worked.
- Activity is increasing due to the work done on educating staff about recording activity.
- Separations have increased however this is not translating into NWAU. The ministry understand this.
- Discussion is occurring with the ministry about meeting the shortfall.
- All Capital Infrastructure and Engineering (CIE) programs are going well.
- The CT Scanner for the ED at CRGH is being commissioned.
- The Ambulatory Care Endoscopy (ACE) unit is being finalised.
- The redevelopment of RPA is progressing well and the redevelopment of Canterbury Hospital has commenced.
- Capital investment proposals have been submitted for stage two of both CRGH and RPA redevelopments.
- Sydney Research is going well.
- The gateway report for SBA was very positive.
- Proactive Resolutions have completed their work regarding Concord Hospital.
- ASMOF will be providing messaging about not doing excessive overtime from a wellbeing perspective.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – February 2024

The Board received, read and noted the SLHD Board Reporting Pack for February 2024.

9.1.2 Performance Indicators – January 2024

The Board received, read and noted this report.

9.1.3 HealthPathways and e-Referral Dashboard Report

The Board received, read and noted this report.

9.1.4 MoH Board Quarterly Report for the SLHD

The Board noted the report for the period October to December 2023 was not available.

9.1.5 HAC Committee Report – February 2024

The Board received, read and noted this report.

9.1.6 Aboriginal Workforce Report (six monthly)

The Board noted this report is due in June 2024

9.2 Project updates

9.2.1 Lifehouse

The Board noted there were no further updates in the Chief Executive's Report.

9.2.2 Macquarie International Private Hospital

The Board noted there were no further updates in the Chief Executive's Report.

9.3 Capital Works Report

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

9.4 Clinical Governance and Risk Reports

(i) Quarterly Report

The Board noted this report is due in June 2024.

(ii) Comprehensive Care

The Board received, read and noted this report.

(iii) SLHD Quarterly Risk Report

The Board noted this report is due in June 2024.

(iv) Emergency Management Report (Quarterly)

The Board noted this report is due in June 2024.

9.5 Audit and Risk Committee Report (period 15 November 2023 – 4 March 2024)

The Board received, read and noted this report.

9.6 Facility Reports – February 2024

(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.

T Anderson noted the position of General Manager, CRGH has been advertised. Joseph Jewitt has been acting in the role since September 2022. Permanent recruitment has been delayed by a year to allow for issues to be resolved prior to recruitment.

(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 this 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.

T Anderson noted that RPA's activity is above 2018/19 levels and they are reaching their activity targets. The number of patients in ED and their acuity continues to grow, even though non-acute patients are redirected to more appropriate services.

(x) RPA Virtual Hospital

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

R North noted that she raised the fact that cyber security risk and the risk being offline are not noted in the top ten risks for RPA Virtual Hospital, at the Finance, Risk and Performance Management meeting. Margy Halliday, SLHD Risk Manager agreed to provide advice on the reason for this.

(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) Canterbury / Croydon / Marrickville / Redfern Community Health Centres and RPA HealthOne Green Square

The Board received, read and noted this report.

10. Matters for approval / resolution

- 10.1 Brief – Board to provide suggestions on replacement of Ms. Gerardine Brus as an Independent ARC Member.

T Anderson noted that Jim Mitchell will complete his term as the chair of ARC on 30 June 2024. Gerardine Brus was supported to commence the role of chair from 1 July 2024.

J Ajaka asked for recommendations to take over the vacant position of Independent ARC member to be sent to Teresa Anderson or himself.

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 11 March 2024.

- 11.2 Education and Research Committee

The Board received, read and noted the minutes of the meeting was held on 19 March 2024.

- 11.3 Strategic Communication and Partnerships Committee

- (i) Minutes of Meeting

The Board received, read and noted the minutes of the meeting held on 2 April 2024. T Anderson noted the committee is progressing well.

- (ii) Bi-Monthly Report

The Board noted this report is due in April 2024.

- 11.4 Audit and Risk Committee

The Board read, received and noted the minutes of the meeting held on 14 March 2024.

- 11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 27 March 2024. J Ajaka noted that John Sammut is taking a year's leave of absence. J Ajaka and T Anderson have determined that T Anderson and A Hallahan will co-chair in his absence.

11.6 Health Care – Clinical Council

The Board noted the next meeting will be held on 22 May 2024.

11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 3 May 2024.
It was noted that the TOR for this meeting is determined by the MoH.

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

The Board noted the minutes of the meeting held on 3 April 2024 were not available.

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board noted the minutes of the meeting held on 26 March 2024 were not available.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board read, received and noted the minutes of the meeting held on 19 March 2024.

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 13 March 2024.

R North enquired if the number of VMOs noted as resigning or retiring is cause for concern. T Anderson noted that SLHD has the lowest medical staff turnover in the state and that SLHD currently employs more medical staff than in previous years. Retiring doctors are replaced by younger medical staff.

12.3 Finance Leaders Forum

The Board received, read and noted the minutes of the meeting held on 20 March 2024.

12.4 NSW Health / SLHD Performance Review Meeting

The Board noted the meeting was held on 15 February 2024.

12.5 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting held on 26 March 2024.

12.6 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted the minutes of the meeting held on 12 March 2024.

12.7 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board read, received and noted the minutes of the meeting held 20 February 2024.

12.8 Security and Violence Prevention Committee

The Board received, read and noted the minutes of the meeting held on 12 March 2024.

12.9 Contracts Implementation Committee

The Board read, received and noted the minutes of the meeting is to be held on 25 March 2024.

12.10 Enforceable Undertaking

The Board noted the meeting scheduled for 14 March 2024 was cancelled.

12.11 Concord Forensic Mental Health Executive Steering Committee

The Board read, received and noted the minutes of the meeting held on 21 February 2024.

12.12 RPAH Redevelopment Executive Steering Committee

The Board read, received and noted the minutes of the meeting held on 21 February 2024.

12.13 Canterbury Hospital Redevelopment Executive Steering Committee

The Board read, received and noted the minutes of the inaugural meeting held on 20 March 2024.

12.12 Sydney Bio-Medical Accelerator Executive Steering Committee

The Board read, received and noted the minutes of the meeting held on 19 February 2024.

13. Matters for Noting

13.1 Concord Hospital Restorative Actions.

T Anderson noted that the restorative actions are progressing well.

13.2 RPA Virtual Hospital Strategic Action Plan 2024 & 2025.

The Board received, read and noted this report.

14. Other Business

14.1 Matters raised by Board Members

T Anderson noted that when sexual harassment complaints are raised there are procedures to follow when there is evidence. Support is provided to both the staff member who makes the allegations and the staff member who has allegations against them. SLHD has legal representation for dealing with these matters.

J Ajaka requested a schedule of courses that all board members need to complete.

T Anderson noted the Bondi Junction incident and the excellent job done by NSW Ambulance. South Eastern Sydney LHD (SESLHD) set up in the mall at Bondi Junction to provide mental health support. There is an increase in the number of people calling their support lines. All units are taking turns in staffing the lines. SLHD did receive some patients

post incident. T Anderson requested that the message to staff from the Chief Executive regarding the incident is forwarded to all board members.

14.2 Update on accessing @health emails for Board Members

M Pelusi presented on the reasons why it is important for Board Members to use their @health email, how to set it up and where to obtain support. The presentation will be circulated to all board members.

T Anderson noted that the use of @health emails is preferred as SLHD has greater control over the level of security.

15. Next Meeting

The next meeting will be held on Monday 20 May 2024 at 9.00am. The remainder of the dates for the Board Meetings will not change.

The meeting closed at 10.30am


Chair


Date

**Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board
April 2024**

PERFORMANCE

According to the Ministry of Health Framework, the District has been moved to Performance Level 1.

Safety and Quality

During the month of February 2024, 100% of all Serious Adverse Events were reviewed within 60 days. YTD February 2024, 97.66% of all Serious Adverse Events were reviewed within 60 days.

Mental Health Readmissions within 28 days for YTD December 2023 decreased to 9.3% when compared to 13.7% for the same time last year. The General Manager and Clinical Director of Mental Health continue to focus on strategies to improve performance.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation, reporting 5.4% YTD January 2024, which is below the State average of 5.8%. Unplanned Emergency Representations (same ED within 48 hours) were 4.3% YTD February 2024 and is lower than the State average of 4.8%.

Staphylococcus Aureus Bloodstream Infections (SABSI) below target (1.0/10,000 bed days), with 1.4 per 10,000 bed days for the month of January 2024. There were no Central Line Associated Bloodstream (CLAB) infections reported in January 2024. The District remains vigilant with ongoing education and training in Infection Prevention and Control (IPC) strategies and CLAB awareness discussions at ICU morbidity and mortality meetings are continuing.

IPC facilitators continue to be deployed to high-risk clinical streams across the District. The District aims to have no Hospital Acquired Infection by 2025.

The District performed well in relation to 12 of the 14 Hospital Acquired Complications (HACs) which is a significant improvement on this time last year. Although the District is under performing in relation to Hospital Acquired Endocrine Complications and Third or Fourth Degree Perineal Lacerations, improvements have been made in relation to both of these HACs.

The rate of **Hospital Acquired Endocrine Complications** was 34.5 per 10,000 episodes, which is above the target of 33.2 for the 12-month rolling period of January 2023 –December 2023. The instances of Hospital Acquired Endocrine Complications decreased by 26 during the period, when compared to the previous 12-month rolling period and have also improved on last month's rate of 34.9.

The rate of **Third or Fourth Degree Perineal Lacerations** in Hospitals was 355.4 per 10,000 episodes, which is above the target of 349.1 for the 12-month rolling period of January 2023 –December 2023. The instances of Third or Fourth Degree Perineal Lacerations decreased by 18 during the period, when compared to the previous 12-month rolling period and have also improved on last month's rate of 364.4.

The District has remained focused on improving its performance in relation to all HACs, with facilities/services providing monthly updates to their HAC Action Plans. The SLHD HAC Steering Committee continues to meet with the District HAC Operational Coordinators and Clinical Leads for each of the HACs supporting facilities and services in the development of strategies to reduce HACs District wide. "Deep Dives" into strategies for specific HACs are provided to the District Clinical Quality Council.

Workforce

The District continues to focus on strategies to ensure our workforce has the appropriate skill mix and levels to meet demand. In February 2024, premium staff usage decreased by 0.54 for Nursing Staff and decreased by 0.39 for Allied Health when compared to the same period last year. Medical Staff saw premium staff usage increase by 0.17 when compared to the same period last year.

Activity

There has been a **7.79%** increase in the number of separations for the month of February 2024 (13,622), when compared to the same period last year (12,638). However, there is still a decrease in separations when compared to February 2018/19 (13,929). In February 2024, the District's occupancy rate decreased by 7.60% to 84.08% when compared to the 91.67% reported in February 2023. It should be noted that the transition from the Health Information Exchange to EDWARD has resulted in data quality issues, with bed occupancy among the impacted data elements. The Ministry of Health is working to address these issues.

There were 14,852 attendances to the District's Emergency Departments in February 2024, which is a 3.66% increase from 14,327 in February 2023. For the month of February 2024, average complexity of emergency presentations remains relatively similar to same period last year with 0.69% increase in average NWAU 0.144 in February 2023 to 0.145 in February 2024.

There has been a decrease in unplanned separations from 6,901 in February 2018/19 to 6,231 in February 2023/24. This is due to the diversion of this work to other hospitals and services; including outreach aged care services and RPA Virtual.

Emergency Treatment Performance (ETP) (formerly NEAT)

The District continues to work on its ETP performance. February 2024 has been a very challenging month for our hospitals. There was a 1.89% decrease in ETP during February 2024 to 50.85%, when compared to the same period last year. For the month of February 2024, there was an increase of 7 patients seen within target, compared to the same period last year. Admitted ETP was below target (50%) for the month of February 2024 at 29.92%, which is a 0.47% increase when compared to the same period in the previous year.

Transfer of Care

The District performed below target (90%) for transfer of care (TOC) in February 2024, with 87.20% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. This is a decrease of 6.85% on last month and a 2.93% increase when compared to the performance of 84.27% for the same period last year. TOC continues to be impacted by the increased presentations. Continued monitoring of this is occurring, with TOC and ED performance discussed at the District's daily ETP meeting.

ED Triage

The District achieved triage Categories 1, 2 and 5 targets for the month of February 2024. Triage Category 3 performed below target (75%) in February 2024 with 67.66% of Category 3 patients seen in 30 minutes. Triage Category 4 performed below target (70%) in February 2024 with 68.41% of Category 4 patients seen in 60 minutes.

Planned Surgery

There was an increase of **362** planned surgeries performed in SLHD facilities in February 2024 when compared to the same period in the previous year, representing an increase of **16.71%** (excluding Collaborative Care surgery). Collaborative Care arrangements have ceased for 2024.

For the month of February 2024, SLHD maintained 0,0,0 surgical performance for elective surgery targets. YTD February surgical patients not ready for care increased by 6.86% (92) when compared to the same period last year.

Emergency Surgery

There were 29 additional emergency surgeries performed in the month of February 2024 when compared to the same month last year, representing a 2.39% increase.

Community Care and Hospital in the Home

The District has continued to manage its activity through the support of Sydney District Nursing, which manages over 1,000 patients per day in the community, who would otherwise be seen in Hospital. February 2024 Hospital in the Home overnight separations increased by **37.82%** when compared to the same period last year as activity returns to normal.

NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

NWAU Activity against Target

The District remains under target for NWAU activity, with a -4.86% variance for January 2024, excluding Dental. This is an improvement on last month's year to date result which was -6.94% variance to target. There has been a considerable improvement in non-admitted performance to target from -8.51% last month to 1.85% over target for January YTD. Highlighting the significant work undertaken by the District to ensure all activity is being captured.

Work is continuing with the Ministry to address data issues associated with the transition from the Health Information Exchange to EDWARD, with NWAU among the impacted data elements. The Ministry of Health is working to address these issues.

Stream	Target	Actual	Variation	Variation %
Acute*	100,980	95,008	-5,972	-5.91%
ED	14,991	15,189	197	1.32%
NAP**	27,460	27,967	507	1.85%
SNAP	8,236	8,230	-6	-0.07%
MH Admit	13,601	11,460	-2,141	-15.74%
MH NAP	6,256	5,343	-913	-14.59%
Total	171,525	163,197	-8,328	-4.86%
Dental DWAU	37,723	29,003	-8,720	-23.12%
Dental NWAU#	4,461	3,430	-1,031	-23.12%
Total (NWAU)	175,986	166,627	-9,359	-5.32%

*318 uncoded episodes

**Inclusive of COVID clinics and the Special Health Accommodation

#NWAU = 615/5200*DWAU

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of February 2024, 15.43% (2,041 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was an increase of 115 (5.97%) patients who elected to use their private insurance compared to the same period last year, and a decrease of 33 (1.59%) in total separations from the previous month.

For the month ended February 2024, conversions for facilities as compared to the same period last year were:

- RPAH – an increase of 96 (10.26%) private patients.
- CRGH – a decrease of 1 (0.11%) private patient.
- Canterbury – an increase of 22 (23.66%) private patients.
- IRO – no changes
- Balmain Hospital – a decrease from 9 to 7 private patients.

Single Room Usage

For the month of February 2024, 9.75% of patients were flagged as infection control across the district.

For the month of February, 23% of all available single rooms were occupied by private patients and 45% of all private patients were accommodated in single rooms.

SLHD Strategic Revenue Network

Key notes:

- The Strategic Revenue Network meeting was not held in January 2024 and will resume in February 2024.
- The 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 240 registered users and total \$4.42M has been raised through the portal to date.

REDESIGN AND SERVICE IMPROVEMENT

(Next report due in June 2024)

HEALTHPATHWAYS

Content Development & Maintenance

Development and consultation continue for the localisation and Periodic Reviews of the following pathway sets:

- The full suite review of Diabetes content continues in order to reflect the new SLHD Diabetes Model of Care. This is now awaiting sign off by SLHD Endocrinology specialists.
- The Obstetric and Antenatal content continues to be updated and revised, including changes to support the RPAH ANTICIPATE Clinical Redesign project.
- Early planning for the review of Falls management and SLHD Cognitive Assessment/Dementia content continues.
- Revision of Lung Cancer pathways is now underway.

State-Wide Referral Criteria (SRCs)

- Gastroenterology and Liver SRCs are in progress with full clinician involvement. Work is on track to have this work complete by March 2024.
- 40% of Ophthalmology content developments and changes have now been completed and published. Additional content is now awaiting further clinician approval and sign off.

The Program Team is awaiting notification of the next SRC content from NSW Health as part of works under Part 2 of Gastroenterology and Ophthalmology content and Part 1 of ENT and Orthopaedics content.

Review-Renew-Refresh ACI Redesign

Piloting of the new Content Review or Clinical Safety Check processes commenced on 18 March 2024. 10 existing pathways will be reviewed using the pilot process and proforma.

Streamliners CEO visit

On March 19th 2024 Stella Ward, the newly appointed CEO of Streamliners, met with Dr Anderson to discuss licence contracting, future platform innovations and directions as well as the work being undertaken by the Commonwealth to develop an alternate platform to manage referral indicators and criteria. The meeting provided SLHD with reassurance regarding platform's sustainability and direction to ensure further program success.

Usage of HealthPathways

	March 1-20 2024	February 2024	January 2024	December 2023	March 1-20 2023
Users	1,797	2,291	2,040	1,723	1,485
Sessions of use	10,482	15,688	14,098	12,151	7,965
Total Page Views	34,649	52,738	46,148	38,955	28,881

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

General Fund (GF)

The 2023/24 Service Level Agreement between the Board and Ministry of Health has key financial performance targets for Expense, Revenue and NCoS. The following analysis reflects the result for the period ended 29 February 2024 based on the District's budgeted NCoS.

For the period ended 29 February 2024, GF Expenditure was \$67.597M (4.53%) unfavourable to budget. The District's unfavourable result for YTD February 2024 was due to uplift in activity, backfilling of staff on annual leave and sick leave, movement of staff from the COVID response into BAU activities such as ramping up of surgery (including operating theatres) and ward activity, and pending budget supplementation for Deferred Care.

YTD February 2024 Expenditure increased by \$51.437M (or 3.41%) compared to YTD February 2023. The average monthly expense rate increased from \$188.249M (excluding LSL adjustment in June 2021) for the 2020-21 Financial Year to \$214.342M (excluding LSL adjustment in June 2022) for the 2021-22 Financial Year, decreased to \$190.042M (excluding LSL adjustment in June 2023) for the 2022-23 Financial Year and increased to \$194.943M in February 2024.

Total Revenue was \$3.069M (3.99%) unfavourable to budget for the month of February 2024 and \$21.643M (3.16%) unfavourable to YTD February 2024 budget. Excluding Doubtful Debts, Revenue was unfavourable to month of February 2024 by \$2.312M and unfavourable to YTD February 2024 by \$25.503M. This includes \$1.977M unfavourability in Grants & Contributions NHRA. Despite increases in a number of revenue categories, the District continues to see unfavourable results in Patient Fees Private, Facility Charges and Prosthesis income.

The NCoS for February 2024 was \$12.389M unfavourable to budget. For YTD February 2024, the District's NCoS was \$89.240M unfavourable to budget.

The District projects the NCoS to be unfavourable for the 2023/24 financial year by \$105M relating to unfavourable results for:

- Expense (\$72M)
- Doubtful Debts (\$3M)
- Own Source Revenue (\$30M)

The Chief Executive and the Executive Director of Finance are reviewing the NCoS result for the 2023/24 financial year given 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 uplift in activity, backfilling of staff on annual leave and sick leave, movement of staff from the COVID response into BAU activities.

The District has established an Expenditure Review Committee, comprised of the District's key Executive leaders, that meets weekly to ensure the identification and implementation of effective strategies to manage the District's expenditure and FTE. The Committee's role includes the review of expenditure and associated FTE data for all cost centres to identify areas of growth that do not align with actual activity levels.

The major variances for the month were:

Expenditure

- GF Total Expenditure for the month of February 2024 was \$9.320M (5.25%) unfavourable to budget. The result for the month was primarily attributable to unfavourable results for Overtime (\$1.483M), Agency costs (\$0.349M), Annual Leave (\$2.399M), Grant expenses (\$1.028M), Salaries & Wages (\$2.295M), VMOs (\$1.149M), Goods and Services Expenses (\$0.859M) and Superannuation (\$1.108M) offset by favourable results for RMR (\$2.191M).
- YTD February 2024, GF Total Expenditure was \$67.597M unfavourable to budget, primarily reflecting unfavourable results for Overtime (\$11.321M), Annual Leave (\$10.973M), Superannuation (\$3.306M), Goods & Services (\$8.120M), VMO Payments (\$11.508M), Grant expenses (\$1.568M) and Salaries & Wages (\$14.389M) offset by favourable results for RMR (\$1.149M).

Revenue

- GF Revenue for the month of February 2024 was \$3.069M (3.99%) unfavourable to budget, reflecting the favourable variances in User Charges (\$0.304M) and Grants and Contributions (\$1.072M) offset by unfavourable variances in Patient Fees (\$3.413M), Other Sources (\$0.275M) and Doubtful Debts (\$0.660M). Excluding Doubtful Debts, Revenue was unfavourable to month of February 2024 by \$2.312M.
- YTD February 2024 GF Revenue was \$21.643M (3.16%) unfavourable to budget. This result reflects unfavourable variance in Private Patient Fees (\$6.899M), Facility Fees (\$2.120M), Prosthesis Income (\$2.163M), Pharmacy Sales (\$0.673M) and Grants & Contributions - NHRA (\$1.977M) offset by favourable variances in Grants and Contributions (\$4.820M), Car Park Fees (\$0.221M) and Doubtful Debts \$4.183M. Excluding Doubtful Debts, Revenue was unfavourable to YTD February 2024 by \$25.503M. This includes \$1.977M unfavourability in Grants & Contributions - NHRA. The Actuals comprised Activity results for YTD January 2024 Actuals plus February 2024 Targets (as per MoH advice).

Special Purpose and Trust (SP&T)

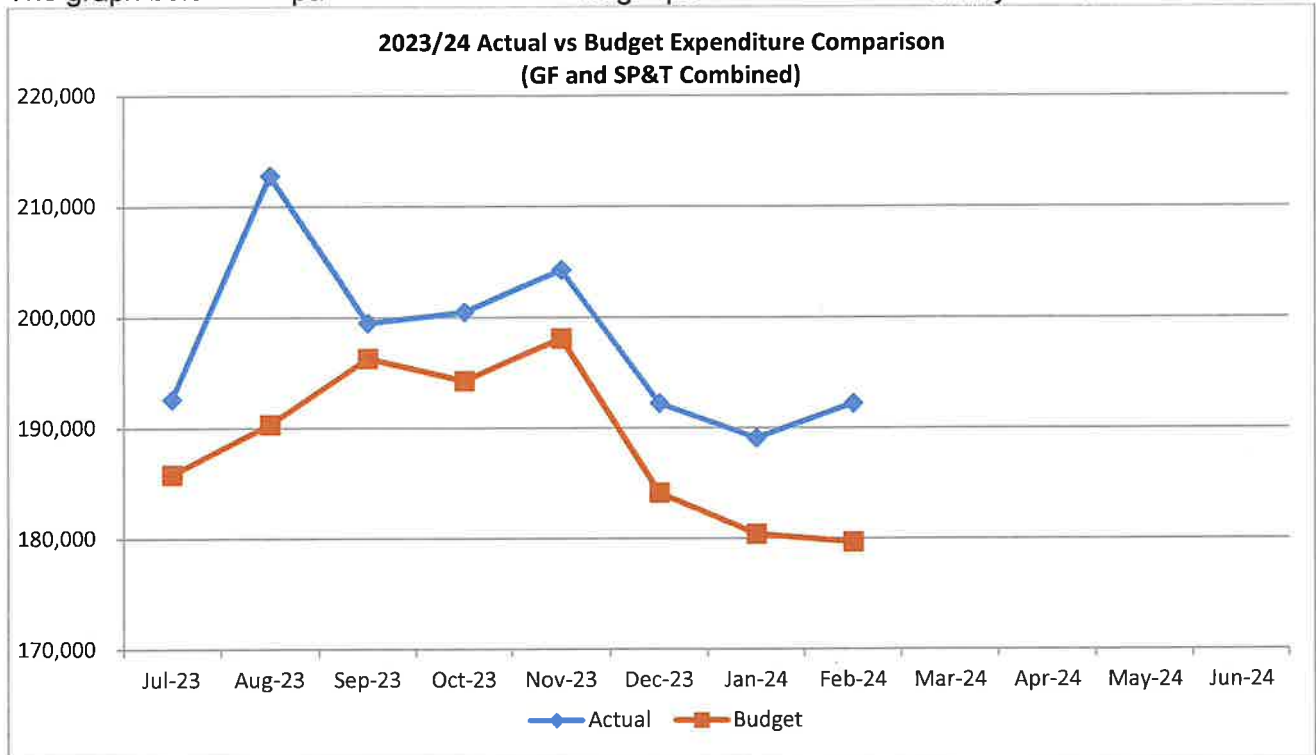
SP&T NCoS was \$4.283M unfavourable to budget for the period of February 2024. This result reflects unfavourable budget variance for Expenditure (\$6.468M) and favourable for Revenue (\$2.185M).

Consolidated Result

For the period ended 29 February 2024, the consolidated YTD NCoS result for the General Fund and SP&T was \$93.523M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$74.065M), Revenue (\$23.318M) and favourable for Doubtful Debts (\$4.183M).

Monthly Budget Performance

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



Liquidity

The cash balance at 29 February 2024 for the SLHD Operating bank account was \$6.636M and the Operating Cash book balance was \$7.143M.

Capital Works – SMRS Projects

As at 29 February 2024, the District's Full Year Capital works budget relating to SMRS Projects is \$28.538M comprising \$2.734M of MoH funded and \$25.804M of locally funded projects.

Actual expenditure as at the end of February 2024 was \$15.376M which is marginally on budget.

Other Capital Projects

As at the end of February 2024, the District had expended \$0.569M on other projects. These projects are MoH funded.

CAPITAL INFRASTRUCTURE & ENGINEERING SERVICES

RPAH

RPA Redevelopment

Key activities undertaken in the previous reporting period included:

- Construction activities for temporary LHS and Lambie Dew Drive are ongoing
- Letter of Award for Main Works issued to CPB on 6 March 2024
- Pathology demolition complete and tree removal ongoing
- Issue of planning Mod #1 has now been issued for test of adequacy
- Design coordination sessions continue with USYD and SBA

Cardiac EP Labs

Building works to the Lab 3 space were completed during this reporting period and the new electrophysiology machine was delivered to site. Installation of the machine and works to the Lab 4 shell space are underway.

Steriliser Replacement

Building works for the steriliser replacement project at RPA progressed well in March with ongoing works for mechanical service rough-ins and installation of steam pipe work complete. Light cut-ins to the ceiling are complete and installation of the RO ring main is underway.

West Campus Outdoor Area

Deck installation works for the West Campus outdoor area continued throughout this reporting period.

Logistics Hub

The modular building for the RPA Logistics Hub was delivered to site in December and has been installed. Costing's for the internal fit-out are currently being prepared and will be issued to the Chief Executive for approval.

Gloucester House Level 2

Building works for the Gloucester House Level 2 project progressed well throughout this reporting period with new flooring installed and completion of the kitchenette building works. Workstations have been delivered from South Australia and are currently being installed.

Concord

Concord Multistorey Carpark

Key milestones for this reporting period:

- Levels 2 and 3 slabs poured
- Lift shaft poured to upper level 3
- Telstra/NBN services lowered at Gate 2
- Shear walls reo installed including shutters to upper level 3
- Stripping to ground to level 1 complete
- All stair shafts poured to level 3

Forensic Mental Health Project

Key activities undertaken in this reporting period:

- REF progressed for formal approval
- Project brief approved by Ministry of Health
- Main works contractor procurement ongoing

ED CT Scanner

Building works undertaken to the new ED CT Scanner project include the completion of painting, flooring and ceiling installation and wall protection. Service fit-off works will commence in line with the delivery of the new CT Machine which is scheduled for May 2024.

ACE Unit

Stage 2 works including service fit-offs, FF&E delivery and painting and vinyl flooring were completed this reporting period. Planning is underway for the next phase of works to occur next month.

Ground East

Medical gas commissioning was undertaken within the OACCP phase of this project and service-fit offs and ceiling installation underway.

PLANNING

Sydney Local Health District Capital Investment Proposals (CIPs) (2024)

The Planning Unit has met with the Chief Executive to determine the approach and priorities for the 2024 major capital investment proposals for submission to the Ministry of Health by June 2024.

Priorities for 2024 will remain as per 2023:

- Concord Stage Two Redevelopment (ED and critical care, upgraded diagnostics, acute medical/surgical beds, operating theatres, Maternity and Paediatric services)
- RPA Stage Two Redevelopment (Cardiovascular Centre on the Western Campus and Refurbishment of residual spaces on Eastern Campus)
- HealthOnes across the District (Canterbury, Waterloo, Riverwood and Concord/Homebush)
- Mental Health Community Residential Rehabilitation Services across the District (10 bed units x5 at Canterbury, Redfern and Rozelle).

In addition, significant additional planning has been required to identify the preferred option for the future provision of RPA Pathology services in collaboration with NSW Health Pathology. This will effectively require a fifth submission in collaboration with NSW Health Pathology.

Related to these major submissions, the Planning Unit is currently:

- Updating all activity projections, forecasts, scenarios and assumptions
- Devising alternative options to address forecasted demand (as per MoH requirements)
- Updating all recurrent and capital costings in collaboration with relevant SLHD executives
- Updating each submission to reflect added service planning and to align with revised MoH expectations
- Meeting with relevant stakeholders including MOH, pillars and selected service providers
- Undertaking significant service planning in collaboration with NSW Health Pathology.

Sydney Local Health District Health Care Services Plan (HCSP)

The Ministry of Health and the Health Service Act (1997) requires all health districts to develop a Health Care Services Plan.

The Planning Unit has commenced developing the strategic service directions for the District, canvassing the facility and clinical stream priorities, and focusing on the six priority service areas identified by the Chief Executive and Board for Sydney Local Health District over the next five years.

Consistent with the SLHD Strategic Plan (2024-2029), the HCSP will closely reflect, and align with, NSW Health's *Future Health: Guiding the next decade in care in NSW 2022-2032*. *Future Health* provides the strategic framework and priorities for the whole system over the next decade.

The Priority Service Areas include:

- Precision Medicine
- Prevention/Health Promotion
- Surgery
- Mental Health
- Patient Flow and Virtual Care
- Aboriginal Health

Strategy papers for each of these priority service areas are under development outlining the major issues, alignments with District and Ministry of Health plans, key directions, expected outcomes, and indicators. These strategies have been carefully aligned to the draft SLHD Strategic Plan and developed in close collaboration with the relevant SLHD clinicians and staff.

A variety of consultative and collaborative approaches have been taken to further develop these strategies including:

- Presentations to Clinical Council, Senior Executive
- Briefings for senior SLHD executives

Precision Medicine Workshop

The Planning Unit has provided a major report on the Precision Medicine Workshop, collaboratively organised with the instate of Precision Medicine and Bioinformatics. This report will be used to develop the strategy for Precision Medicine which will form an integral part of the District HealthCare Services Plan.

Aboriginal Health Strategic Plan

The SLHD Aboriginal Health Strategic Plan is currently under development by the SLHD Aboriginal Health Unit, after a review of the previous plan. The Plan will align with the draft NSW Health Aboriginal Health Plan. Key strategies are still under consideration but are likely to include:

- Partnerships and Supporting the Community Sector
- Transforming Our Organisation
- Addressing the Major Health priorities, including those that contribute to a reduced life expectancy in order to Close the Gap
- Employment, Business Growth and Economic Prosperity
- Research, Monitoring and Evaluation

A key approach will be to determine major health outcomes and deliverables and to drive significant strategies that will result in improved health.

Canterbury Hospital Stage 1 Redevelopment

The Planning Unit provided a presentation on the Canterbury needs, demands and clinical service priorities to the newly appointed redevelopment team.

RPA Stage Two Service Plan

Building from the RPA Stage 2 Capital Investment Proposal (CIP) submitted to the MoH in June 2023, the 2024 submission will include a range of alternative options to address the RPA future demand, with a rationale for the preferred option.

SLHD Strategic Plan 2024 2029

SLHD draft Strategic Plan has been forwarded to the Board for comment prior to the Board/Senior Executive/Clinical Director Strategic Plan Workshop. The Plan has been drafted with the input of over 1,000 clinicians, consumers, community members, District executives, Board members and other key stakeholders.

The Planning Unit has been working collaboratively across the District to synthesise a District understanding of the impact of the urban developments being fast tracked to address the state housing supply and affordability issue.

- The Parramatta Road Corridor Urban Transformation Strategy is currently being rolled out to densify housing along this transport corridor. Councils are planning some of the developments, with others being planned centrally by the Department of Planning.
- Additionally, the NSW Government has introduced a State Environmental Planning Policy (SEPP) which will result in changes to zoning approvals near to transport hubs
- The impact on the future SLHD population of the Government announcements is yet to be assessed but is expected to be significant, with up to 90,000 additional residents that may not yet be included in official population projections.

Planning Support

The Planning Unit is currently supporting and working with other SLHD Units on the development of several plans and projects across the District including:

- SLHD Domestic Violence Action Plan
- Aboriginal Health Plan Review and New Plan Scope
- Institute of Academic Medicine Strategic Plan

SYDNEY RESEARCH

Sydney Biomedical Accelerator

Governance and Committees

The SBA Executive Steering Committee (ESC) met on 18 March 2024 and focussed on the progression of design development towards 70% completion, the Interior Look and Feel Proposal for the SBA complex, the Main Building Works Tender List, and the Building B Final Business Case and INSW Gateway 2 Assurance Review.

SBA Leadership Workshop

As an action of the Executive Steering Committee, a dedicated workshop has been scheduled for 6 May 2024 with the Executive Leads and Project Leads for the District and University to consider, discuss and agree on future leadership and operational models of the SBA. The workshop will be facilitated by Ms Chloe Flutter, who brings significant experience as a senior strategy and transformation consultant in healthcare, has operated as a Senior Advisor and leader of the Healthcare practice at the Boston Consulting Group (BCG). The coordination of this workshop will be supported by the SBA Operational Strategy Group jointly chaired by A/Prof Taylor and Dr Hammond. While this workshop was originally scheduled for March 2024, due to unforeseen circumstances with key Executive leaders and the workshop facilitator, it was moved to May 2024. The teams at both SLHD and USyd remain fully committed to this important exercise.

SLHD SBA Internal Advisory Group

The SLHD SBA Internal Advisory Group chaired by the Chief Executive and Prof Paul Torzillo, Executive Clinical Director, SLHD met on 5 March 2024. The Advisory Group discussed the current scope, objectives and strategy for Gloucester House and Building B on the Royal Prince Alfred Hospital campus and as part of the SBA complex. During this meeting the utilisation of the spaces being refurbished at Gloucester House was also discussed.

Legal Arrangements

Together with the University of Sydney and with the support of our legal advisors, the SLHD Chief Executive, NSW Ministry Health (NSW MoH) and the Sydney Research/SIPfHER team are coordinating the development and execution of legal arrangements to support the partnership between the District and University in the design, project management, collaboration, and future operation of the SBA. The term sheets for the SBA Interim Project Management Agreement, the Cooperation Agreement, and the Umbrella Agreement have been executed, which together will contribute to the framing for the design development, project management and future operational management of the SBA. Sydney Research continues to coordinate the Gloucester House Memorandum of Understanding (MoU), which is now close to finalisation and will be utilised to support the relocation of the NHMRC Clinical Trials Centre in a phased approach, commencing April 2024. The MoU between SLHD and the Centenary Institute is also close to completion and endorsement.

SBA Building B Naming

The Sydney Research/SIPfHER team are working closely with the SLHD Aboriginal Health Unit to progress the consultation process and selection of a name for 'Building B' of the SBA complex to reflect the connection to aboriginal land and community. A robust process is being undertaken, including

involvement of the Metropolitan Aboriginal Lands Council, and coordination with the clinicians and researchers in the District as part of the broad consultative process.

Fin Prototype On-Site Inspection

The Sydney Research/SIPfHER team visited the SBA Complex site, along with representatives from the SLHD Capital Infrastructure and Engineering team, and USyd's University Infrastructure team on 21 March 2024 to inspect the prototypes of the fins placed on site for testing. These fins will form an important part of the external façade of the SBA complex. Given their size and complexity, the team considered various aspects including the how the fins will look from outside the buildings, the view/ vista from the inside out through the fins, the maintenance complexities and requirements, and how the material and finish is likely to age. Overall, the visit provided the team with a fuller understanding and likely preferences associated with the fin design finalisation.

SBA Principal Projects Requirement (PPR) Document

The Sydney Research/SIPfHER team represents SLHD on the PPR document coordination, both internally with multiple SLHD stakeholders including Capital Infrastructure and Engineering and the Communication team, and with external stakeholders at the University, including the University Infrastructure team, in endorsing parts of this document. This will form an important part of the tendering process for the SBA complex.

McKinsey Briefing on How to Build a Successful Innovation Ecosystem

The Sydney Research/SIPfHER team participated in the briefing on what makes innovation ecosystems successful. This briefing was run by the McKinsey team in the USA focused on this subject and organised by the USyd team. Several critical learnings were captured and will be planned for in designing the operations model for the SBA.

SLHD Innovation Week

Sydney Research Awards and Clinical Trial Awards

The Sydney Research/SIPfHER team continues to lead the approval process, design and selection process for the Sydney Research Awards, and works closely with the Clinical Trials team at SLHD Research on the approvals for the Clinical Trial Awards. All awards in these two categories are provided to the recipients during the Innovation Week, scheduled for 1 to 5 July 2024.

The Big Idea

The Sydney Research/SIPfHER team organises the Big Idea event, including coordinating with the funding of the awards, setting guidelines and application forms, setting up a selection committee and coordinating support for the applicants. The team also works with Cicada Innovation, IDE and the SLHD Chief Commercial Officer on specific inputs to the finalists. This work is currently in progress.

ClinTrial Refer

The Sydney Research/SIPfHER team continues to closely work with the ClinTrial Refer in exploring opportunities for strengthening their performance and broadening their network. Sydney Research have also been supporting the ClinTrial Refer team in their meetings with the Commonwealth Department for Health and Aged Care on the potential partnership opportunity with the National One Stop Shop initiative to support Clinical Trials across Australia. After sign-off from the CEs of SLHD and South Eastern Sydney LHD (SESLHD) on the full operational and technical transition of the CTR project to SLHD, Sydney Research is progressing the many facets of this transition to achieve and ensure operational stability and sustainability of this important project.

Innovation Precincts

Tech Central

Multiple Committees associated with Tech Central have been on hold whilst there are developments in the positioning of Greater Cities Commission (transitioning into Planning NSW under the NSW

Department of Planning and Environment) and in the ongoing management of Innovation Precincts by the NSW Government. The SLHD Chief Executive remains engaged and involved as a member of the Tech Central Interim Leadership Group, and opportunities for SLHD in deeper engagement and further decision-making are progressing.

Sydney Innovation Precinct for Health Education Research (SIPfHER)

Since the meeting of the SIPfHER Precinct Council held on 12 February 2024, the prospectus of SIPfHER continues to be developed by the Director of Strategic Relations, SLHD in partnership with the Sydney Research/SIPfHER team and the University Marketing and Engagement team. The prospectus aims to present the principles for the region and showcase SIPfHER as an internationally significant region for health, research, education and innovation. Further engagement opportunities with SIPfHER partners are being explored including the establishment of a Precinct Collaboration Committee over the next few months.

Camperdown Biotechnology Hub

The Sydney Research/SIPfHER team continues to be involved in a dedicated Project Working Group with representation from five (5) inter-Government agencies (Sydney Local Health District, Investment NSW, Transport NSW, Greater Cities Commission and NSW Department of Planning and Environment) regarding the establishment of a complementary Biotechnology Hub in Camperdown. The Chief Executive, Adj A/Prof Vicki Taylor and Sam Bhatia are the SLHD representatives on this Working Group and have continued to ensure that the proposal clearly articulates the value of a Biotechnology Hub for the District, SIPfHER, Tech Central and how this site/ proposal would complement the strategic vision and objectives of the SBA. All appropriate NSW Government priorities are discussed and considered by this group and during these discussions, including the potential mixed-use for the site to accommodate affordable housing.

The proposed Hub would cater for health-related start-ups, scale-ups, spin-offs and synergistic anchor tenants to be co-located close to RPA and the University Sydney (USyd) and has the potential to generate significant economic benefits to the state and nation. It would strengthen and continue to grow our already healthy eco-system of talent, skill and expertise. If this proposal was successful this proposed Hub would be complementary to the strategy and work to be undertaken within the SBA and Tech Central by providing a long-term growth option for the innovative ideas that develop within the complex, as well as a space for small manufacturing needs that are crucial in prototype and product development.

The Working Group provided input to Property NSW who developed and submitted a proposal to the Expenditure Review Committee outlining the opportunity of the Camperdown Biotechnology Hub and for mixed use/affordable housing on the site.

Franklin Women

2024 Inclusive Leadership Mentoring Program

As part of its partnership with Franklin Women, the District will continue to be involved in its annual Mentoring Program for the fifth consecutive year. This Program brings together diverse organisations across the health and medical research ecosystem that are keen to invest in the career progression of mid-career women in their organisations as well as the development of their leaders who play a critical role in creating an inclusive workplace culture. The program will be delivered between May and November when mentees and mentors will meet for sessions and workshops. The inaugural board meeting was held on 19 February 2024, and included the Chief Executive of SLHD and the Executive Director of Sydney Research and SIPfHER.

The Sydney Research/SIPfHER team continues to be the District Coordinators for applications in the 2024 Mentoring Program. Applications for the program will close on 28 March 2024.

Translational Research Grants Scheme (TRGS)

The Sydney Research/SIPfHER team facilitates on behalf of SLHD the promotion, review, selection and submission of applications to the NSW Health Translational Research Grants Scheme (TRGS), which is conducted annually by the NSW Office for Health and Medical Research. TRGS provide grants to staff at Local Health Districts and other parts of NSW Health to accelerate research translation within the NSW public health system. SLHD has been one of the most successful Public Health Organisations in this scheme having received \$8.5 million for 6 successful projects over the past 6 rounds.

SLHD Chief Commercial Officer

The Sydney Research/SIPfHER team have continued to work closely and support Dr Francisco in the review and progression of the following matters:

- Developing commercial proposal and sustainable business model for ClinTrial Refer during its operational transition.
- Draft SLHD Intellectual Property and Commercial Policy and guidelines and responding to queries about the same from the NSW Ministry of Health
- SBA Industry Working Group
- A diverse range of commercial matters involving SLHD staff and our partners.
- Supporting the ANZAC Research Institute commercial initiatives
- Finalisation of a Commercial Strategy for the SBA and case study summaries that will support the Final Business Case required by Infrastructure NSW
- Preparation for the launch of the SBA Innovation Hub to external industry, research and academic partners, including the planning of administrative and management processes for these arrangements.
- Discussions with potential industry stakeholders
- SBA Information Interviews to gain industry perspective and expectations from the project.

Participation in monthly meetings with the SLHD Chief Executive, the Chief Commercial Officer and the SLHD Director of Legal Services as part of the Commercial Advisory Group, scheduled to meet next in February 2024.

Staff Influenza Vaccination Program

The Annual Staff Vaccination campaign has commenced, which is being led by the SLHD Director of Nursing & Midwifery Services.

Outreach Influenza Vaccination Projects

SLHD Public Health Unit has commenced some outreach influenza projects targeted to vulnerable populations within the District. The Clinical Services Integration & Population Health teams are also investigating bespoke vaccination opportunities for vulnerable groups within the community.

The SLHD Mental Health Service is developing an influenza vaccination program for the inpatient and outpatient patients.

CONCORD HOSPITAL MEDICAL STAFF COUNCIL

Following concerns raised by members of the Concord Hospital Medical Staff Council, ProActive ReSolutions has continued to undertake an independent intervention to support employees at Concord Hospital by identifying actions to address issues raised and improve their overall workplace experience.

Sydney Local Health District and its Executive have remained fully committed to the process and has continued to work with Pro-Active ReSolutions and staff to address the concerns raised.

Board Report



Pro-Active Resolutions has now transitioned out of Concord Hospital.

Concord Hospital, SLHD and the Ministry representatives have developed an action plan which provides a summary of issues identified ProActive ReSolutions consultation process as well as actions undertaken by the SLHD and CRGH Executive Teams in conjunction with ProActive ReSolutions and the MoH team. I again would like to thank members of the CRGH Executive Team, the SLHD Executive Team and staff of Concord Hospital for their ongoing commitment to progressing this work.

The A/General Manager of CRGH is continuing to provide the Chief Executive with a monthly progress report on the action plan. The Action Plan has been tabled at the CRGH Clinical Council meeting. The CRGH Clinical Council minutes are tabled at the SLHD Clinical Quality Council.

A progress report is being provided monthly to the SLHD Board. SLHD is also reporting on the action plan monthly to Matthew Daly, Deputy Secretary, System Sustainability and Performance, Ministry of Health.

A handwritten signature in black ink, appearing to read "Teresa Anderson".

Dr Teresa Anderson AM

Chief Executive

Date: 13.9.25