

Sydney Local Health District

Eighty First Meeting of the Board

Date: Monday 15 October 2018
Time: 9.30am – 11.30am
Venue: SLHD Boardroom
Chair: Ms Victoria Weekes, Member

1. Present and apologies

Ms Victoria Weekes, Member
Dr Thomas Karplus, Member
A/Professor Christine Giles, Member
Dr Teresa Anderson, AM, Chief Executive
Professor Paul Torzillo AM, Member
Ms Susan Anderson, Member
Ms Ronwyn North, Member
Ms Joanna Khoo, Member
Dr Mary Haines, Member
Ms Frances O'Brien, Member
Mr David McLean, Member

Apologies

The Hon. Ron Phillips AO, Chair
Dr Barry Catchlove AM, Member
Dr Tim Sinclair, Acting Director of Operations

In attendance

Dr John Cullen Clinical Director (9.30am -10.00am)
Dr Ian Caterson, Deputy Clinical Director (9.30am -10.00am)
Aged Care, Rehabilitation, General Medicine, Chronic and Ambulatory Care, General Practice

Dr Katherine Moore, Director Clinical Governance and Risk (9.30am – 11.25am)
Dr Alicja Smiech, Chair, Medical Staff Executive Council (9.30am – 11.25am)
Ms Zoe Miller, GHMP Trainee (9.30am – 11.25am)
Ms Mariana Sena-Board GHMP Trainee (9.30am – 11.25am)
Ms Nerida Bransby, Secretariat

2. Welcome and introductions

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

Presentation:

Dr Caterson and Dr Cullen presented on Diabetes Planning in the SLHD including

- Process includes committee meeting commenced in July 2016, planning involvement, diabetes forum held in December 2017 and presentations from each area.
- Prevalence of IGT, IFG and diabetes
- Diabetes Hospitalisations 2012 – 2015
- Increase in diabetes hospitalisations at Canterbury Hospital between 2010 and 2015.
- Average length of stay for foot related hospitalisations 2012 – 2015
- RPAH Diabetes in pregnancy
- Problems include numbers and service sites and provision, special populations, service provision for the community and diabetes prevention
- Impact of managing diabetes
- Diabetes Strategic Plan 2018 - 2023
- Priorities
- Total number of services provided at the RPAH Diabetic Centre in 2015, 2016 and 2017.
- Prevention of diabetes
- Working groups include data, inpatients and diabetes
- Leading Better Valued Care for inpatient diabetes and diabetes in pregnancy
- Ongoing issues include numbers increasing, chronic care, inpatient care, community care, diabetes in pregnancy and special groups.

The Chair thanked Dr Caterson and Dr Cullen for the presentation and for attending the meeting.

3. Declaration / Removal of conflicts of interest

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

Mr McLean provided an update on his potential conflicts of interest via email on 26 September 2018. These were included in the register. There were no other **new** conflicts of interests to declare or to be added to the Register at this meeting.

4. Confirmation of previous minutes

4.1 Minutes – 17 September 2018

The minutes of the Board meeting held on Monday 17 September 2018 were moved and seconded with one amendment being the location of the meeting.

The Chair then signed the minutes.

4.2 CE Report – September 2018

The Chair declared that the CE Report for September 2018 was ready for publication.

5. Matters arising from the previous minutes

5.1 Action sheet

The Board received and discussed the outstanding ‘in progress’ agenda items on the action sheet including:

- A meeting with the Minister’s staff of Westconnex was held on 9 October 2018. A brief on the outcome of this meeting will be provided to the Board at the next meeting.
- Discussions are ongoing concerning Hospital Acquired Complications in consultation with the Clinical Directors.
- Meetings with Health Infrastructure re future health needs for the District have been positive.
- The Chief Executive will provide a presentation to the Board at the next meeting on key messages for the many components of future infrastructure needs.

5.2 Views on Website

The Board received, read and noted this report. This agenda can be removed from the action list.

5.3 Extra slides re current and future health needs.

The Board received, read and noted this report. This agenda can be removed from the action list.

6. Patient Story

Dr Anderson provided two patient stories including:

- Letter of appreciation from a general practitioner seeking our assistance for one of his patients. The patient needed a multi-agency collaborative approach with a favourable outcome.
- A mental health inpatient with challenging behaviour.

7. Standing Items

7.1 Acronyms List

The Board received and noted the revised Acronyms List.

7.2 Financial Classification Codes

The Board received and noted the Financial Classification Codes List.

7.3 Board Calendar 2018

The Board received and noted the Board Calendar for 2018.

8. Chairman's Report

Dr Anderson provided a verbal report on the outcome of the MoH / Board / CE Conference held on Monday 8 October 2018.

9. Chief Executive's report

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

- The District remains at Performance level zero, which is the highest level achievable.
- The District is performing well in relation to Hospital Acquired Complications with Surgical complications. The District is looking at complications in high risk pregnancies.
- SLHD facilities are meeting the Nursing hours per patient bed day. A report will be provided at the next Board meeting.
- The Evaluation report for HealthPathways will be available soon.
- The Minister is to open the Emergency Resuscitation Bays at RPAH.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – August 2018

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

9.1.2 Selected Performance Indicators – August 2018

The Board received, read and noted this report.

9.1.3 HealthPathways Dashboard Report – September 2018

The Board received, read and noted this report.

9.2 Project updates

9.2.1 Lifehouse

The Board received, read and noted this report.

9.2.2 Macquarie International Private Hospital

The Board received, read and noted this 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 quarterly report for the period August – November 2018 is due in December 2018.

(ii) Risk Management and Work Health and Safety

The Board received, read and noted this report.

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

The Board received, read and noted this report.

9.6 Facility Reports – August 2018

(i) Balmain Hospital

The Board received, read and noted the Balmain Hospital facility report.

(ii) Canterbury Hospital

The Board received, read and noted the Canterbury Hospital facility report.

(iii) Community Health

The Board received, read and noted the Community Health report.

(iv) Concord Hospital

The Board received, read and noted the Concord Hospital facility report.

(v) Drug Health Services

The Board received, read and noted the Drug Health report.

(vi) Mental Health Services

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

(vii) Oral Health Services and Sydney Dental Hospital

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

(viii) Royal Prince Alfred Hospital

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

- (ix) Tresillian
The Board received, read and noted the Tresillian report.
- (x) Lifehouse
The Board received, read and noted the Lifehouse report.
- (xi) Public Health Unit
The Board received, read and noted the report.
- (xii) Population Health
The Board received, read and noted the report.
- (xiii) Health Equity Research and Development Unit (HERDU)
The Board received, read and noted the report.
- (xiv) Croydon / Marrickville / Redfern Community Health
The Board received, read and noted the report.
- (xv) Organ Donation for Transplant – Quarterly Report
The Board received, read and noted the report for the period July 2018 - September 2018.

10. Matters for approval / resolution

10.1 Quality and Safety Account 2017-2018

The Board discussed the Quality and Safety Account for 2017 - 2018. The structure is clear and functional. The Board therefore endorsed the Account with the following amendments:

- An adjustment is required in the commentary in the section that lists our smoking rate of 12.7%, as it is better than the state rate.
- An adjustment is required in the commentary where the staff engagement figures are listed, one sentence is to be included to say that an action plan has been developed which includes a range a strategies to promote staff engagement.

10.2 Diabetes Strategic Plan 2018 - 2023

The Board received, read and noted the plan. Following discussion, the Board recommended the following amendments:

- Need for increased services at Canterbury Hospital to be strengthened
- The importance of prevention as well as treatment programs need to be strengthened

- In the “Aims” section: it was unsure that the aims identified the strategy clearly, as the District is trying to integrate diabetes work externally as well as internally
- The “what’s different” message could be clearer
- To be placed on the Communications Committee agenda

With the above amendments, the Board **endorsed** the Plan.

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 10 September 2018.

11.2 Education and Research Committee

The Board received, read and noted the minutes of the meeting held on 16 July 2018.

11.3 Communications Committee

The Board noted the next meeting is to be held on 23 October 2018.

11.4 Audit and Risk Committee

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

11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 26 September 2018.

11.6 Health Care – Clinical Council

The Board noted the next meeting is to be held on 28 November 2018.

11.7 Medical Staff Executive Council

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

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

The Board noted the minutes of the meeting held on 3 October 2018 were not available.

11.9 Aboriginal Health Steering Committee (bi-monthly)

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

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

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

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 12 September 2018.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board received, read and noted the minutes of the meeting held on 17 September 2018.

12.4 Surgical Demand Committee (bi-monthly)

The Board noted the next meeting is to be held on 17 October 2018.

12.5 Finance Leaders Forum (previously Revenue Enhancement Development Committee)

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

12.6 NSW Health / SLHD Performance Review Meeting

The Board received, read and noted the minutes of the meeting held on 21 August 2018.

12.7 Organ Donation for Transplantation

The Board noted the meeting to be held on 25 September 2018 was cancelled.

12.8 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted the minutes of the meeting held on 11 September 2018.

12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the next meeting is to be held in December 2018.

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

The Board noted the next meeting is to be held on 22 October 2018.

12.11 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 26 September 2018.

13. Matters for noting

13.1 Letter - Camperdown –Ultimo Collaboration Area Place Study

The Board received, read and noted this correspondence.

13.2 Board Members / CE Conference

The Board received, read and discussed this correspondence under agenda item 9.

13.3 Brief – Update on the LBVC Tranche One and Two

The Board received, read and noted this correspondence sent via email on 10 October 2018.

14. Other Business

Nil to report

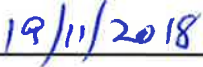
15. Next Meeting

The next meeting is to be held on Monday 19 November 2018 at 9.00am.

The meeting closed at 11.30am.



Chair



Date

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

PERFORMANCE

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

Safety and Quality

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

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

Mental Health has been under significant pressure throughout August with a high number of seriously unwell patients. Mental Health Readmissions within 28 days slightly increased for the month of June to 18.2%. There has been a slight increase (0.9%) in the percentage of Mental Health Readmissions within 28 Days as of YTD June 2018 in comparison to the same period last year.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation at 5.1% for the month of July, which is below the State rate of 6.0%. Unplanned Emergency Presentations (same ED within 48 hours) were 3.9% for the month and 4.0% YTD August, which is below the State rates of 4.4% and 4.5% respectively.

The District remains under the benchmark (2.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI) with a result of 0.7 per 10,000 bed days for the month of July 2018. There were 0 Central Line Associated Bloodstream (CLAB) infections during July 2018.

It should be noted that the aggregate review into the 3 previously reported CLABs across the SLHD has been completed and no clinical contributing factors were identified. Ongoing education and training in infection control strategies and CLAB awareness discussions at ICU morbidity and mortality meetings continue.

The District is performing well in relation to Hospital Acquired Complications with Surgical complications requiring an unplanned return to theatre (per 1,000 bed days) at 0.632, 0.21 below the benchmark of 0.841; Hospital acquire pressure injuries (per 1,000 bed days) at 0.144, 0.093 below the benchmark of 2.84; Health care Acquired Medication Complications (per 1,000 bed days) at 0.373, 0.514 below benchmark of 0.841.

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

Workforce

Managing our workforce to ensure the appropriate skill mix and levels to meet demand remains a priority for the District. Premium staff usage for Nursing and Allied Health decreased for August 2018 compared to the same period last year by -1.18 and -0.73 respectively. SLHD facilities are meeting the Nursing hours per patient bed day. A report on this will be provided in the Board papers each month commencing at this Board meeting. Medical staff usage increased by 1.02% during the month of August 2018.

Activity

There was a slight increase (3.3%) in the number of separations (15,331) for the month August 2018 when compared to the August last year. YTD separations have increased across the District by 3.72% in comparison to last year. In August the District's occupancy rate decreased by 1.14%, to 91.46% when compared to the 92.60% in August 2017. The YTD occupancy rate has increased by 1.77%, to 91.98%, when compared to YTD August 2017. The District has experienced a 1.93% decrease in YTD case weighted attendances, when compared to the previous year. Work is being undertaken to review coding as this is not consistent with the perceptions of staff in relation to the acuity of patients being seen.

There were 13,942 attendances to the District's Emergency Departments in August 2018, representing a decrease of 5.2% when compared to the same month last year. YTD Emergency Department attendances have decreased by -3.9% to 27,525.

Emergency Treatment Performance (ETP) (formerly NEAT)

The District continues to improve ETP performance, with a 1.72% increase in the month of August 2018, to 69.7%, when compared to the same month in the previous year. YTD August there has been a 1.23% increase in ETP performance to 68.66% when compared to the same period in the previous year.

Transfer of Care

The District met the transfer of care (TOC) target (90%) in August 2018, with 93.1% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. YTD August the District continues to meet the TOC target, again highlighting the success of the RPA TOC Program in operation in SLHD Emergency Departments.

ED Triage

The District met target for Triage Categories 1,2, 4 and 5 for the month of August. The District continues to make improvements in relation to Triage Category 3 performance, which was slightly below target at 74.1% for the month of August, representing a 7.73% improvement on the 66.35% in August 2017.

Elective Surgery

There was a slight (1.64%) increase in surgical admission in the month of August 2018 when compared to the same month last year. YTD surgical admissions have increased by 1.15% across the District. SLHD continues to perform at the top of the state for patient treatment timeframe targets for elective surgery, with all patients admitted within the clinically appropriate timeframe for their surgery. There has been an increase of 249 surgical patients not ready for care for the month of August 2018, when compared to the same month last year. This is currently being reviewed

Community care and Hospital in the Home

The District has continued to manage its activity through investments in Sydney District Nursing who are managing over 1,000 patients per day in the community who would otherwise be in hospital. There has been a 7.1% increase in the number of Hospital in the Home overnight separations August YTD in comparison to the same period last year. As previously indicated the District would have had significant difficulty in managing the demands of this winter without the investments made by the District in these services.

NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

NWAU Activity against Target

The District continues to perform well in relation to NWAU activity against target, with a positive 0.95% variance to target for the month of July, excluding DWAU.

Stream	Target	Actual	Variation	Variation %
Acute	14,033	14,196	162	1.16%
ED	1,895	1,902	6	0.34%
NAP*				
SNAP**	1,182	1,026	-156	-13.23%
MH Admit	1,366	1,271	-95	-6.95%
MH NAP	692	956	264	38.15%
Total	19,169	19,350	181	0.95%
Dental DWAU	5,768	6,508	740	12.83%
Dental NWAU#	8,234	10,518	2,284	27.74%
Total (NWAU)	27,402.84	29,868.50	2,466	9.00%

*NAP NWAU is not currently unavailable

**67 ungrouped episodes

NWAU=589/4605*1.015*DWAU

Non-Admitted Patient (NAP) Activity

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

The District Performance Unit is currently finalising the allocation of non-admitted activity NWAU targets. This is the first time that non-admitted activity has been allocated down to specialty level, with facilities and services provided with the opportunity to review and provide feedback on the targets. Targets are phased across the year and are reflective of the activity fluctuations in historical data, with adjustments made based on service changes.

Sub and Non-Acute Patient (SNAP) Activity

The State is currently undertaking work to move all palliative care SNAP related data and assessments into the eMR. This is the first step in the automation of data feeds from local eMRs into the State SNAP data collection.

Mental Health

The Ministry of Health has developed a Mental Health Community application within the ABM Portal that will go live in the coming weeks. The app will enable increased access to and analysis of mental health non-admitted data, which is currently unavailable.

Clinical Costing Update

The Performance Unit has commenced the full costing round R22.2. State-wide feeders are currently being tested, with feedback provided to ABM as required. Significant manual corrections are being made to the Australian Mental Health Care Classification feeder data, due to ongoing issues and a failure to reconcile phase of care start and end time.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

SLHD REVENUE COMMITTEE

Private Health Insurance Usage

For the month of August 2018, SLHD recorded 19.95% of all patients discharged as privately insured.

For the YTD August 2018 there were an additional 36 (0.63%) patients who elected to use their private insurance compared to the same period last year, comprising:

- Additional 37 (1.2%) at RPAH
- Additional 22 (1%) at Concord
- Reduction of 63 (14.55%) at Canterbury
- Additional 2 (3.5%) at IRO
- Additional 38 (190%) at Balmain

The District recorded an increase of 945 separations, compared to the same period last year, across all facilities impacting the overall results.

For the month of August 2018 all facilities converted above their average monthly conversion rate for the past 12 months.

Balmain's increase in private patient conversions is a result of the Lever ward reopening in February 2018.

Single Room Usage

For the month of August 2018, 8.4% of patients were isolated as a result of an MRSA clinical alert.

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

SLHD Revenue Committee

The SLHD Revenue Committee has developed a draft Revenue Operational Improvement Plan for 2018/19 based around the following key focus areas:

1. Governance
2. Education and Training
3. Communication and Stakeholder Engagement
4. Revenue Performance Reporting
5. Promote Management of Overseas Patient Costs and Revenue
6. Maximise Infrastructure and Facility Fee Revenue
7. Process Standardisation

PERFORMANCE AND REDESIGN UNIT / REDESIGN AND SERVICE IMPROVEMENT

Innovations

- The date of the next *Pitch* event has changed and will now be held on Friday 28 September from 4-6pm in the Kerry Packer Education Centre Auditorium.
- A total of 16 applications were received for this round of the Pitch, with 5 applications progressing to the live event. They are as below:

1. *Microsurgery for the Masses- A multidisciplinary approach to microsurgical education* by A/Prof Sydney Ch'ng (Institute of Academic Surgery). This project aims to incorporate a microsurgical training program at RPA across multiple disciplines.
2. *Take on the #TheatreCapChallenge - Improve communication, teamwork and clinical outcomes with this simple initiative* by Dr Robert Hackett (Anaesthetics Department, RPA). This project aims to improve theatre staff communication, teamwork and clinical outcomes by providing staff with hats that identify staff names and roles.
3. *Assertive Outreach Team's new Young Men's* by Catherine Ryan and Megan Ryan (Croydon Community Health). This pitch aims to provide a social outlet for young men.
4. *'Wake- Sense' - Awakening the senses of cognitively impaired patients on Wakefield Ward* by Tara Finnie (NUM, Wakefield Ward, Balmain Hospital). This pitch aims to create a safe and comfortable sensory area in the Wakefield Ward at Balmain Hospital where patients with a cognitive impairment can participate in activities.
5. *Ortho Sonata* by Dr Daniel Carayannis (Anaesthesia, RPA). This project aims to improve patient's surgical perioperative experience by offering musical or visual entertainment.

Clinical Redesign: CHR Projects

- The "A Joint Effort – Patient Centred Redesign in the Rheumatology Outpatient Services at RPA" Project (CHR 2018 – first intake) has received ethics approval (Protocol Number X018-0250) as well as Site Specific Authorisation (SSA). Data collection has already commenced and will continue for another 4 weeks. Negotiations have been made with the ACI to extend project timelines which have been granted with a proposed graduation date in April 2019.
- The Sterilizing and Perioperative Clinical Redesign (CHR 2017 – third intake) project team graduated from the University of Tasmania on 31 August 2018. The team's also received an award for the best poster on the day.

Accelerating Implementation Methodology (AIM):

- The next 2-Day AIM course is scheduled on 8-9 November 2018.

HealthPathways

Workgroups

No Workgroups conducted in September, the planned workgroup for Sleep Health has been pushed back to 17 October 2018.

Workgroups scheduled:

- 17 October 2018 Sleep Health

Outside of the workgroup process a number of Neurology condition types are being scoped for pathway development and the development continues for Stroke/TIA, Neurosurgery, Rheumatology, Radiation Oncology, genetic testing and Immunology and Allergy. The build for a State wide pathway for Returning to Work and ICare NSW is nearing completion.

Usage of HealthPathways

Provisional September (1 – 24) usage figures are tracking slightly below those for August 2018 at this stage; however, are on track to exceed those for the same period in 2017.

	September 1 - 24 2018	August 2018	May 2018	September 2017
Users	929	1260	1,299	1,004

Board Report



Sessions of use	4,281	5,826	6,022	4,631
Unique Page Views	12,967	18,068	18,409	14,182
Total Page Views	16,976	24,305	24,786	18,999

Platform Improvements

Work has commenced on the conversion of content to suit the mobile friendly platform. 460 pages have been reviewed without any format changes required. A further 240 will undergo clinical content changes. It is anticipated this will take six days to complete. The mobile site is scheduled to 'soft' launch on 4 November 2018 followed by a month of testing ahead of a full launch.

Evaluation

The HealthPathways Sydney Research and evaluation Advisory Committee met on the 12 September to receive the draft recommendations from the Menzies Centre for Health Policy's evaluation of the program. 10 recommendations have been identified and will be finalised ahead of presentation to the Chief Executive in mid-October and then the Boards and Clinical Councils of both SLHD and the CESP HN. The HealthPathways Sydney Advisory Committee will advise the evaluation team on further publication etc. The recommendations are wide ranging and applicable to the Program team, SLHD, CESP HN the vendor Streamliners NZ and the broader Health system including other HealthPathway regions.

NSW HP Community

South Eastern Sydney and Murrumbidgee both switched on their HP websites in September to their local GPs. This takes the total of NSW/ACT HP Regions to twelve. Other events from the community this month included the formal appointment of a Chair for the Joint Regional Group. Mr Paul Bennett has accepted the position to represent the 12 NSW/ACT HP regions across the other Australian, NZ and UK regional discussions.

FINANCIAL PERFORMANCE

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

GENERAL FUND (GF)

The 2018/19 Service Level Agreement between the Board and Ministry of Health has as a key financial performance target an expected Net Cost of Service (NCoS) result. The following analysis reflects the result for the month ended 31 August 2018 based on the District's budgeted NCoS.

For the month of August 2018, Sydney Local Health District (SLHD) General Fund Expenditure was \$1.608M (1.11%) unfavourable to budget. GF Revenue was \$0.274M (0.19%) unfavourable to budget for the month. YTD August 2018 GF Expenditure was \$0.522M (0.18%) unfavourable to budget. GF Revenue was \$1.389M (0.45%) unfavourable to YTD budget. For YTD August 2018 the District's GF NCoS was \$1.911M unfavourable to budget.

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

Expenditure

- For the month of August 2018 GF Total Expenditure was \$1.608M (1.11%) unfavourable to budget, reflecting unfavourable results for Salaries & Wages (\$1.793M), Annual Leave

Provision (\$0.764M), VMO Payments (\$0.288M), RMR (\$0.849M) and Grants (\$0.486M) offset by favourable results in Overtime (\$0.294M), Other Employee (\$0.186M), Superannuation (\$0.336M), G&S Admin (\$0.663M), G&S Drugs (\$0.449M), G&S Special Services (\$0.522M) and G&S Support (\$0.297M).

- YTD August 2018 GF Total Expenditure was \$0.522M (0.18%) unfavourable to budget. This result reflects unfavourable results for Salaries & Wages (\$2.764M), VMO Payments (\$0.207M), G&S Medical & Surgical Supplies (\$0.689M) and G&S Special Services (\$0.517M) offset by favourable variances in Annual Leave Provision (\$0.956M), Other Employee (\$0.296M), G&S Drugs (\$0.292M), G&S Prosthetics (\$0.469M), G&S Support (\$0.440M), G&S Admin (\$1.002M) and RMR (\$0.373M).

Revenue

- GF Total Revenue was \$0.274M (0.19%) unfavourable to budget for the month of August 2018. The result for the month reflects unfavourable variances in Services to Other Organisations (\$1.401M), Intra Health Hosted Services (\$0.636M) and Grants & Contributions (\$0.107M) offset by favourable variances in Patient Fees (\$0.460M), Rent Income (\$0.327M), User General Rendered Services (\$1.102M), Conference & Training Receipts (\$0.305M), Prosthesis Income (\$0.127M) and Car Parking Fees (\$0.126M).
- YTD August 2018 GF Total Revenue was \$1.389M (0.45%) unfavourable to budget. The unfavourable YTD result reflects mainly unfavourable variances in User Charges (\$2.291M), Grants & Contribution (\$0.379M) and Doubtful Debts (\$0.308M) offset by favourable variances in Patient Fees (\$1.063M) and Other Revenue (\$0.518M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$1.408M unfavourable to budget for the month of August 2018 and \$0.956M unfavourable to budget for the YTD August 2018. This YTD result reflects unfavourable budget variances for Expenditure (\$0.866M) and Revenue (\$0.090M).

CONSOLIDATED RESULT

For the period ended 31 August 2018, the consolidated year to date NCoS result for the General Fund and SP&T was \$2.867M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$1.388M) and Revenue (\$1.480M).

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

For the period ended 31 August 2018, SLHD recorded a Total Net Result of -\$18.429M (Note that Total Revenue was higher than Total Expenditure for YTD August 2018) which was \$3.208M (15%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD August 2018 was \$2.071M unfavourable to budget. The YTD Net Direct Operating Result reflects unfavourable budget variances in Expenditure (\$0.936M) and Revenue (\$1.135M).

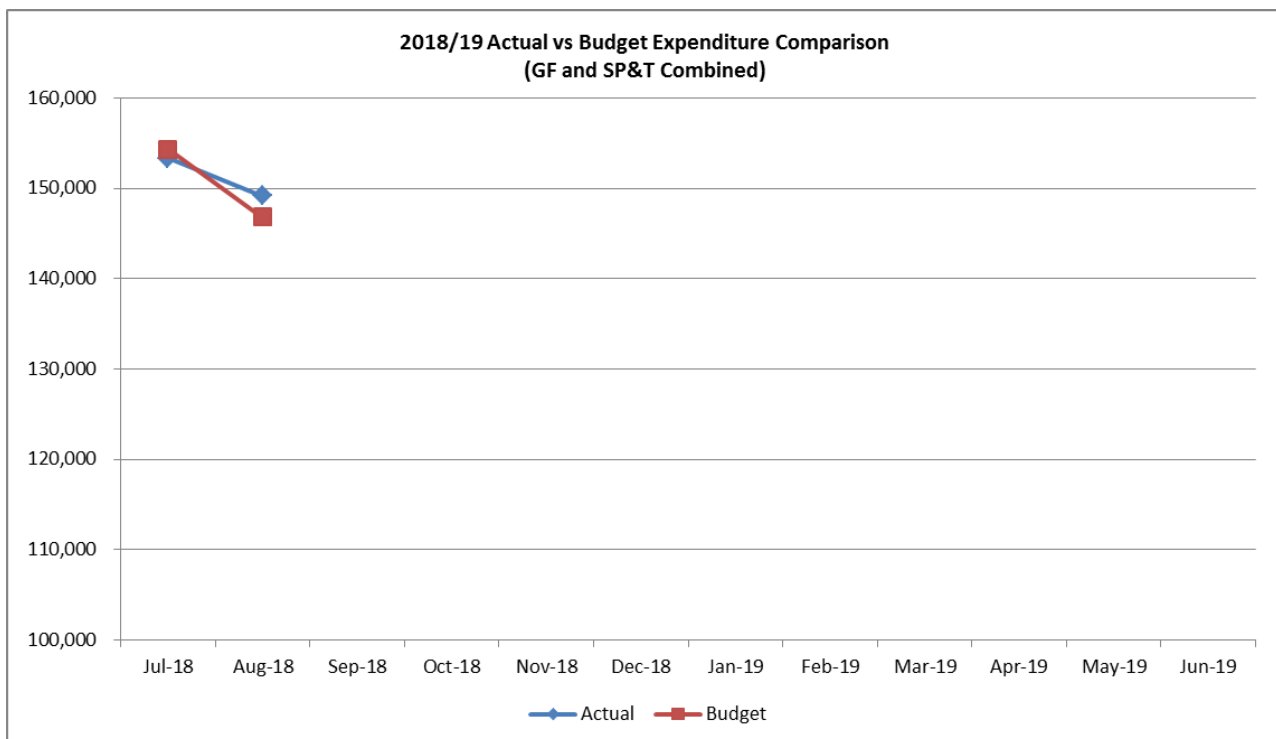
For the month of August 2018 Total Direct Revenue was \$0.695M unfavourable to budget, comprising \$0.042M unfavourable variance for the General Fund and a \$0.653M unfavourable variance for the SP&T Fund. YTD Total Direct Revenue was \$1.135M unfavourable to budget, comprising unfavourable variances for the General Fund (\$1.089M) and SP&T Fund (\$0.046M). The YTD result for the GF reflects unfavourable variances in User Charges and Grant Income offset by favourable results for Patient Fees and Other Income.

Board Report

Total Direct Expenditure was \$1.297M unfavourable to budget for the month of August 2018, comprising unfavourable results for the General Fund (\$0.758M) and the SP&T Fund (\$0.539M). YTD Total Direct Expenditure was \$0.936M unfavourable to budget, comprising \$0.895M unfavourable variance for the General Fund and a \$0.041M unfavourable variance for the SP&T Fund. The YTD result for the General Fund reflects unfavourable variances in Salaries & Wages (\$2.764M), Direct Clinical Operating (\$0.445M) and VMOs (\$0.207M) offset by favourable results for On-costs (\$1.186M), G&S Corporate & Operational Admin (\$1.002M) and G&S Support Services (\$0.440M).

MONTHLY BUDGET PERFORMANCE

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



LIQUIDITY

The District had **NIL** creditors over 45 days as at 31 August 2018.

The District achieved the target of 100% compliance with the NSW Government target for payment of small vendor creditors within 30 days for the month of August 2018.

The cash balance at 31 August 18 for the SLHD Operating bank account was \$7.505M and the Operating Cash book balance was \$7.258M.

CAPITAL WORKS – SMRS PROJECTS

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

Actual expenditure as at the end of August 2018 was \$1.031M which was marginally below budget.

OTHER CAPITAL PROJECTS

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

CAPITAL WORKS

RPA Building 63 – Level 5 Emergency Resus Bays

Diversion of services is complete. Medical gas rough is complete, cut over is also complete. Electrical, hydraulic and mechanical rough is complete. New pendants structural supports have been installed. Ceiling framing is complete and ceiling sheeting is underway. Joinery manufacture is underway.

RPA Building 75 – Level 4 Volunteers Relocation

Flooring and ceilings is now complete. Painting is 95% complete. Joinery installation has commenced. Hydraulic and electrical fit off is complete. Mechanical works are 90% complete.

RPA Building 63 - RPU

Mechanical consultants have been engaged and documentation underway – awaiting room data sheets. Structural demolition and structural steel installation has commenced.

Balmain Sorrie Street – Boundary Fence – Car Park

Brick work and rendering are now completed. Painting has commenced. Lower level retaining wall excavation and lower level retaining wall brickwork is now completed. Trees and planting will occur in September.

Concord Redevelopment overview

The Drug Health decant strategy has continued on site during the period, with the refurbishment of Building 83 progressed by the SLHD capital works team. Enabling works contractors have continued refurbishment works to building 69 for Drug Health IPU. Design Development is complete. Design development reports will be issued in October.

Enabling Works have continued during the period to the medical gas compound, temporary loading dock, demolition works, Drug Health IPU and services upgrades and investigations. The main works tender was released on 17 September, tenders are due back 5 November 2018. The target is to award in December 2018.

The next three months key activities on the project are summarised below. September and October include a range of activities that are critical to ensuring the project remains on programme.

- Building 83 refurbishment complete – September;
- Commence HV trenching works – September;
- Decanting works to Building 86 onsite completed – October;
- Temporary loading dock complete – October;
- Closure of the main loading dock – October;
- SSD exhibition closes – October;
- Continue enabling and decant works – October;
- Main works tenders due – November.

Concord Building 86 Medical Records – Decanting

Framing, hydrant & hose reel rough in, bathroom floor & wall tiling is now complete. Electrical rough in (fit off has commenced), mechanical, fire detection rough is 90% complete. Flooring installation is 70% complete. Hydraulic rough in 75% complete awaiting slide removal. The Comms room fit off is underway and Security rough, joinery installation, workstation installation and shelving installation has commenced. The lift is scheduled for mid-September.

Concord Building 83 Veterans Services

Hydraulic service and Electrical fit out now complete. Painting works are 90% complete. Joinery has now been installed. Flooring, awnings and civil works are now complete. The perimeter fencing is underway and the landscaping works are scheduled for early September.

Concord Building 86 Environmental Services

Demolition is complete.

Canterbury Staff Specialist Office

The increase of staff specialist at Canterbury and the lack of office space required space within the administration level to be created for them. The under-utilized library area was identified as the ideal location. An area consisting of 3 offices, an open plan work area and a meeting room to accommodate 11 staff was created. The works required changes to the existing training room which provided an opportunity to improve the training facility. Demolition works are complete. Partitions have been completed, set and sanded. Painting has commenced – 90% complete with touch ups only required. Electrical and flooring complete and joinery installation has commenced.

PLANNING

Royal Prince Alfred Hospital Clinical Services Strategy (CSS)

A major workshop was held with over 60 RPA clinicians attending to provide feedback on the draft CSS. Feedback has been logged and incorporated except where it was too specific for the document's purpose (this information has been retained for the more detailed Clinical Services Plan). The feedback log will be sent back to all those invited and attending the workshop. This document will now be sent to the Ministry of Health for consideration.

Facility Strategic Plans

A two hour interactive workshop was held for all SLHD General Managers to enable the development of Facility Strategic plans that are consistent with the SLHD Strategic Plan. The development of plans will follow a template, devised by the Planning Unit, to ensure that each of these plans is consistent in layout, data and themes but has the capacity to reflect the institution's history, culture, services and approaches. It is expected that plans will involve consultation and discussion with staff at all levels. It is expected that these plans will be drafted by the end of the year.

Clinical Stream Position Papers

A workshop was held with SLHD Clinical Managers who will be responsible for refreshing/revising Clinical Stream Position Papers. Each of these plans will be accompanied by an Aboriginal Health Impact Statement as per the requirements of the SLHD Aboriginal Health Plan. An Aboriginal Community

Urban Development and Innovation Precincts

- The NSW government taskforce, headed by Jobs for NSW chair Mr David Thodey, has been meeting to lead the design and development of the new technology and innovation precinct, which has been extended from the Central to Eveleigh area to stretch to the entire Camperdown-Ultimo Collaboration area. The Director of Planning is on the Technical Working group. A consultant from the Brooking Institute is advising the taskforce. It is planned that a significant announcement will be made in late November.
- The Inner West Council hosted a workshop to derive a clearer strategic view of the nature of the proposed biotechnology hub which has been zoned on Parramatta Road. They will negotiate this strategy with proponents.
- Camperdown-Ultimo Collaboration Area Place Strategy has been drafted by the Greater Sydney Commission.

Youth Health and Wellbeing Plan

Further meetings have been held to organise the launch of the Youth Health and Wellbeing Plan, with Ministerial invitations being issued for a launch in early November. The launch will be held at Strathfield Girls High School, with performances and videos being developed by the students.

RPA HealthOne (HO) East (Green Square)

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

A Business Case for Waterloo HealthOne has been prepared, with the SLHD A/Director of Finance preparing the Financial Impact Statement. This will be issued to UrbanGrowth NSW as an expression of interest for inclusion in the Waterloo Metro development.

The SLHD has written to seek the support of each of the participating universities and the CESPHE for a Clinical Director position for the HealthOne.

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

Diabetes Strategic Plan

The Planning Unit is finalising the Diabetes Strategic Plan for the consideration of the Board. An Aboriginal Health Impact Statement is forming a part of the plan.

SYDNEY RESEARCH

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

TRGS EOIs with SLHD as the Host Organisation have been submitted to Partner Organisations to obtain their support and formal endorsement of the project. It is anticipated these will be received by 3 October 2018. These will then be submitted to the Chief Executive for signature prior to submission to the OHMR.

Six TRGS EOIs have been received from other LHDs with SLHD named as a partner organisation. This is a reduction in the number compared to the previous round (15):

- **WSLHD** - Improving health outcomes and health service use through health literacy and shared decision-making training: An effectiveness-implementation trial of the Parenting Plus program for new parents
- **MNCLHD** - The effectiveness of continuous vital sign monitoring by wearable biosensor in detecting clinical deterioration in acute mental health seclusion: a prospective interrupted time-series study
- **HNELHD** - Implementation of a new model of care to predict and prevent early onset pre-eclampsia: Transforming the lives of mothers & babies
- **NNSWLHD** - pressure injury prevention and management
- **SESLHD** - Improving outcomes for frail older people undergoing elective surgery
- **SWSLHD** - Good Beginnings: A model of integrated universal developmental surveillance and care pathway

These are being reviewed by the named stakeholders within the application to confirm their support, with the endorsement to be provided from SLHD via the TRGS Coordinator to the relevant Host Organisation.

Sydney Health Partners (SHP)

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

- Boston Consulting Group will be facilitating a strategic planning workshop on 13 December 2018 for inclusion in the SHP Strategic Plan for SHP.
- The inaugural Partnership Council Meeting for the potential medical imaging partnership is to be held Wednesday 26 September 2018.
- MRFF applications are currently undergoing review by an Executive Panel to consider MRFF priorities, scientific rigour, feasibility, timeframe, budget etc. Outcomes are expected in early October.
- SHP are hosting their second annual Implementation Science Symposium, *“Unlocking Research: Health System Improvement through Effective Implementation”*, to be held Monday 19 November 2018.

Precinct Planning

A number of related initiatives are progressing concurrently:

- RPA clinical services planning and facility master planning for redevelopment.
- Sydney Research Centre Project Planning and Collaboration Steering Group.
- Camperdown-Ultimo Collaboration Area (identified by the Greater Sydney Commission and included in their Eastern City District Plan).
- Sydney Innovation and Technology Precinct (announced by the Premier in August 2018. This originally focused on Central to Eveleigh, and now includes the Camperdown-Ultimo Collaboration Area).
- Zoning for a Biomedical Hub at Parramatta Rd-Pyrmont Bridge Rd (as part of the Inner West Council's Parramatta Road Urban Transformation Corridor).

The Sydney Research team has recently been invited to a selection of meetings in relation to these initiatives:

- MOH/HI/SLHD Precinct development on 30 August 2018, with the next meeting scheduled for 5 October 2018.
- A meeting with Julie Wagner and NSW Industry in relation to the Sydney Innovation and Technology Precinct on 31 August 2018.
- The RPA Clinical Services Plan workshop held on 3 September 2018.

- A meeting with Bruce Robinson and Pam Garret to discuss strategies for developing the potential Biomedical Hub on 12 September 2018. This has led to a subsequent meeting being scheduled on 15 October 2018 with some influential individuals with relevant experience.
- A “Camperdown Biotechnology Precinct Workshop”, scheduled by IWC and facilitated by SGS Economics & Planning on 18 September 2018.

Sydney Research met with Mr Tim Wallace, A/Associate Director Strategic Initiatives on 20 September 2018 and all agree it is prudent to consolidate the efforts towards these initiatives. A governance and operational plan package will be developed comprising the SLHD position on these developments and the relevant documentation.

Other Activities

- Sydney Research will be highlighted in The Australian’s Research Journal 2018, released in September. A digital copy of this will be included with the next report.
- Sydney Research have met with a number of stakeholders to progress initiatives including:
 - The Centenary Institute and Prof John Rasko to discuss potential consolidation of cell and gene therapy wet and dry research spaces.
 - Representatives from SLHD Nursing for a quarterly Nursing catch up.
 - Mr Benn Miller to discuss the SLHD and Sydney Research structure and how research and innovation could be approached in SLHD corporate orientation
 - Mr Simon Cooper and Ms Bea Brown regarding the transport of specimens to and from the NSW Health Biobank.
 - Ms Amy Luo, Managing Director of [Butterfly Systems](#), Alfredo Martinez-Coll, and Angus Ritchie to initiate engagement with public health and a potential of this system.
 - Mr Larry Marlow, Managing Director, Marlow Hampshire to discuss research leader development programs that could be delivered across SLHD, Sydney Research or NSW (as part of the EQRLHDs project)
 - Mr George Johnson from the Sydney Institute for Women, Children and their Families to assist in data collection and development of plan for the Institute.
 - Representatives from the Ministry of Health to develop the Terms of Reference for the NSW Health Cell and Gene Therapy Steering Committee.
- Sydney Research attended a number of events representing Sydney Research and/or SLHD including:
 - The SHP Annual Forum at Westmead Hospital (29 August 2018)
 - Launch of the University of Sydney Drug Discover Initiative (10 September 2018)
 - The Centenary Institute Foundation dinner (20 September 2018)
 - The Second Corneal Bioengineering Working Group (27 September 2018)
- @SydneyResearch currently has 498 followers on Twitter.

LIFEHOUSE

The District and Lifehouse are planning for the 5 year anniversary of the opening of Lifehouse. A joint open day for the community and staff will be held on 5 November and will include stalls and activities along Missenden Road and within both facilities.

MENTAL HEALTH

The District has had a number of serious incidents impacting on wellbeing and safety of Mental Health staff and patients due to a significant increase in aggression and violence of a number of seriously unwell mental health patients both within the Mental Health unit and emergency departments and in the community.

The safety of our staff and patients is paramount and the District is reviewing its procedures to determine what additional measures can be taken to prevent such incidents occurring. Additional nursing and allied health staff have been allocated to the McKay Intensive Psychiatric Unit at Concord Centre for Mental Health including afterhours and on weekends. The District has escalated this matter to the Ministry of Health and a productive meeting was held on 11 October with Ministry Officers. The District has received \$1.5M enhancement to undertake minor capital works to improve the environment of McKay Unit. Following a meeting held on Friday 12 October with mental health staff, the Executive of Mental Health and the Chief Executive and Executive Director of Operations of SLHD, a pilot rapid response team will also be trialled over the next 6 months. Staff indicated that they felt supported by the District and were appreciative of the measures being taken. Meetings have also been held with academics in drug and alcohol and pharmacy to see if there are any clinical trials that may also be considered.



Dr Teresa Anderson
Chief Executive
Sydney Local Health District
Date: 13.10.18.