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## Sydney Local Health District

### Eighty Fourth Meeting of the Board

Date: Monday 18 February 2019  
Time: 9.00am – 11.00am  
Venue: SLHD Boardroom  
Chair: The Hon. Ron Phillips AO

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#### Acknowledgement of Country

*"I would like to acknowledge the Gadigal people of the Eora nation the traditional owners of the land and to pay my respects to Elders past and present and Aboriginal people attending today's meeting"*

#### 1. Present and apologies

The Hon. Ron Phillips AO, Chair  
Ms Victoria Weekes, Member  
Dr Thomas Karplus, Member  
A/Professor Christine Giles, Member  
Professor Paul Torzillo AM, Member (Arrived 10.05am)  
Ms Susan Anderson, Member  
Ms Ronwyn North, Member  
Dr Mary Haines, Member  
Ms Frances O'Brien, Member  
Mr David McLean, Member  
Dr Karen Luxford, Member  
Mr Richard Acheson, Member  
Dr Teresa Anderson, AM, Chief Executive

#### Apologies

Dr Tim Sinclair, Acting Director Operations  
Professor Andrew Wilson, Menzies Centre for Health Policy, University of Sydney  
Dr Carmel Huckel Schneider, Menzies Centre for Health Policy, University of Sydney

#### In attendance

Mr David Wilkie, Partner, Clayton Utz  
Ms Nerida Bransby, Secretariat  
Dr Alicja Smiech, Chair, Medical Staff Executive Council (departed 11.10am)  
Ms Gina Finocchiaro, Acting Director Workforce and Corporate Operations (departed 11.10am)  
Dr Angus Ritchie, Chief Medical Information Officer, SLHD (9.05am-9.50am)  
Dr Sarah Norris, Evaluation Lead, Menzies Centre for Health Policy, University of Sydney.  
(9.05am-9.50am)

Dr Kate George, General Practitioner (GP) Lead (9.05am-9.50am)  
Dr Sally Wortley, Evaluation Lead, Menzies Centre for Health Policy, University of Sydney.  
(9.05am-9.50am)  
Mr Paul Bennett, Program Manager, HealthPathways, SLHD (9.05am-9.50am)

## 2. Welcome and introductions

The Chair welcomed members and guests to the eighty fourth meeting of the Sydney Local Health District (SLHD) Board, in particular the new members of the Board Dr Karen Luxford and Mr Richard Acheson. A copy of their Curriculum Vitae is to be circulated to the Members. The Chair congratulated those members who have been reappointed.

Mr David Wilkie was also introduced and welcomed to the meeting as an Observer. Mr Wilkie is working with the Ministry of Health on Governance and Accountability.

### Presentations:

#### HealthPathways Sydney

Dr Norris, Dr George and Dr Wortley presented on the HealthPathways Sydney (HPS) Evaluation including:

- Initial Approach
- Final Approach
- Key challenges with the evaluation
- Phase one studies
- Phase two studies
- Overall analysis
- Effects of HPS within and beyond local health system
- Local factors that affected HPS implementation
- How the local health system affected HPS implementation
- Increasing the likelihood that HPS will be sustainable
- Has the HPS achieved its objectives
- Next steps
- A paper was tabled listing the final thirteen recommendations.
- Challenges include single user logins and passwords and translation with one hundred and forty five different languages in our District.

The Board discussed and agreed a brief is to be provided at the next meet meeting to answer the questions, explain the link with GP e-referral and provide a District response to the recommendations.

The Chair thanked the Team for the presentation and for attending the meeting.

A copy of the presentation is to be forwarded via email to the Board Members.

## Concord Hospital Redevelopment (Video)

The Board watched a video on the Concord Hospital Repatriation General Hospital stage one redevelopment. The project is on time and on budget.

### 3. Declaration / Removal of conflicts of interest

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

- A/Professor Christine Giles, Member reported that she is an Associate of the Menzies Centre for Health Policy.
- Dr Mary Haines, Member reported that she is an Adjunct Associate Professor, Menzies Centre for Health Policy, School of Public Health, University of Sydney.
- Mr Richard Acheson, Member reported that his wife is employed as a Clinical Nurse Consultant at Royal Prince Alfred Hospital.

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 December 2018

The minutes of the Board meeting held on Monday 17 December 2018 were moved and seconded.

The Chair then signed the minutes.

#### 4.2 CE Report – December 2018

The Chair declared that the CE Report for December 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 Business Case will be provided to the FRAPM Committee and the Board on the Sydney District Nursing Service following the review.
- A map of all programs will be provided to the Board.
- A copy of the Auditor General’s report was provided to the Board. This agenda item can be removed from the action list.

## 5.2 Brief – Summary of RCA reports - Period August to November 2018

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

## 5.3 Brief – Status of Risks in Health Centres

The Board received, read and noted this report. The Board requested a timetable for these risks to be addressed.

## 6. Patient Story

The Chief Executive provided a verbal report on an incident involving two patients that occurred in the Emergency Department at RPAH.

## 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 2019

The Board received and noted the Board Calendar for 2019.

## 8. Chairman's Report

The Chair provided a verbal report including:

- Attendance at the Graduate Health Management Program Orientation held on 4 February 2019. There are eight new graduates this year, two of which are recipients of the Sol Belleair AM Memorial Aboriginal Graduate Health Management Program Scholarship.
- Allocation of Board members to sit on other committees include:
  - Ms O'Brien will join the Information, Communication and Technology.
  - Dr Luxford will join the Audit and Risk Committee.
  - Mr Acheson will join the Communications Committee.

## 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.

- Mental Health Readmissions within 28 days slightly increased for the month of October to 18.2%. There has been a slight increase (2.2%) in the percentage of Mental Health Readmissions within 28 Days as of YTD October 2018 in comparison to the same period last year.
- The District is meeting the nursing hours requirement.
- The District continues to focus on ETP performance, However there was a -5.6% decrease in the month of December 2018, to 69.7%, when compared to the same month in the previous year.
- Despite a 14% increase in ambulance transfers to hospitals in the SLHD, the District has continued to meet the transfer of care (TOC) target (90%) in December 2018, with 94.72% of all patients transferred from ambulance to our emergency departments in 30 minutes or less.
- Due to the increase in emergency surgery, this will now be reported on in the Chief Executive's Report.
- The DNR audit for the full round 22.2 of costing is currently being finalised, with the final report to be submitted to the Ministry in February. A copy of this report will be provided to the FRAPM Committee.
- The impact on patients of the cost of electricity and thermal control.
- The District is recruiting to the position of Director of Finance.
- For the month of December 2018, Sydney Local Health District General Fund Expenditure was \$1.232M (0.84%) unfavourable to budget. GF Revenue was \$0.840M (0.58%) unfavourable to budget for the month. For the period ended 31 December 2018 GF Expenditure was \$2.739M (0.68%) unfavourable to budget and GF Revenue was \$2.489M (0.83%) unfavourable to budget. For the year ended 31 December 2018 the District's GF NCoS was \$5.228M unfavourable to budget. These results are activity driven and the District will review enhancement requests.
- Planning is progressing well.
- Sydney Research is progressing well.

## 9.1 Finance and Performance Reports

### 9.1.1 SLHD Board reporting pack – December 2018

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

- Priorities for the Board are Risk Management number one and infrastructure.
- Priorities for the FRAPM Committee are Revenue and Mental Health.

### 9.1.2 Selected Performance Indicators – December 2018

The Board received, read and noted this report.

### 9.1.3 HealthPathways Dashboard Report – December 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 December 2018 - February 2019 is due in March 2019.

### (ii) Policies

The Board received, read and noted this report.

## 9.5 Audit and Risk Committee Report – Period 27 November 2018 - 14 March 2019

The Board noted the report is due in April 2019.

## 9.6 Facility Reports – December 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. Further information is to be provided on the decrease in allocation of dollars for Drug Health.

(vi) Mental Health Services

The Board received, read and noted the Mental Health Services report in particular the mock accreditation in March 2019 and rollout of the WorkSafe Guardian App.

(vii) Oral Health Services and Sydney Dental Hospital

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

(viii) Population Health

The Board received, read and noted the report.

(ix) Royal Prince Alfred Hospital

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

(x) Tresillian

The Board received, read and noted the Tresillian report.

(xi) Lifehouse

The Board received, read and noted the Lifehouse report.

(xii) Public Health Unit

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 this report.

(xv) Organ Donation for Transplant – Quarterly Report

The Board received, read and noted this report.

## 10. Matters for approval / resolution

Nil to report

## 11. Board Committee reports / minutes

### 11.1 Finance, Risk and Performance Management Committee

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

### 11.2 Education and Research Committee

The Board noted the next meeting is to be held on 19 March 2019.

### 11.3 Communications Committee

The Board noted the next meeting is to be held on 5 March 2019.

### 11.4 Audit and Risk Committee

The Board noted the next meeting is to be held 14 March 2019.

### 11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 19 December 2018.

### 11.6 Health Care – Clinical Council

The Board noted the next meeting is to be held on 27 February 2019.

### 11.7 Medical Staff Executive Council

The Board received, read and noted the minutes of the meeting held on 1 February 2019. The Health, Wellbeing and Support of Medical Doctors is a standing agenda item on this committee.

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

The Board received, read and noted the minutes of the meeting held on 5 December 2018.

### 11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board noted the next meeting is to be held on 26 March 2019.

## 12. Other Committee reports / minutes

### 12.1 Sustainability Committee (bi-monthly)

The Board noted the next meeting is to be held on 21 March 2019.

## 12.2 Medical and Dental Appointments Advisory Committee

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

## 12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board noted the meeting to be held on 17 December 2018 was cancelled.

## 12.4 Surgical Demand Committee (bi-monthly)

The Board noted the next meeting is to be held on 20 February 2019.

## 12.5 Finance Leaders Forum (previously Revenue Enhancement Development Committee)

The Board noted the next meeting is to be held on 20 February 2019.

## 12.6 NSW Health / SLHD Performance Review Meeting

The Board received, read and noted the minutes of the meeting held on 6 November 2018.

## 12.7 Organ Donation for Transplantation

The Board noted the next meeting is to be held on 26 February 2019.

## 12.8 Major Procurement, Assets and Imaging Steering Committee

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

## 12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the next meeting is to be held on 19 February 2019.

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

The Board noted the meeting to be held on 17 December 2019 was cancelled.

## 12.11 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 28 November 2018 and 23 January 2019.

## 13. Matters for noting

### 13.1 SLHD 2018 Annual report on NSW Youth Framework 2017-2024

The Board received, read and noted this correspondence.

### 13.2 Case Management being delivered to people living with HIV with complex health needs

The Board received, read and noted this correspondence.

### 13.3 Secretary's Environmental Assessment Requirements

The Board received, read and noted this correspondence.

### 13.4 Medical and Dental Appointments Advisory Committee - Review of the Terms of Reference

The Board received, read and noted this correspondence. The Board discussed and agreed declarations of any conflict of interests for interview panels are to be included in the Terms of Reference as managed in the Code of Conduct.

### 13.5 Outcomes of the Sydney Innovation and Technology Precinct Planning

The Board received, read and noted this correspondence.

### 13.6 Drug Health Services Strategic Plan 2016 – 2021 Mid-term Report

The Board received, read and noted this correspondence.

### 13.7 SLHD Quarterly Report on Emergency in Emergency Management Period October 2018 – December 2018

The Board received, read and noted this correspondence including:

- The District has a Memorandum of Understanding with the Charles Perkins Centre.
- The District is working on all deficient areas.
- All areas are monitored and audited.
- Feedback from the MoH has been positive.

## 14. Other Business

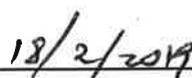
Nil to Report

### Next Meeting

The next meeting is to be held on Monday 18 March 2019 at 9.00am.

The meeting closed at 11.20am.

  
\_\_\_\_\_  
Chair

  
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Date

# Board Report

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## Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board February 2019

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### **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 December 2018, with all RCAs completed within 70 days.

Mental Health Readmissions within 28 days slightly increased for the month of October to 18.2%. There has been a slight increase (2.2%) in the percentage of Mental Health Readmissions within 28 Days as of YTD October 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 5.2% for the month of November and 5.3% YTD November, which are below the State rates of 5.9% and 6.0% respectively. Unplanned Emergency Presentations (same ED within 48 hours) were 4.4% for the month of December and 3.9% YTD December, which are below the State rates of 4.9% and 4.7% respectively.

The District remains under the benchmark (2.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI) with a result of 1.0 per 10,000 bed days for the month of November 2018. There were 0 Central Line Associated Bloodstream (CLAB) infections during November 2018. Ongoing education and training in infection control strategies and CLAB awareness discussions at ICU morbidity and mortality meetings continue.

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

#### **Workforce**

Managing our workforce to ensure the appropriate skill mix and levels to meet demand remains a priority for the District. Premium staff usage for Medical, Nursing and Allied Health increased for December 2018 compared to the same period last year by 8.08, 10.26 and 1.08 respectively. SLHD facilities are continuing to focus on meeting the Nursing hours per patient bed day.

#### **Activity**

There was a slight increase (0.80%) in the number of separations (13,874) for the month December 2018 when compared to December last year. YTD separations have increased across the District by 1.68% in comparison to last year. In December, the District's occupancy rate increased by 4.15%, to 85.04% when compared to the 80.89% in December 2017. The YTD occupancy rate has decreased by -0.79%, to 85.32%, when compared to YTD December 2017.

There were 14,906 attendances to the District's Emergency Departments in December 2018, representing an increase of 6.49% when compared to the same month last year. YTD Emergency Department attendances have increased by 0.81% to 84,154. YTD case weighted attendances have increased by 2.12%, when compared to the previous year.

## **Emergency Treatment Performance (ETP) (formerly NEAT)**

The District continues to focus on ETP performance, However there was a with a -5.6% decrease in the month of December 2018, to 69.7%, when compared to the same month in the previous year. YTD December there has been a -0.3% decrease in ETP performance to 69.3% when compared to the same period in the previous year. RPA has been significantly challenged. Although the opening of the new resuscitation bays has provided increased capacity for the high acuity of the patients seen, the dislocation of the emergency department short stay unit to level 9W1 has caused some workflow challenges which are currently being worked through. A turn-around plan is currently being prepared.

## **Transfer of Care**

Despite a 14% increase in ambulance transfers to hospitals in SLHD, the District has continued to meet the transfer of care (TOC) target (90%) in December 2018, with 94.72% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. YTD December 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 December. The District continues to make improvements in relation to Triage Category 3 performance, which was slightly below target at 74.49% for the month of December, representing a 4.10% improvement on the 70.40% in December 2017.

## **Elective Surgery**

There was a 4.64% decrease in surgical admissions in the month of December 2018 when compared to the same month last year. YTD surgical admissions have increased by 1.49% 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 211 surgical patients not ready for care for the month of December 2018, when compared to the same month last year. SLHD facilities have reviewed all surgical patients not ready for care on the waiting list. Patients identified through the review have been reclassified accordingly. Action plan of strategies to review these patients regularly have been established and an improvement is anticipated in the coming months.

## **Community care and Hospital in the Home**

The District has continued to manage it's 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 6.4% increase in the number of Hospital in the Home overnight separations December 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.

# Board Report

## 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 -0.46% variance to target for YTD December, excluding DWAU.

Stream	Target	Actual	Variation	Variation %
Acute*	83,888	84,358	470	0.56%
ED	11,680	11,694	14	0.12%
NAP	23,658	22,318	-1,340	-5.66%
SNAP**	6,292	5,893	-399	-6.34%
MH Admit	8,671	8,330	-341	-3.93%
MH NAP	3,666	4,624	958	26.13%
Total	137,855	137,217	-638	-0.46%
Dental DWAU	33,114	39,271	6,157	18.59%
Dental NWAU#	4,158	4,931	773	18.59%
Total (NWAU)	142,013	142,148	135	0.10%

\*December is 93.67% coded

\*\*68 ungrouped episodes

# NWAU=589/4691\*DWAU

The NSW Ministry of Health has commenced planning for the 2019-20 Service Agreements. As in previous years, the purchasing consultation and negotiation process allows for SLHD to highlight and discuss local service delivery issues, and associated impacts, that are considered to not be adequately accounted for within the generic purchasing model; with the District submitting our local issues at the end of last year. The Ministry will be holding the Purchasing Model Roadshow in early February to commence the negotiation rounds.

### Sub and Non-Acute Patient (SNAP) Activity

The District Performance Unit continues to work with facility SNAP Coordinators to ensure all SNAP episodes are grouped. YTD December, there are 68 ungrouped episodes, with significant improvements made by Balmain Hospital over the past months to ensure all episodes are grouped.

### Clinical Costing Update

The DNR audit for the full round 22.2 of costing is currently being finalised, with the final report to be submitted to the Ministry in February. Overall the report is extremely positive and highlights many areas where improvements have been made. Areas for further improvement have also been identified, with action plans to address these concerns progressing.

The District Performance Unit has commenced preparations for the annual iFRAC cost centre review, with a workshop to reiterate the iFRAC methodology and expectations to be held with facilities and services in February.

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## **REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE**

### **SLHD REVENUE COMMITTEE**

#### **Private Health Insurance Usage**

For the month of December 2018, SLHD recorded 18.77% of all patients discharged as privately insured.

For the year ended 31 December 2018 there were a total of 16,560 (19.39%) patients admitted as private, a reduction of 339 (2%) patients compared to the same period last year. The results across each facility were:

- RPAH – a reduction of 329 (3.7%) patients.
- Concord – an increase of 30 (0.46%) patients.
- Canterbury Hospital – a reduction of 83 (7.62%) patients
- IRO – an additional 20 (12.42%) patients
- Balmain Hospital – an additional 83 (59.71%) patients

The District recorded a total increase of 1,390 separations (public and private) in the six months to the end of December 2018, compared to the same period last year.

The reduction in private patient numbers reflects decreased conversions of Emergency Department admissions at the 3 sites, as well as challenges with information provided for online health insurance validation checks.

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 December 2018, 8.76% of patients were flagged as infection control across the District with the average for the first six months of the year being 8.62%.

For the month of December 2018, 23% of all available single rooms were occupied by private patients and 40% of all private patients were accommodated in single rooms.

For the first six months of the financial year the average occupancy of private patients in single rooms is 26% and the average of all private patients accommodated in single rooms is 40%.

#### **SLHD Revenue Committee**

The Revenue Committee did not meet in December 2018 and will reconvene in February 2019.

## **PERFORMANCE AND REDESIGN UNIT / REDESIGN AND SERVICE IMPROVEMENT**

### **Innovations**

- The first iteration of the Pitch for 2019 is scheduled on 8 March 2019 and will be held at Concord Hospital to align with March Arts Program. Applications close on 11 February 2019.

### **Clinical Redesign: CHR Projects**

- The "A Joint Effort – Patient Centred Redesign in the Rheumatology Outpatient Services at RPA" Project (CHR 2018 – first intake) have submitted the project's Solution Report. The project team are finalising the implementation planning phase of the project, with solutions generated from workshops with staff and patients, literature reviews, site visits and benchmarking with other similar departments. The team will finalise the Implementation Planning Report and will be submitted by early February 2019.

## Other projects

- The display panels for the Electronic Ward Boards Pilot Project were installed in December 2018. The Performance Unit is currently developing the electronic system that will be displayed on the boards in the identified inpatient and outpatient pilot sites.

## Accelerating Implementation Methodology (AIM):

The next AIM training is scheduled on 21-22 February 2019.

## HealthPathways

### Workgroups

No Workgroups conducted in December and January.

### Usage of HealthPathways

Provisional January 2019 (1 – 20) usage figures are showing growth compared to the same period in 2018.

	January 2019 1 – 20	December 2018	November 2018	January 2018 1 – 20
Users	598	943	1,118	584
Sessions of use	2,847	3,883	5,480	2,747
Unique Page Views	9,321	12,771	16,305	8,282
Total Page Views	11,170	15,158	21,482	10,883

## Evaluation Recommendations

In response to the recommendations of the Menzies evaluation of the HPS program Internal discussions and drafting of a specific HealthPathways Sydney Strategic plan. The plan will outline the next three year contract period strategic and operational plans. The cornerstone being the transformation of the program from implementation to being fully embedded across all GP settings in SLHD and with SLHD clinical staff and trainees.

## Platform Changes

On 6 November 2018, the HealthPathways Sydney website introduced the new mobile friendly platform to its users. In preparation for the launch, Four weeks prior to the launch regular communications regarding the upcoming platform change were disseminated for via the PHN and SLHD regular media and intranet platforms. A “coming soon” banner was also placed on the HealthPathways website from 4 weeks out to enable users to trial the new platform. In the nine weeks that have elapsed since the introduction, the HealthPathways Sydney team have not received any feedback via the send feedback functionality on the website or thorough the Program’s email or telephone contact services.

Utilisation of the mobile-friendly platform is ultimately governed by the internet browser the individual is using. There is an auto-redirection to the platform most suited to the browser. However, individuals using up-to-date browsers can elect to keep using the “classic” HP platform via a simple change in settings. Content is consistent between the two platforms, but in time the functionality of the traditional site will become restrictive as it becomes less compatible with future web browser requirements.

An analysis of the website's usage from just before the transition (6 November 2018) to the new format up until 16 January 2019 shows no decline in usage rates when seasonally adjusted. Compared to the same period for 2017-2018, the numbers of users rose as did sessions of use and unique page views. There is also evidence that the new format has reduced the amount of returning to previous page clicks as the gap between total page views and unique page views is narrower (a possible indicator that the cleaner layout of the site is improving search functionality). The split between users of the website between using the new platform and the classic site demonstrates that 92% of users are engaging with the new version.

## **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 period ended 31 December 2018 based on the District's budgeted NCoS.

For the month of December 2018, Sydney Local Health District (**SLHD**) General Fund Expenditure was \$1.232M (0.84%) unfavourable to budget. GF Revenue was \$0.840M (0.58%) unfavourable to budget for the month. For the period ended 31 December 2018 GF Expenditure was \$2.739M (0.68%) unfavourable to budget and GF Revenue was \$2.489M (0.83%) unfavourable to budget. For the year ended 31 December 2018 the District's GF NCoS was \$5.228M 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 the impact of Doubtful Debts) 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 December 2018 GF Total Expenditure was \$1.232M (0.84%) unfavourable to budget, reflecting unfavourable results for Salaries & Wages (\$1.197M), Annual Leave Provision (\$1.069M), VMO Payments (\$0.436M), G&S Prosthesis (\$0.259M), G&S Special Services (\$0.367M) and Grants (\$0.269M) offset by favourable results in Other Employee Expenses (\$1.288M), RMR (\$0.546M) and G&S Admin (\$0.713M).
- YTD December 2018 GF Total Expenditure was \$2.739M (0.31%) unfavourable to budget. This result reflects unfavourable results for Salaries & Wages (\$1.517M), Overtime (\$1.079M), Annual Leave Provision (\$1.284M), VMO Payments (\$2.012M), G&S Medical & Surgical Supplies (\$2.105M), G&S Special Services (\$0.811M) and G&S Prosthetics (\$0.9504M) offset by favourable variances in Other Employee Expenses (\$1.985M), G&S Support (\$0.300M), G&S Admin (\$3.925M) and RMR (\$1.224M).

## Revenue

- GF Total Revenue was \$0.840M (0.58%) unfavourable to budget for the month of December 2018. The result for the month reflects unfavourable variances in Patient Fees (\$0.389M), Facility Fees (\$0.256M), Services to Other Organisations (\$0.607M) and Doubtful Debts (\$0.315M) offset by favourable variances in High Cost Drugs (\$1.134M), Conference & Training Receipts (\$0.103M) and User Gen Rendered Services (\$0.156M).
- YTD December 2018 GF Total Revenue was \$2.489M (0.29%) unfavourable to budget. The unfavourable YTD result reflects unfavourable variances in User Charges (\$2.778M), Grants & Contribution (\$1.078M) and Doubtful Debts (\$1.954M) offset by favourable variances in Patient Fees (\$1.545M) and Other Revenue (\$1.836M).

## SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$0.288M unfavourable to budget for the month of December 2018 and \$3.056M unfavourable to budget for the six months ended 31 December 2018. The YTD result reflects unfavourable budget variances for Expenditure (\$2.113M) and Revenue (\$0.942M).

## CONSOLIDATED RESULT

For the period ended 31 December 2018, the consolidated year to date NCoS result for the General Fund and SP&T was \$8.285M unfavourable to budget. The consolidated result comprises unfavourable variances for Expenditure (\$4.854M), Own Source Revenue (\$1.404M) and Doubtful Debts (\$1.953M).

## FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

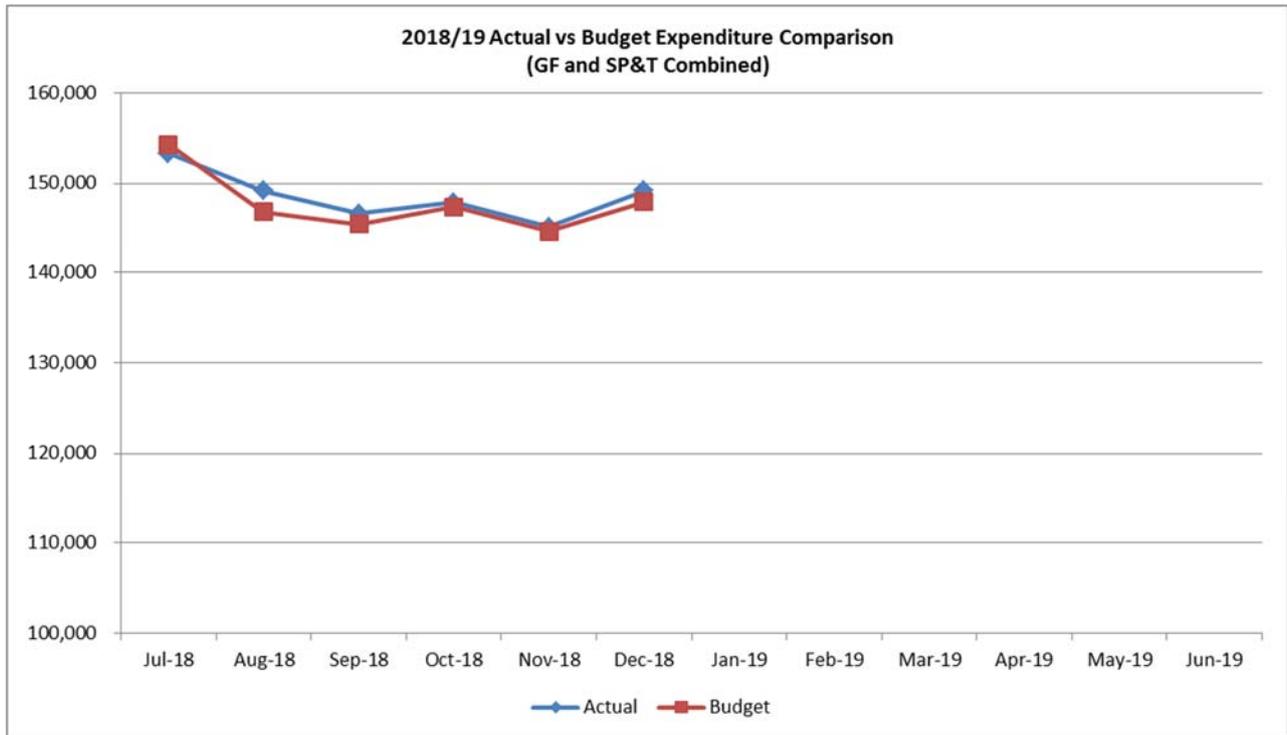
For the period ended 31 December 2018, SLHD recorded a Total Net Result of -\$7.690M (Note that Total Revenue was higher than Total Expenditure for YTD December 2018) which was \$9.320M (55%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD December 2018 was \$6.741M unfavourable to budget. The YTD Net Direct Operating Result reflects unfavourable budget variances in Expenditure (\$5.329M) and Revenue (\$1.411M).

For the month of December 2018 Total Direct Revenue was \$0.181M unfavourable to budget, comprising unfavourable variance for the General Fund (\$0.466M) and favourable variance for the SP&T Fund (\$0.285M). YTD Total Direct Revenue was \$1.411M unfavourable to budget, comprising unfavourable variances for the General Fund (\$0.474M) and SP&T Fund (\$0.937M). 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.

Total Direct Expenditure was \$1.840M unfavourable to budget for the month of December 2018, comprising unfavourable results for the General Fund (\$1.716M) and the SP&T Fund (\$0.124M). YTD Total Direct Expenditure was \$5.329M unfavourable to budget, comprising \$3.857M unfavourable variance for the General Fund and a \$1.472M unfavourable variance for the SP&T Fund. The YTD result for the General Fund reflects unfavourable variances in Salaries & Wages (\$1.517M), Overtime (\$1.079M), Direct Clinical Operating (\$3.659M) and VMOs (\$2.012M) offset by favourable results for On-costs (\$0.548M), G&S Corporate & Operational Admin (\$3.925M) and G&S Support Services (\$0.300M).

## 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 December 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 December 2018.

The cash balance at 31 December 2018 for the SLHD Operating bank account was \$11.960M and the Operating Cash book balance was \$11.866M.

## CAPITAL WORKS – SMRS PROJECTS

As at 31 December 2018 the District's Full Year Capital works budget relating to SMRS Projects is \$39.170M comprising \$2.379M of MoH funded projects and \$36.791M of locally funded projects. In December 2018, ten locally funded projects totalling \$20.720M were approved by MoH.

Actual expenditure as at the end of December 2018 was \$4.075M which is marginally below budget.

## OTHER CAPITAL PROJECTS

As at the end of December 2018, the District has expended a total amount of \$0.156M on project relating to the Patient Billing and Tracking (h-Trak) System. The total expenditure of \$0.156M was sourced from the General Fund.

## **CAPITAL WORKS**

### **Concord Redevelopment Update**

The Drug Health decant strategy has continued on site, refurbishment works continued to Building 69 for Drug Health IPU. The handover of Drug Health is forecasted for early February 2019.

Key activities on the project for the next 3 months are summarised below. January, February and March include a range of activities that are critical to ensuring the project remains on programme.

- HV trenching works complete- February;
- Go Live Drug Health IPU – February;
- Main works design finalisation – January – March;
- Main works site establishment planning – February;
- Enabling works services commissioning – March.

### **RPA ED redevelopment**

Redesign of the 'old resuscitation bay' space to be named Emergency Treatment Area (ETA), is progressing and anticipated for completion in March 2019. The new resuscitation bay space is awaiting works to improve the acoustics of the area.

### **RPA Building 77 – Plant Room**

Drainage services have been installed. Concrete slab and blockwork orders have been placed.

### **RPA Building 63 RPU**

Mechanical and electrical documentation is 85% complete. Clean room product review has been undertaken. Awaiting final drawings for revised quotes. Site visits to inspect potential clean room manufactures are to be set up early 2019. Hot cells currently under tender review.

### **RPA Renal Medicine - PMBC**

Set out works and framing has been completed. Wall noggins are 50% complete. Fire and smoke walls have been sheeted. Mechanical, electrical and hydraulic services are currently being quoted.

### **RPA Building 75 Respiratory Medicine Labs Stage 2**

Demolition has been completed. Mechanical service rough-in is underway. Wall framing has commenced. Hydraulic and electrical rough-in has commenced. Consult room works have been organised for early January 2019.

### **CRGH Decanting – Building 86 Medical Records**

Staff toilets, joinery installation, framing for corridor rooms, ceiling to rear corridor room are all complete. Site is ready to be occupied.

### **CRGH Decanting – Building 86 Environmental Services**

Ceilings, flooring and mechanical service fit off is complete. Painting is 90% completed. Electrical and hydraulic fit off is complete.

### **Upgrade of CRGH Theatres 9 and 10**

Disconnection of electrical, mechanical and hydraulic services is complete. Demolition has commenced.

### **Community & Family Services**

Floor finishes are 90% completed. Painting finishes and electrical fit off are 75% complete. Hydraulic fit off is 50% completed. Operable wall has been installed.

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## **PLANNING**

### **Concord Clinical Services Plan – Stage 2**

A Scoping Paper outlining the major processes for the development of the Concord CSP – Stage 2 has been developed and circulated to the SLHD and Concord Hospital Executive and Heads of Department.

The planning process will build upon the work completed for the 2014 Concord CSP and will include an extensive review of bed and services based on the new Ministry of Health HealthApp and other related approved planning tools, using the base of 2017/18 activity. The 2019 CSP will also assess the viability of options for new maternity and paediatric service development on site and incorporate a new HealthOne for Concord/Homebush.

The planning process involves significant clinical service consultation, with the finalisation of the CSP –Stage 2 planned by June 2019.

### **Canterbury Clinical Services Plan - 2019**

The 2016 CSP is currently being updated using the new Ministry of Health HealthApp and the base of 2017/18 activity, and a review of current models of care. The updated plan is due to the Chief Executive for approval and resubmission to the Ministry by March 2019.

### **Canterbury – Bankstown Planning**

Building upon the work completed for the updated Canterbury CSP, a number of scenarios are being developed to support planning for potential future Canterbury-Bankstown services.

### **Asset Strategic Plan**

The review of District service activity and projections is currently being finalised and will inform the 2019 SLD Asset Strategic Plan.

### **SLHD Facility Strategic Plans 2019-2024**

The draft Facility Strategic Plans have been provided to the SLHD Executive for review and comment. Further commentary on individual plans has also been provided by Clinical Heads of Department for inclusion in the final plans.

### **SLHD Clinical Stream Position Papers 2019-2024**

The Planning Unit is working with the Clinical Managers to update the Position Papers to align with the SLDH Strategic Plan 2018-2023 and include updated activity data and new models of care. The draft Papers are due for submission to the Chief Executive by the end of February 2019.

### **RPA HealthOne (Green Square)**

Site selection: HI is continuing to meet with landowners and Urban Growth, City West Housing, and Landcom to progress property acquisition processes.

The Waterloo Project Definition Report and Economic Appraisal has been completed.

### **SLHD Planning Unit Work Plan – 2019**

In addition to the planning work identified above, the Unit will also support the development or refresh of the following SLHD plans in 2019/20:

- RPA CSP
- Mental Health Strategic Plan
- Education and Training Strategic Plan
- Performance Unit Strategic Plan

- Drug Health Strategic Plan
- Pharmacy Services Plan

## **Aboriginal Health Impact Statements**

Consistent with NSW Health policy, all plans developed by the Districts and Networks require an Aboriginal Health Impact Statement (HIS). The Planning Unit is working with the Aboriginal Health Unit to streamline the review and approval processes for the HIS within the SLHD.

## **SYDNEY RESEARCH**

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

A total of 74 EOIs were received, with three SLHD projects selected to progress to the Full Application state in TRGS Round 4:

1. Ms Michelle Barakat-Johnson and Professor Fiona Coyer - A novel implementation of best available evidence into practice for incontinence-associated dermatitis (IMBED).
2. Dr Rowena McMullan – ‘The Gloves On’ trial, non-sterile glove use in addition to hand hygiene in the reduction of neonatal sepsis.
3. Professor David Celermajer AO – Optimising “Whole of Life Care” for patients living with Congenital Heart Disease.

A final draft of each completed application is due to Sydney Research on 19 February 2019. This will be an opportunity for internal review and feedback from LHD partners. Full applications are due 26 February 2019 for CE review and approval, with CE signature to be received by 6 March 2019. Approval from partner LHDs is due 12 March 2019, with final submission to OHMR due 13 March 2019.

Application assessment will take place from 14 March to 23 April 2019, with applicants notified of outcomes on 31 May 2019.

Progress reports for projects from TRGS Rounds 1-3 were approved by the CE and submitted to OHMR on 15 January 2019.

### **STRIVE Research Impact and Commercialisation Series**

Based on findings of the 2018 program evaluation, the 2019 STRIVE program will consist of four linked workshops to support idea development, pitching and fund sourcing, intellectual property protection and commercialisation. It will also link more closely to The Big Idea event in Innovation Week, aiming for greater engagement with relevant audiences.

### **Sydney Health Partners (SHP)**

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

- In late December 2018 Dr Teresa Anderson AM CE-SLHD and Adjunct Associate Professor Vicki Taylor, Executive Director, Sydney Research participated in a half day Strategic Planning Workshop for Sydney Health Partners, facilitated by Boston Consulting
- The 2018 SHP Annual Report is in production, with Sydney Research and LHD partners contacted to contribute.

# Board Report

- SHP invited expressions of interest (EOI) for a third round of Rapid Applied Research Translation Grants, with EOIs due 30 January 2019. Sydney Research will participate in the inaugural meeting of the SHP Research Committee on 8 February 2019, and will be involved in evaluating EOI applications.
- SLHD is nominated as the lead health service on four recommended projects (listed below) with the funding recommendations endorsed by the SHP Governing Council from Round 2:

Lead applicant	Primary organisation	Lead Health Service	Project title	Project summary	Proposed funding
Dr Elizabeth Cayanan	Royal Prince Alfred Hospital	Sydney Local Health District	Weight loss for sleep disordered breathing: translating sleep, lifestyle, energy, eating, exercise program into practice	to translate SLEEEP into the public health system through a pilot study at RPAH	\$165,000
Professor Cathie Sherrington	University of Sydney	Sydney Local Health District	Better participation in exercise for people aged 50+ and people with physical disabilities through health professional education	to evaluate the effects of comprehensive online training on health professional referral to suitable exercise and sport for people 50+ and people with physical disabilities	\$150,000
Professor Ron Grunstein	Woolcock Institute of Medical Research	Sydney Local Health District	Oximetry screening to detect sleep-disordered breathing in severe mental illness	to evaluate a model of care that detects and treats SDB in patients with severe mental illness via home oximetry	\$120,000
Professor Woosung Sohn	University of Sydney	Sydney Local Health District	Scaling up a school-based fluoride varnish program for Aboriginal children in New South Wales	to scale up a current fluoride varnish program targeting Indigenous children in NSW, by extending the program over 18 mths (instead of 12 mths) and by expanding a current pilot to include schools from Western Sydney and Sydney Local Health Districts. It will also test a nationally agreed standard school-based fluoride varnish protocol that is simpler than the one being currently used	\$170,000

## 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 (CUBIC).

- 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).

## Other Activities

- Sydney Research have met with a number of stakeholders to progress initiatives including:
  - The Centenary Institute and the Heart Research Institute to discuss potential consolidation of cell and gene therapy wet and dry research spaces.
  - Mr Benn Miller to discuss the SLHD and Sydney Research structure and how research and innovation could be approached in SLHD corporate orientation
  - 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.
  - Richard Sokolov and George Sidis from IDE, a commercialisation group will participate in the Big Idea 2019.
  - Lou-Anne Blunden, A/Prof John Eastwood and Prof Tim Lambert to discuss opportunities within the Integrated Care portfolio.
  - Dr Lisa Horvath and Dr Teresa Anderson AM to receive an update on the NSW Early Phase Clinical Trials Alliance (NECTA) and progress potential further support of the program.
- The first meeting of the NSW Cell & Gene Therapy Technical Advisory Group was held 21 January 2019.
- Representatives for the Embedding Quality Research in LHDs (EQRLHDs) Steering Committee have been confirmed, with the first quarterly meeting planned for 15 March 2019.
- Recruitment is in progress for a Project Manager (Digital Communications) for the EQRLHDs project, to be supported by SLHD and OHMR.
- Ms Rina Ward has commenced as Executive Officer for Sydney Research.
- Recruitment of the Program Manager for Sydney Research has also commenced.
- Planning has commenced for Innovation Week 2019 with a draft program developed 21 January 2019.
- The first Sydney Research Council meeting for 2019 will be held 29 January.
- Highlights and upcoming activities of Sydney Research Council members are being documented for coverage by Sydney Research in 2019.
- Sydney Research is attending a number of events representing Sydney Research and/or SLHD including:
  - Launch of the Institute for Musculoskeletal Health, 8 February 2019
  - NHMRC Clinical Trials Centre 30<sup>th</sup> Anniversary Symposium, 1 March 2019
- @SydneyResearch currently has 627 followers on Twitter.



Dr Teresa Anderson

**Chief Executive**

Date: 18.2.19