
Sydney Local Health District

Ninety Fourth Meeting of the Board

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

1. Present and apologies

The Hon. Ron Phillips AO, Chair
Dr Teresa Anderson, AM, Chief Executive
Ms Victoria Weekes, Member
Dr Thomas Karplus, Member
Ms Frances O'Brien, Member
Dr Mary Haines, Member
Mr Richard Acheson, Member
Mr David McLean, Member
Professor Paul Torzillo AM, Member

Apologies

A/Professor Christine Giles, Member
Ms Ronwyn North, Member
Ms Susan Anderson, Member

In attendance

Ms Nerida Bransby, Secretariat
Dr Katherine Moore, Director of Clinical Governance and Risk (9.00am - 10.35am)
Ms Gina Finocchiaro, Executive Director, Workforce and Corporate Operations (9.50am - 10.35am)
Professor Paul Bannon, Head of Department, Cardiothoracic Surgery (9.00am -10.30am)
Professor Paul Stalley, Clinical Director, Neuroscience, Bone & Joint and Trauma and Program Director of Surgery (9.00am -10.30am)
Mr Dean Bell, Deputy General Counsel, MoH (9.00am -10.30am)

2. Welcome and introductions

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

The Chair advised the Board that routine business and the deep dive is being deferred to the next meeting to allow the Board to focus on the information pertained in the Chief Executive's Confidential report.

Minutes

3. Declaration / Removal of conflicts of interest

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

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

4. Confirmation of previous minutes

4.1 Minutes – 21 October 2019

The minutes of the Board meeting held on Monday 21 October 2019 were moved and seconded.

The Chair then signed the minutes.

4.2 CE Report – October 2019

The Chair declared that the CE Report for September 2019 was ready for publication.

5. Matters arising from the previous minutes

5.1 Action sheet

This agenda item was deferred to the next meeting.

6. Patient Story

This agenda item was deferred to the next meeting.

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

Nil to report.

9. Chief Executive's report

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

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – September 2019

The Board received, read and noted the SLHD Board Reporting Pack for September 2019.

9.1.2 Selected Performance Indicators – September 2019

The Board noted this report was not available.

9.1.3 HealthPathways Dashboard Report

The Board received, read and noted this report.

9.1.4 MoH Board Report for the SLHD – September 2019

The Board noted this report was not available.

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 this report is due in December 2019 for the period July - September 2019.

(ii) Between the Flags and CERS

The Board received, read and noted this report.

(iii) SLHD Risk Register

The Board noted this report is due in December 2019.

9.5 Audit and Risk Committee Report – Period 9 September 2019 – 21 November 2019

The Board noted this report is due in December 2019.

9.6 Facility Reports – September 2019

(i) Balmain Hospital

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

(ii) Canterbury Hospital

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

(iii) Community Health

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

(iv) Concord Hospital

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

(v) Drug Health Services

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

(vi) Mental Health Services

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

(vii) Oral Health Services and Sydney Dental Hospital

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

(viii) Population Health

The Board received, read and noted the report.

(ix) Royal Prince Alfred Hospital

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

(x) 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 this report.

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

The Board received, read and noted this report.

(xiv) Croydon / Marrickville / Redfern Community Health

The Board received, read and noted this report.

(xv) Organ Donation for Transplant – Quarterly Report (October - December 2019)

The Board noted this report is due in February 2020.

10. Matters for approval / resolution

Nit 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 14 October 2019.

11.2 Education and Research Committee

The Board noted the next meeting is to be held on 18 November 2019.

11.3 Communications Committee

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

11.4 Audit and Risk Committee

The Board received, read and noted the minutes of the meeting held on 18 September 2019.

11.5 Health Care – Clinical Quality Council

The Board received, read and noted the minutes of the meeting held on 23 October 2019.

11.6 Health Care – Clinical Council

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

11.7 Medical Staff Executive Council

The Board received, read and noted the minutes of the meeting held on 8 November 2019.

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

The Board received, read and noted the minutes of the meeting held 2 October 2019.

11.9 Aboriginal Health Steering Committee (bi-monthly)

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

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

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

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 11 September 2019.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board noted the meeting held on 17 October 2019 was cancelled.

12.4 Surgical Demand Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held 16 October 2019.

12.5 Finance Leaders Forum (previously Revenue Enhancement Development Committee)

The Board noted the meeting held on 18 September 2019 was cancelled.

12.6 NSW Health / SLHD Performance Review Meeting

The Board noted the meeting was held on 6 August 2019.

12.7 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting held on 22 October 2019.

12.8 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted the minutes of the meeting held on 8 October 2019.

12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted next meeting is to be held 19 November 2019.

12.10 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 16 October 2019.

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

The Board received, read and noted the minutes of the meeting held 3 October 2019.

12.12 Minutes of the District Security Co-ordination Committee

The Board received, read and noted the minutes of the meeting held 9 October 2019.

13. Matters for noting

13.1 Brief – Vocational Educational and Training in Schools Program

The Board received, read and noted this brief.

13.2 Root Cause Analysis Compliance Rate

The Board received, read and noted this report.

14. Other Business

Nil to report

Next Meeting

The next meeting is to be held on Tuesday 17 December 2019 at 9.30am in the SLHD Boardroom following the FRAPM meeting at 8.30am.

The meeting closed at 11.15am.


Chair

17/12/2019
Date

Board Report

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

PERFORMANCE

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

Safety and Quality

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

There were no RCAs for the month of September.

Mental Health Readmissions within 28 days slightly increased for the month of July to 17.8%, from June result of 15.2%. The District continues to focus on strategies to improve mental health performance.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation at 5.4% for August and 5.5% YTD August, which is below the State rate of 6.0% for both the month and YTD August. Unplanned Emergency Representations (same ED within 48 hours) were 4.4% for the month of September and 4.1% YTD September, which is also below the State month rate of 4.7% and YTD rate of 4.6%.

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 August 2019. There were 0 Central Line Associated Bloodstream (CLAB) infections during August 2019. Ongoing education and training in infection control strategies and CLAB awareness discussions at ICU morbidity and mortality meetings continue.

The District remains within benchmark for 11 of the 14 reported Hospital Acquired Complications reported in August- July 2019 . Hospital Acquired Neonatal Birth Trauma with 70.8 per 10,000 episodes against a target of 65.6 which is slightly higher than last year (69.7) and Hospital Acquired Renal Failure, the District was 2.9 per 10,000 episodes was slightly above the target of 2.7. This was a 1% improvement for the same period last year. 3rd and 4th degree perineal tear was 394 per 10,000 which is a 23% improvement on the same period last year.

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

Workforce

The District continues to focus on strategies to ensure our workforce has the appropriate skill mix and levels to meet demand. Premium staff usage has increased for Medical and Allied Health for September 2019 compared to the same period last year by 0.80 and 0.21 respectively due to the significant increase in activity. Premium staff usage has decreased for Nursing for September 2019 compared to the same period last year by -0.25.

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

Activity

There was an increase (1.93%) in the number of separations (14,571) for the month September 2019 when compared to September last year. YTD separations have increased across the District by 2.25% in comparison to last year. In September the District's occupancy rate increased by 6.38%, to 91.79% when compared to the 85.41% in September 2018, reflecting the acuity of patients.

There were 14,395 attendances to the District's Emergency Departments in September 2019, representing an increase of 5.30% when compared to the same month last year. YTD September Emergency Department attendances have increased 6.61% in comparison to the same period last year. YTD September case weighted attendances have increased by 5.82%, when compared to the previous year.

Emergency Treatment Performance (ETP) (formerly NEAT)

The District continues to work on ETP performance. Despite the significant increase in activity, there was only a -1.80% decrease in the month of September 2019, to 67%, when compared to the same month in the previous year. YTD there has been a -1.0% decrease in ETP to 67.71% when compared to the same period in the previous year. YTD September 1,414 additional patients have been admitted, referred or discharged within 4 hours of presentation, when compared to the same period in the previous year.

Transfer of Care

The District met the transfer of care (TOC) target (90%) in September 2019, with 90.60% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. This is despite the significant increase in ambulance activity.

ED Triage

The District met target for Triage Categories 1, 2, 4 and 5 for the month of September. The District continues to make improvements in relation to Triage Category 3 performance, which was slightly below target at 72.99% for the month of September, representing a 2.07% increase on the 70.92% in September 2018.

Elective Surgery

There was a 4.64% increase in surgical admissions in the month of September 2019 when compared to the same month last year. SLHD continues to perform at the top of the state for patient treatment timeframe targets for elective surgery achieving 000, with all patients admitted within the clinically appropriate timeframe for their surgery. There has also been a 26.19% decrease in surgical patients not ready for care for the month of September 2019, when compared to the same month last year. This remains an area of focus for the District.

Emergency Surgery

There were 135 more emergency surgeries performed in the month of September 2019 when compared to the same month last year, representing a 12.7% increase. YTD September emergency surgery has increased by 158 cases (4.7%) across the District.

Community care and Hospital in the Home

The District has continued to manage its activity through investments in Sydney District Nursing who continue to manage over 1,000 patients per day in the community who would otherwise be in hospital. There has been a 0.6% decrease in the number of Hospital in the Home overnight separations in September in comparison to the same month 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. The enhancements to Sydney District Nursing will see an increase in capacity over coming months.

NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

NWAU Activity against Target

The District continues to wait on the Ministry of Health and eHealth for the release for the NWAU19 for all streams other than SNAP.

Stream	Target	Actual	Variation	Variation %
Acute*	28,324	28,282	- 43	-0.15%
ED**	3,954	4,109	155	3.92%
NAP**	8,326	8,410	84	1.01%
SNAP	2,312	2,286	- 25	-1.10%
MH Admit	2,791	3,006	215	7.70%
MH NAP***				
Total	45,707	46,093	386	0.84%
Dental DWAU***				
Dental NWAU#				
Total (NWAU)	45,707	46,093	386	0.84%

* 15 uncoded episodes

**NWAU18

***unavailable

NWAU=589/4691*DWAU

Non-Admitted Patient (NAP) Activity

The District Performance Unit a released a local Non Admitted Activity STARS application, which provides information on the full Non Admitted Data Collection, included activity that is out of scope for Activity Based Funding. This information was previously provided at a State level, however ongoing difficulties with the State NAP App resulted in the need for the development of a local application.

Clinical Costing

The District Performance Unit has made two draft submissions for the full Round 23.2 of costing, with a final submission to be made in early November. The DNR submission deadline was extended for an additional week, as a result of numerous changes rolled out by the ABM Branch close to the DNR period and difficulties experienced with the DNR Reasonableness and Quality and Weighted Activity Unit applications.

The District Costing Team continues to working with facilities to address identified issues and mismatches between cost and patient activity as part of the DNR process, with high quality score achieved in the first two submissions.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of August 2019, 16.32% (2,300 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was a decrease of 372 (16.17%) patients who elected to use their private insurance compared to the same period last year and a decrease of 271 (11.78%) in total separations from previous month.

For the month ended September 2019 conversions for facilities as compared to the same period last year were:

- RPAH – a reduction of 302 (27.01%) private patients.
- Concord – a reduction of 32 (9.47%) private patients.
- Canterbury Hospital – a reduction of 21 (13.55%) private patients.
- IRO – a reduction of 2 (7.69%) private patients.
- Balmain Hospital – a reduction of 2 (12.5%) private patients.

Single Room Usage

For the month of September 2019, 9.20% of patients were flagged as infection control across the District.

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 Strategic Revenue Network

Key notes:

- General Managers were in attendance at the SLHD Strategic Revenue Network meeting in September 2019.
- Clinician Billing Portal (CBP) has been implemented with trial specialities at Concord and RPAH going live.
- Facilities will conduct a review of all outpatient clinic activity to identify revenue opportunities.

REDESIGN AND SERVICE IMPROVEMENT

Innovations

- The next round of the Pitch will be held on 29 November 2019, at the Kerry Packer Education Centre. Applications for submissions to the Pitch close on the 4 November 2019.

Clinical Redesign: CHR Projects

- Applications to the ACI's Centre for Healthcare Redesign, Graduate Certificate (Clinical Redesign) Program 2020 (first intake) are now open.
 - Applications have opened particularly early as the first intake will be offering a targeted Redesign Graduate Certificate course for partnership teams in primary and acute care to redesign services to deliver improved care for Aboriginal people.
 - The Aboriginal Health Steering Committee has been asked to explore potential project suitable for this program.
- The "A Joint Effort – Patient Centred Redesign in the Rheumatology Outpatient Services at RPA" Project (CHR 2018 – first intake) is in the process of implementing nine solutions. Progress includes:
 - eReferrals – went live on June 4. The first eReferral was received on 12 July. Seven referrals have been received via eReferral to date. A referral audit will be done when on line referrals increase.

- Clinic Huddles – Huddles continue in the weekly biologics clinic and a modified version of the huddle at the completion of the weekly multidisciplinary clinic prior to that morning's review and teaching clinic. Staff have been surveyed and the response to the clinic huddles has been very positive for the staff.
- Administrative Staff continue to phone patients to remind them of their appointments 24-48 hours in advance. An audit of No Show rates for the first 6 months (April – September) has been conducted and compared to the corresponding time period in 2018. The overall No Show Rate for the Rheumatology Outpatient Clinics within the scope of the Redesign Project has remained exactly the same at 11%. Audits will continue. There has been no surveying of patients or staff to evaluate this initiative.
- Monthly education sessions for all staff commenced in May. The education sessions are being attended by administrative, allied health and nursing staff. Due to the variety of staff attending these sessions it has been difficult to schedule topics appropriate for all. The sessions have changed to second monthly to enable the scheduling of topics appropriate to attendees. Staff attending will be asked to evaluate these sessions at the end of this year.
- Weekly departmental communication is occurring via weekly email newsletter. Formal evaluation of this initiative has yet to occur. To date departmental meetings have not been commenced.
- The second meeting with facility planner regarding the refurbishment of the Rheumatology Clinic environment was held on 19 June. Team are waiting for draft plans. There is no further update regarding the refresh of the Rheumatology Clinic environment.
- An education workshop on patient communication was conducted 26 July by Ms. Jennifer Graham, Clinical Audit Manager, RPAH and Mr. Graeme Slade, Patient and Family Experience Director, RPAH. The focus of the workshop was on communication with the patients and families and how to handle the complaints from the patients. The workshop was only attended by nursing and administrative staff.
- Templates for No Show letters for patients and their referring doctors have been completed and approved. Waiting for these to be uploaded to scheduler to be able populated on a patient's appointment and sent to patients and referring practitioner.
- Patient and staff satisfaction surveys are now due to be resent.
- Nurse led outpatient clinics were planned to commence in September, however this has not happened due to the lack of available clinic rooms.
- It is planned for the 'A Joint Effort' Project team to be presented at the PFCC Services meeting on 28 November.

Other projects

- Whole of Health (WoH) Services Mapping for SLHD
 - The Clinical Redesign team has met with key service contacts to discuss the services and programs the District delivers which support access to care. In particular candidates were asked of any outreach, community services or hospital avoidance programs they were aware of for inclusion to the report.
 - Based on these face-to face meetings, the Clinical Redesign team has developed a report which provides a snapshot of the existing services. This will allow the WoH Steering Committee to sequence priorities for the next 12 months.
 - The mapping out of services will be used to prioritised and form the work plan of the WoH Steering Committee.
 - A workshop to discuss sequencing of priorities will occur in October 2019.

Accelerating Implementation Methodology (AIM):

- The next 2 day AIM training course is scheduled on 7-8 November 2019.

HealthPathways

Content development

- Commencing discussions for a Urology workgroup – unable to schedule this at the end of 2019, early 2020 date proposed with key specialists across the District.

Content in development:

- Neurology
- Neurosurgery
- Social determinate assessment and support resources
- International students
- Hand surgery assessment

Program updates

Three staff members of program successfully transitioned to SLHD employment at the end of September 2019. Conversations regarding the operational service agreement between the Central and Eastern Sydney PHN and SLHD continue.

Usage of HealthPathways

Provisional October 2019 (1st – 22nd) usage figures are favourable and demand for access is continuing, including increased engagement from various peak bodies and NGOs across the health sector. Academic detailing will soon recommence, with particular promotion in areas of reported low uptake – e.g. both the North-West and South-West sectors of the SLHD catchment.

	October 1 – 22 2019	September 2019	August 2019	October 2018
Users	813	938	1,105	1,055
Sessions of use	3,816	5,025	5,475	5,149
Unique Page Views	11,008	14,255	15,570	15,301
Total Page Views	13,788	17,761	19,213	19,860

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

GENERAL FUND (GF)

The 2019/20 Service Level Agreement between the Board and Ministry of Health has key financial performance targets for Expense and Revenue. The following analysis reflects the result for the period ended 30 September 2019 based on the District's budgeted NCoS.

For the month of September 2019, Sydney Local Health District (**SLHD**) General Fund (GF) Expenditure was \$1.282M (0.83%) unfavourable to budget. YTD September 2019 GF Expenditure was \$11.911M (2.54%) unfavourable to budget. YTD September 2019 Expenditure increased significantly (by \$38.230M or 8.65%) compared to YTD September 2018. The average monthly expense rate increased from \$145.289M from July 2018 to March 2019 to \$156.819M from April to June 2019 to an average of \$160.059M YTD September 2019. Continued increase in FTE numbers is contributing to these results.

GF Revenue was \$0.920M (0.61%) unfavourable to budget for the month and \$1.692M (0.36%) unfavourable to YTD September 2019 budget. For the period ended 30 September 2019, the District's GF NCoS was \$13.602M 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 2019/20 financial year despite the continued challenges that are facing the District. To achieve 2019/20 NCoS target the District has continued to maintain the good controls that it has in place and monitors performance on a daily basis despite the material increase in all activity challenging the LHD in the first three months of 2019/20 financial year.

The major variances for the month were:

Expenditure

- For the month of September 2019, GF Total Expenditure was \$1.282M (0.83%) unfavourable to budget, reflecting unfavourable results for Overtime (\$0.274M), Annual Leave Provision (\$0.435M), VMO Payments (\$0.232M), G&S Clinical Operating (\$4.121M) and RMR (\$0.415M) offset by favourable results for Salaries & Wages (\$2.365M), Other Employee (\$0.193M), Superannuation (\$0.192M), G&S Admin (\$0.203M) and G&S Support (\$0.199M).
- YTD September 2019 GF Total Expenditure was \$11.911M (2.54%) unfavourable to budget. This result reflects unfavourable results for Salaries & Wages (\$3.041M), Overtime (\$2.036M), Annual Leave Provision (\$1.515M), Superannuation (\$1.246M), VMO Payments (\$1.906M), G&S Drugs (\$3.086M), G&S Medical & Surgical Supplies (\$3.467M), G&S Prosthetics (\$2.117M) and RMR (\$1.124m) offset by favourable variances in Other Employee (\$0.594M), G&S Special Services (\$0.525M), G&S Admin (\$5.143M), G&S Support (\$0.142M) and Grants (\$0.179M).

Revenue

- GF Total Revenue was \$0.920M (0.61%) unfavourable to budget for the month of September 2019. The result for the month reflects unfavourable variances for Patient Fees (\$0.275M), Facility Fees (\$0.338M), Rent Income (\$0.194M) and Doubtful Debts (\$0.708M) offset by favourable variances in High Cost Drugs (\$0.486M).
- YTD September 2019 GF Total Revenue was \$1.692M (0.36%) unfavourable to budget. The unfavourable YTD result reflects mainly unfavourable variances in Patient Fees (\$1.327M), Grants & Contribution (\$0.490M), Rent Income (\$0.345M) and Doubtful Debts (\$1.362M) offset by favourable variances in User Charges (\$2.045M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$4.527M unfavourable to budget for the month of September 2019 and \$3.358M favourable to budget for YTD September 2019. This YTD result reflects an unfavourable budget variance for Expenditure (\$4.138M) offset by a favourable budget variance for Revenue (\$0.780M).

CONSOLIDATED RESULT

For the period ended 30 September 2019, the consolidated YTD NCoS result for the General Fund and SP&T was \$16.976M unfavourable to budget. The result comprises a favourable variance for Own Source Revenue (\$0.451M) offset by unfavourable variances for Expenditure (\$16.065M) and Doubtful Debts (\$1.362M).

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

For the period ended 30 September 2019, SLHD recorded a Total Net Result of -\$2.380M (Note that Total Revenue was higher than Total Expenditure for YTD September 2019) which was \$16.887M (88%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD September 2019 was \$12.573M unfavourable to budget, reflecting a favourable budget variance in Revenue (\$0.540M) offset by an unfavourable budget variance in Expenditure (\$13.114M).

For the month of September 2019, Total Direct Revenue was \$1.174M unfavourable to budget, comprising unfavourable variances for the General Fund (\$0.212M) and the SP&T Fund (\$0.962M).

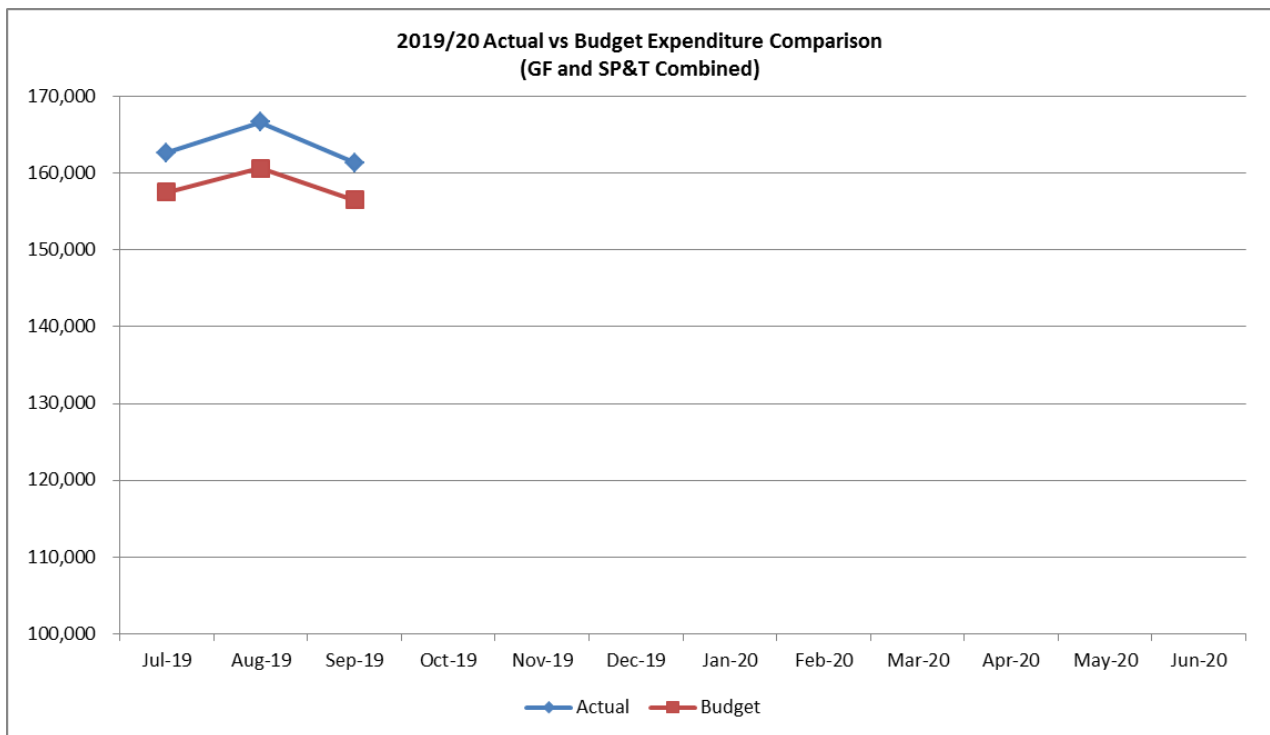
Board Report

YTD Total Direct Revenue was \$0.540M favourable to budget, comprising favourable variance for the SP&T Fund (\$0.870M) and unfavourable variance for the General Fund (\$0.329M). The YTD result for the GF reflects unfavourable variances in Patient Fees, Grant Income and Other Income offset by a favourable variance for User Charges.

Total Direct Expenditure was \$2.487M unfavourable to budget for the month of September 2019, comprising unfavourable results for the General Fund (\$1.960M) and the SP&T Fund (\$0.528M). YTD Total Direct Expenditure was \$13.114M unfavourable to budget, comprising \$11.832M unfavourable variance for the General Fund and a \$1.282M unfavourable variance for the SP&T Fund. The YTD result for the General Fund reflects unfavourable variances in Salaries & Wages (\$3.041M), Overtime (\$2.036M), On-costs (\$2.167M), VMOs (\$1.906M) and Direct Clinical Operating (\$8.146M) offset by favourable results for G&S Corporate & Operational Admin (\$5.143M) and Grants and Subsidies (\$0.179M).

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 30 September 2019.

The District achieved over 98% compliance for payment of small vendor creditors within 20 days for the month of September 2019 against the NSW Government 80% target.

The cash balance at 30 September 2019 for the SLHD Operating bank account was \$28.797M and the Operating Cash book balance was \$28.647M.

CAPITAL WORKS – SMRS PROJECTS

As at 30 September 2019, the District's Full Year Capital works budget relating to SMRS Projects is \$39.095M comprising \$15.090M of MoH funded and \$24.005M of locally funded projects. In September 2019, a locally funded project (EEGP – Design and Install solar PV system at Canterbury Hospital -\$1.001M) was approved by MoH.

Actual expenditure as at the end of September 2019 was \$2.825M which is \$0.931M over budget.

OTHER CAPITAL PROJECTS

As at the end of September 2019, the District has expended an amount of \$0.052M relating to Balmain Hospital Lift Controller Upgrade. The total expenditure of \$0.052M was sourced from the General Fund.

CAPITAL WORKS

RPA

Building 63 RPU

Hot cells tender is complete. Ongoing meeting with successful tenderer in relation to specific details of hot cells and delivery timeframes. Drawings and specifications for the clean room product review are being finalised and will go to tender in early October.

NICU Equipment Store

Framing, sheeting and flooring for the equipment store are all complete. The entry doors have been installed and the construction of the joinery is underway.

Concord

Building 34-JMO's Relocation

External paving, pergola painting and fencing are complete. The BBQ brickwork has been constructed and the BBQ has been installed.

Building 75 – Fussell House

Demolition works to ground floor are complete. Level 1 floor grinding and topping are complete and the installation of the communications room is nearing completion.

Oncology Modular Accommodation

Wall partitioning has commenced. Electrical and hydraulic rough-in is ongoing.

Building 3 - MADU relocation

Electrical and hydraulic rough in, floor sheeting and flooring are all complete. Joinery has been installed. The expected occupancy date is 14 October 2019.

Canterbury Hospital

Emergency Department Expansion

The Firewall stairwell block work is complete. Columns have been formed and poured. First floor formwork is 90% complete and post tensioning works have commenced.

Arthritis Clinic

Demolition is complete and framing and mechanical rough in has commenced. Electrical and Hydraulic rough in is nearing completion.

PLANNING

The RPA Clinical Services Plan has been received very positively and was approved by the Board in October, 2019. The RPA Clinical Services Plan will now be sent to the NSW Ministry of Health.

Camperdown-Ultimo Collaboration Alliance

The priorities for the Collaboration Area have been agreed by the Alliance, based on the plan for the Collaboration Area which has been developed by the Greater Sydney Commission.

A presentation on the Camperdown-Ultimo Collaboration Area was provided at the October Sydney Research meeting about strengthening the inclusion of the Medical Research Institutes and Sydney Research in the Collaboration Area.

A stakeholder communication session to update original discussion partners on progress by the Alliance, will be convened in early 2020.

Two studies have now been contracted for this area:

- The Alliance has co-sponsored a land use study which is being undertaken by SGS Economics to examine and report on the opportunities for industry engagement. They have met with a group of MRI reps to discuss land use in the corridor and particularly to discuss potential industry partnerships/companies that may wish to locate in the Camperdown area to further research and research translation.
- The Alliance has also collaboratively sponsored a transport study will be undertaken as part of the priority issues with a particular view to addressing mass transit on Parramatta Rd.

The Collaboration Area Alliance have prioritised three major projects:

Project 1: Integrated Transport Strategy, to deliver a safe and connected place through a Transport for NSW led “Movement and Place Strategy” and a set of “big ideas” to capitalise on the precincts location and role as an innovation precinct.

Project 2: Digital Connected Precinct, to deliver ultra-high-speed, network internet and Wi-Fi connectivity for the precinct.

Project 3: Industry Partners Strategy- “Sydney Research: (a catalyst for precinct based/ co-located research industry partnerships:

- Define the precinct as a special enterprise area to attract global investment and talent/to realise the innovation potential of the existing education, research, and health and cultural and community.
- Support and facilitate “Sydney Research” MRIs to grow the research-industry “ecosystem” through a strategy to attract industry partners to the precinct.
- Identify potential research and industry partnerships to target as part of a co-location strategy.
- Identify requirements and incentives to attract industry partners and global talent to locate in the precinct - Identify specific initiatives to support industry partnerships and attract global investment and talent to the precinct

Greater Sydney Commission – Council Local Strategic Planning Statements

The Greater Sydney Commission (GCS) is hosting sessions with relevant agencies for review of our local councils draft Local Strategic Planning Statements.

The SLHD Planning, Population Health and Public Health Units are attending these sessions.

This is an opportunity to support better integration between local and state government and to provide input to the health, wellbeing and liveability sections of the local councils forthcoming Local Community Service Plans. These plans include information related to the Camperdown-Ultimo Collaboration Area, our physical facilities, our plans for the future and healthy urban development.

Concord Clinical Services Plan (CSP) – Stage 2

The Planning Unit has recommenced Clinical Services Planning for Concord Hospitals Stage 2 redevelopment. They are reviewing and updating the projected clinical service activity using the new Ministry of Health forecasting tools (HealthApp). Updated activity and staffing data has been incorporated into departmental and service summaries for review and discussion as the initial stage of consultation.

Individual Department Consultations are complete and the planning unit are review and updated the future requirement for the stage 2 clinical services plan.

SYDNEY RESEARCH

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

Sydney Research continues to work with and support the TRGS winners from Rounds 1–4. Funding has been received for Round 4 winners. Both Dr McMullan and Dr Michelle Barakat-Johnson for the project ‘A novel implementation of best available evidence into practice for incontinence-associated dermatitis (IMBED)’, have commenced the processes of recruitment for their projects and established new project specific cost centres, and are working closely with Sydney Research and the OHMR with regards to changes to their approved application.

OHMR – Embedding Quality Research into Local Health Districts (EQRLHD)

A draft Embedding Quality Research—Clinical Trials Project Plan has been developed by working group members and will be presented to the Steering Committee for endorsement at their next meeting in November.

The EQRLHD Working Group assisted in communicating the free Good Clinical Practice (GCP) training organised by the *clinicaltrialsNSW* unit of OHMR at the 2019 ACTA conference. 60 research nurses and clinical trials coordinators from across NSW Health received the full and refresher training reaching capacity.

Patient Family Centred Care (PFCC) Research Working Group

Reviewers from the *Australian Health Review* have provided feedback on the Consumer and Community Engagement manuscript submitted last month for consideration. The authors have met to discuss the feedback received and will revise the manuscript as appropriate before re-submitting.

The PFCC Research Working Group have agreed to focus on the first of three pilot strategies developed to improve consumer involvement in research within and across the SLHD, a digital communications campaign titled ‘#Whywedoresearch’. A small sub-group of the working group met to develop an action plan for the strategy on 22 October and will continue to meet regularly to progress the initiative.

Sydney Health Partners (SHP)

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

- SLHD is the lead organisation for the implementation of the Sydney Health Partners Strategic Platform 2 “*Transforming how research improves patient outcomes to meet the needs of our community*”.

- The Chairs and members of Platforms 1, 2 and 5 working groups will attend a combined white boarding workshop on Monday 28 October to discuss the potential collaborative project around the cellulitis theme.
- Sydney Research were pleased to assist with the recent Governance Review of SHP undertaken by Prof Edward Byrne AC in early October. A report has been provided to the SHP Governing Council on the outcome of the review which is overall a positive reflection of the work being done within SHP.
- Sydney Research coordinated a meeting with SHP, the Office for Health and Medical Research and the Clinical Trials Centre, USyd to discuss progressing the 'Encouraging More Clinical Trials in Australia' project. SHP have been awarded \$477K to deliver project milestones. Discussions regarding operational management of this project are ongoing.
- Sydney Research continues to have representation on the SHP Website Working Group to determine the requirements for the new website, including refining the aim, objectives, content, resources, style and structure.
- Sydney Research continues to participate in a SHP Membership Committee to review the existing documentation concerning SHP membership, set criteria, responsibilities and obligations of members, and determine categories of membership.
- Sydney Research continues to work with SHP and SLHD Finance to capture the in-kind contributions of all SHP partners and establish governance and reporting mechanisms in line with this.

Biodesign

Participants of the Biodesign program have finalised their lead concepts and begun the prototyping process. The participants continue to meet weekly on Wednesday nights hosted by the SLHD, with presentations from relevant groups such as HealthShare NSW, IDE Group, Cicada Innovations, The University of Sydney, and Biodesign Stanford Alumni. A date for the final pitch night has been set for the 27th of November 2019. The Pitch night will be held at The Courtyard Café Bar and Restaurant, The University of Sydney from 4:30-7pm.

Precinct Planning

Work is continuing to progress for precinct planning, integrating concepts in line with the Royal Prince Alfred Hospital redevelopment. The group is working on a shared vision, revised strategic planning timeline and governance structure together with Health Infrastructure NSW and Capital Insight.

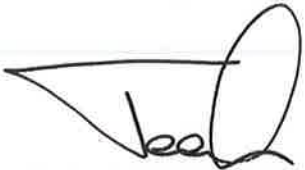
Sydney Research continue to have representation on the Camperdown Ultimo (CU) Alliance Meeting Group and support the land-use study across the Camperdown-Ultimo area. Debra Berkhout of the CU Alliance and Monica Barone, CEO, City of Sydney will present an update on the CU Alliance to Sydney Research Council Members on 29 October.

Ernst&Young have been jointly engaged by the SLHD, University of Sydney and Ministry of Health to assist in developing an options paper for a shared Biomedical Research facility, complimentary to the RPAH and Precinct planning underway.

Other Activities

- Highlights and upcoming activities of Sydney Research Council members have been documented for coverage by Sydney Research in 2019.
- Sydney Research has continued to participate in the Australian Health Research Alliance's National Committee for Clinical Research, as representatives of Sydney Health Partners and Sydney Local Health District. A full day workshop will be held on 12 December to progress the Acceleration Platform
- Sydney Research is collaborating with SLHD ICT, Apple, SAP, Bilue and The Avner Foundation to develop and trial a digital health companion app for Pancreatic Cancer patients and clinicians to manage care plans and track compliance.

- Sydney Research continues to support and explore:
 - The University of Sydney partnership opportunities for Project ECHO.
 - The establishment of the Pharmaceutical Manufacturing Lab to be located within the NSW State Biobank.
 - The work of the Collaborative Centre for Cardiometabolic Health in Psychosis (ccCHIP) in progressing the clinics and its expansion into other locations and avenues.
 - The NSW State Biobank by linking them with potential partners, clinicians and researchers.
 - The Concord Repatriation General Hospital's Near to Peer Mentoring Program.
 - The Tissue Analytics digital wound application project.
 - The economic impact of research across SLHD, together with health economists and the Research and Education Sub-Committee of the Board.
- Sydney Research attended a number of events representing Sydney Research and/or SLHD including:
 - ccCHIP Symposium held at the Medical Education Centre, Concord Hospital
 - ICT All Hands – Our Role in Patient and Family Centred Care
 - The 2019 NSW Health Awards
 - 'Unlocking Innovation': Sydney Health Partners' Symposium 2019
 - Centenary Foundation Dinner
- Planning has commenced for Innovation Week 2020. Sydney Research has scheduled meetings and made new contacts to progress plans for the series of research events.
- Regular Sydney Research eUpdates have been refreshed into a new format.
- Through the Sydney Research Council, fortnightly e-update, communications and social media, Sydney Research is promoting internal and partner educational and research activities to its audience of 670+ subscribers.
- @SydneyResearch currently has 842 followers on Twitter.



Dr Teresa Anderson AM
Chief Executive
Date: 18-12-19