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## Sydney Local Health District

### Meeting One Hundred (Part Two) of the Board

Date: Monday 22 June 2020  
Time: 9.00am  
Venue: Zoom Meeting  
Chair: The Hon. Ron Phillips AO, Chair

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#### 1. Present and apologies

The Hon. Ron Phillips AO, Chair  
Dr Thomas Karplus, Member  
Mr Richard Acheson, Member  
Mr David McLean, Member  
A/Professor Christine Giles, Member  
Ms Frances O'Brien, Member  
Ms Ronwyn North, Member  
Ms Kerry-Anne Hartman, Member  
Dr Mary Haines, Member  
Ms Susan Anderson, Member  
Dr Teresa Anderson, AM, Chief Executive

#### Apologies

Professor Paul Torzillo AM, Member  
Ms Victoria Weekes, Member

#### In attendance

Dr Tim Sinclair, Executive Director of Operations, SLHD (Departed 10.25am)  
Ms Nerida Bransby, Secretariat

#### 2. Welcome and introductions

The Chair welcomed members and guests to meeting one hundred, part two of the Sydney Local Health District (SLHD) Board via zoom.

#### 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.

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## 4. Confirmation of previous minutes

### 4.1 Minutes – 18 May 2020

The minutes of the Board Meeting held on Monday 18 May 2020 were moved and seconded as a true and accurate record of the meeting.

As the Chair was off-site for the meeting, the minutes will be forwarded via email to the Chair for signing.

### 4.2 CE Report – May 2020

The Chair declared that the CE Report for May 2020 was ready for publication.

## 5. Matters arising from the previous minutes

### 5.1 Action sheet

The Board received and discussed the action list including:

- The “lessons learnt” paper for Organ Donation will be provided to the Board at the September 2020 meeting. This agenda item can be removed from the action list.
- The representative from Health Infrastructure will be invited to the September 2020 meeting. This agenda item can be removed from the action list.
- The Board agreed that as the analysis regarding the Neonatal Birth Trauma quality and safety review is ongoing and is regularly being updated in the CE report, this agenda item can be removed from the action list.
- There are no concerns relating to the medical and dental retirements and resignations. The membership for the Medical and Dental Appointments Advisory Committee is being updated and will be provided to the Board. This agenda item can be removed from the action list.
- The Board Self-Assessment has been deferred to the July 2020 meeting.
- The Deep Dive into Financials occurred as part one of the Board meeting held on Monday 15 June 2020. This agenda item can be removed from the action list.

### 5.2 Medication Safety - Mental Health Services and Sydney Dental Hospital

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

## 6. Patient Story

The Board received, read and noted the de-identified email from a patient in quarantine thanking everyone involved in the process from Health.

# Minutes

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## 7. Standing Items

### 7.1 Acronyms List

The Board received and noted this list.

### 7.2 Financial Classification Codes

The Board received and noted this list.

### 7.3 Board Calendar 2020

The Board received and noted the Board Calendar for 2020.

## 8. Chairman's Report

Nil to report.

## 9. Chief Executive's report

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

- According to the Ministry of Health Framework, the District remains at Performance level zero, which is the highest level achievable.
- Despite the significant demands placed on staff due to the COVID-19 response, SLHD continues to maintain the quality and safety of our services.
- There were no RCAs for the month of March.
- For the YTD February 2020, there has been a slight decrease in the percentage of Mental Health Readmissions at 15.8%, when compared to 17.7% for the same period in the previous year. The relocation of the Drug Health beds from the PMBC has occurred. There is an increase in Ambulances presenting directly to the PMBC.
- Hospital Acquired Neonatal Birth Trauma has a rate of 86.4 per 10,000 episodes, which is above the target rate of 65.6 per 10,000 episodes. This process is on-going with a focus on first step: coding and documentation, second step: input from the Clinical Governance Unit and third step; deep dive by clinicians. Meetings occur weekly with the clinical stream clinicians.
- There were 9,807 attendances to the District's Emergency Departments in April 2020, which is a decrease from 14,687 when compared to the same month last year. The District is investigating the impacts of COVID-19 on ED presentations in partnership with the George Institute.
- There were 1,536 less elective surgeries performed in April 2020 when compared to the same period in the previous year, representing a decrease of 67.13%. The decrease is associated with the Government's requirement to cease all non-essential surgery, as part of the national response to COVID-19.
- The District met the targets for all Triage Categories 1, 2, 3, 4 and 5 for the month of April.
- There were 72 less emergency surgeries performed in the month of April 2020 when compared to the same month last year. This is due to less trauma, car accidents and sporting injuries.

- The District is conscious of the surgery waitlist growing.
- Ms Rachael Knoblanche has been appointed as the Director of Strategy and Initiatives. This first project will be on COVID-19 reforms including liaison with District Executive and Clinicians to gauge what we keep / remove and sustainability. A presentation will be provided to the Board in six months at the November 2020 meeting
- Use of HealthPathways activity has been high, feedback from GPs has been positive.
- The impact on NWAU will flow on for the next two months.
- For the month of April 2020, Sydney Local Health District (SLHD) General Fund (GF) Expenditure was \$0.051M unfavourable to budget. YTD April 2020 GF Expenditure was \$14.531M (0.94%) unfavourable to budget. YTD April 2020 Expenditure increased significantly (by \$97.655M or 6.67%) compared to YTD April 2019. The average monthly expense rate increased from \$145.289M from July 2018 to March 2019 to \$156.819M from April to June 2019 and has decreased to an average of \$156.253M YTD April 2020. Increase in FTE numbers and the impact of COVID-19 is contributing to these results.
- Special Purpose and Trusts Funds have been used to purchase equipment.
- The Planning Unit has been involved with Community Mental Health and Integrated Care in organising and providing a series of pop-up Community Wellbeing Clinics for populations with significant vulnerability; boarding house residents, people who are homeless, people living in social housing, people who speak limited English. There was lots of engagement and interaction from the Clinics and it will make it easier to move forward.
- Sydney Research is progressing well. The Board requested a deep dive into Research at the next Education and Research meeting to be held on 21 September 2020.

## COVID-19 Update

The Chief Executive provided a verbal update on COVID-19 including:

- Need to remain focused and vigilant
- Planning has commenced for the second wave of COVID-19
- Audits to be conducted at the screening stations to ensure anyone with symptoms must be sent to the screening clinic
- Screening and swabbing is ongoing
- All patients with underlying physical conditions will be monitored at the Police Hotels
- Two incidents that occurred involving external cleaner and an external Security Officer at the Hospital Hotel
- Increase surgery in Concord and Canterbury
- Use private facilities for surgery
- Free RPAH for use of patients from Police Accommodation
- Modelling impacts is difficult and can only plan for what we know now
- Timing to get back on track will be up to six months
- Monitor physical capacity
- Planning for the return of 35,000 students
- Access to PPE is controlled
- Encourage to use and access to masks for visitors
- Continue with the drive through testing, the call centres and the initiatives to maintain the wellbeing of the community.

- The number of COVID-19 positive patients in our District is encouraging
- The Board noted some concepts from COVID-19 will be incorporated into the redevelopment of the RPA Hospital.
- Dr Teresa Anderson and Ms Miranda Shaw participated and presented at two webinars including Menzies Institute, Evaluation RPA Virtual Seminar and the Grattan Institute, How our health system can be better after the pandemic. Feedback from these presentations was very positive. The Board congratulated Dr Anderson and Ms Shaw on the excellent presentations.

## 9.1 Finance and Performance Reports

### 9.1.1 SLHD Board reporting pack – April 2020

The Board received, read and noted the SLHD Board Reporting Pack for April 2020.

### 9.1.2 Selected Performance Indicators – April 2020.

The Board received, read and noted this report.

### 9.1.3 HealthPathways Dashboard Report

The Board received, read and noted this report.

### 9.1.3 MoH Board Report for the SLHD

The Board noted this report was not available.

## 9.2 Project updates

### 9.2.1 Lifehouse

The Board received, read and noted the report.

### 9.2.2 Macquarie International Private Hospital

The Board received, read and noted the 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 received, read and noted the report for the period January - March 2020. The Board discussed the various categories of complaints including those not coded. It was agreed to provide a deep dive into complaints management at a future Board meeting.

(ii) Disaster Management

The Board received this presentation at part one of the Board meeting held on 15 June 2020.

(iii) SLHD Risk Register

The Board received, read and noted this report.

9.5 Audit and Risk Committee Report – Period 16 March – 5 June 2020

The Board noted this report is due in July 2020.

9.6 Facility Reports – April 2020

(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.  
Dr Anderson advised the Board of the reason for the increase in the workers compensation premium for Mental Health.

(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.

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(ix) Royal Prince Alfred Hospital

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

(x) RPA Virtual Hospital

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

(xi) Tresillian

The Board received, read and noted the Tresillian report.

(xii) Lifehouse

The Board received, read and noted the Lifehouse report.

(xiii) Public Health Unit

The Board received, read and noted this report.

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

The Board received, read and noted this report.

(xv) Croydon / Marrickville / Redfern Community Health

The Board received, read and noted this report.

## 10. Matters for approval / resolution

10.1 Brief – Changes to the Lifehouse monthly Board Report.

The Board received this report via email. The Board noted and supported the contents of the brief.

## 11. Board Committee reports / minutes

11.1 Finance, Risk and Performance Management Committee

Minutes of the meeting held on 18 May 2020 were combined with the Board meeting.

11.2 Education and Research Committee

The Board noted the next meeting is to be held on 20 July 2020.

11.3 Communications Committee

The Board noted the meeting to be held on 2 June 2020 was cancelled.

11.4 Audit and Risk Committee

The Board noted the meeting was held on 18 June 2020.

## 11.5 Health Care – Clinical Council

The Board noted the minutes of the meeting held on 27 May 2020 were not available.

## 11.6 Health Care – Clinical Quality Council

The Board noted the minutes of the meeting held on 27 May 2020 were not available.

## 11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 7 August 2020.

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

The Board noted the meeting to be held on 3 June 2020 was cancelled.

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

The Board noted the meeting to be held on 26 May 2020 was cancelled.

## 11.10 Organ Donation for Transplant – Quarterly Report (April 2020 – June 2020)

The Board noted the next report is due in August for the period April 2020 – June 2020.

## 12. Other Committee reports / minutes

### 12.1 Sustainability Committee (bi-monthly)

The Board noted these meetings are temporarily suspended.

### 12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 8 April and 22 April 2020.

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

The Board noted the meeting to be held on 21 May 2020 was cancelled.

### 12.4 Surgical Demand Committee (bi-monthly)

The Board noted the meeting was held on 17 June 2020.

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

The Board received, read and noted the minutes of the meeting held on 20 May 2020.

### 12.6 NSW Health / SLHD Performance Review Meeting

The Board noted the meeting to be held on 2 June 2020 was cancelled.

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## 12.7 Organ Donation for Transplantation

The Board noted the meeting to be held on 28 April 2020 was cancelled.

## 12.8 Major Procurement, Assets and Imaging Steering Committee

The Board noted the meeting held on 12 May 2020 was cancelled.

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

The Board noted the meeting to be held on 16 June 2020 was cancelled.

## 12.10 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 20 May 2020.

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

The Board noted the meeting to be held on 4 June 2020 was cancelled.

## 12.12 Minutes of the District Security Co-ordination Committee

The Board received, read and noted the minutes of the meeting held on 13 May 2020.

## 13. Matters for noting

Nil to report

## 14. Other Business

The Chief Executive provided a verbal report including:

- Dr Cullen and team expressed their thanks for the kind comments and support of the Board and the opportunity to do the presentation at the meeting on 15 June 2020.
- Board Members to be invited to listen in via zoom to the regular SLHD COVID-19 Steering Committee. Zoom details to be provided.
- Updated the Board on the SLHD staff involved in the Ruby Princess Inquiry.

## 15. Next Meeting

The next meeting is to be held on Monday 20 July 2020 at 9.00am.

The meeting closed at 11.00am.

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Chair

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Date

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Chair

21 July 2020  
Date

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**Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board  
June 2020**

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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**

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

There were no RCAs for the month of March.

Mental Health Readmissions within 28 days have decreased for the month of February to 14.8%, from a January result of 16.3%. YTD February 2020, there has been a slight decrease in the percentage of Mental Health Readmissions at 15.8%, when compared to 17.7% for the same period in the previous year. The District continues to focus on strategies to improve mental health performance.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation at 4.8% for the month of March and 5.3% YTD March 2020, which is below the State rate of 5.8% for the month and 6.1% YTD March 2020. Unplanned Emergency Representations (same ED within 48 hours) were 5.0% for the month of April and 4.3% YTD April 2020, which is below the State rate of 4.8% YTD April 2020.

The District remains below the benchmark (2.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI) with a result of 0.9 per 10,000 bed days for the month of March 2020. There was no Central Line Associated Bloodstream (CLAB) infection during March 2020. Ongoing education and training in infection control strategies and CLAB awareness discussions at ICU morbidity and mortality meetings continue.

The District is performing at or better than the target for 10 of the 14 reported Hospital Acquired Complications (HACs) for the 12 month period March 19 - February 2020. The remaining 4 HACs are performing within the acceptable tolerance range. Hospital Acquired Renal Failure has a rate of 2.9 per 10,000 episodes, which is slightly above the target of 2.7. 3<sup>rd</sup> and 4<sup>th</sup> degree perineal tear has a rate of 411.7 per 10,000 episodes, which is above the target rate of 382.9 per 10,000 episodes. Hospital Acquired Neonatal Birth Trauma has a rate of 86.4 per 10,000 episodes, which is above the target rate of 65.6 per 10,000 episodes. Hospital Acquired Medication Complications has a rate of 35.5 per 10,000 episodes, which is slightly above the target rate of 31.3 per 10,000 episodes. Work is continuing to address these four HACs.

To ensure all HACs are appropriately reviewed and identify any areas of clinical concern or training need; the SLHD Performance Unit emails the SLHD Coding and Clinical Governance Units at the end of each month to flag any HACs that are performing above the target threshold, to trigger a coding review. To facilitate this process, a HAC coding audit app has been developed. Following coding review, the SLHD Performance Unit reruns the data and then emails the Clinical Governance and Coding Units to flag any HACs that remain above the target threshold, which then triggers a clinical investigation by the Clinical Governance Unit.

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

## Workforce

The District continues to focus on strategies to ensure our workforce has the appropriate skill mix and levels to meet demand. Premium staff usage has decreased for Medical and Nursing for April 2020 when compared to the same period last year by -0.16 and -3.60 respectively. Premium staff usage has increased for Allied Health for April 2020 compared to the same period last year by 0.05.

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 a decrease of 29.9% in the number of separations (10,020) for the month of April 2020 when compared to April last year. This is consistent with the decrease in elective surgery and reduced inpatient activity associated with COVID-19. YTD separations have decreased slightly across the District by 4.0% in comparison to last year. In April 2020, the District's occupancy rate decreased by 12.96%, to 74.52% when compared to the 87.48% in April 2019. Again this was a deliberate strategy to prepare for COVID-19 by reducing elective surgery.

There were 9,807 attendances to the District's Emergency Departments in April 2020, which is a decrease from 14,687 when compared to the same month last year. The District is investigating the impacts of COVID-19 on ED presentations in partnership with the George Institute.

YTD April Emergency Department attendances have increased 3.67% in comparison to the same period last year. YTD April case weighted attendances have increased by 1.39%, when compared to the previous year.

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

The District continues to work on ETP performance. There was a 10.5% increase in ETP in the month of April 2020, to 80.5%, when compared to the same month in the previous year. YTD there has been a 1.2% increase in ETP to 70.45% when compared to the same period in the previous year. Despite the significant activity, 5,259 additional patients have been admitted, referred or discharged within 4 hours of presentation YTD April, when compared to the same period in the previous year.

## Transfer of Care

The District is performing above the transfer of care (TOC) target (90%) for April 2020, with 96.81% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. Given the significant increase in demand associate with managing COVID-19 activity, it is very positive that the District is maintaining its performance on this indicator.

## ED Triage

The District met target for all Triage Categories 1, 2, 3, 4 and 5 for the month of April.

## Elective Surgery

There were 1,536 less elective surgeries performed in April 2020 when compared to the same period in the previous year, representing a decrease of 67.13%. The decrease is associated with the Government's requirement to cease all non-essential surgery, as part of the national response to COVID-19. YTD April the number of elective surgeries performed has decreased by 979 (-4.26%) when compared to the same period last year. The District continues to plan for the recommencement of elective surgery, with operating theatres gradual re-opening with the aim of reaching 75% capacity by end June.

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. YTD April there has been a 11.51% decrease in surgical patients not ready for care, when compared to the same period last year.

## Emergency Surgery

There were 72 less emergency surgeries performed in the month of April 2020 when compared to the same month last year, representing a -6.75% decrease. YTD April emergency surgery has increased by 784 cases (7.04%) 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 2.4% decrease in the number of Hospital in the Home overnight separations in April in comparison to the same month last year.

## NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

### NWAU Activity against Target

Despite the impact of COVID-19, the District continues to perform well in relation to the NWAU activity against target, with a -3.53% variance to target YTD April, excluding Dental. The cessation of non-essential surgery and subsequent reduction in inpatient activity will impact on the District's NWAU generation over the coming months.

Stream	Target	Actual	Variation	Variation %
Acute*	137,518	129,676	- 7,842	-5.70%
ED	19,827	19,702	- 125	-0.63%
NAP	39,810	39,434	- 376	-0.94%
SNAP**	10,321	9,929	- 392	-3.80%
MH Admit	14,525	15,516	992	6.83%
MH NAP***	8,040	7,660	- 380	-4.73%
Total	230,041	221,918	-8,123	-3.53%
Dental DWAU	50,270	52,781	2,511	5.00%
Dental NWAU#	6,312	6,627	315	5.00%
Total (NWAU)	236,353	228,545	-7,808	-3.30%

\* 14 uncoded episodes

\*\* 51 ungrouped episodes

\*\*\*\*YTD March

# NWAU=589/4691\*DWAU

## Clinical Costing

The District along with Western Sydney Local Health District continue to progress through the detailed cost analysis of COVID-19 and all associated encounters, particularly inpatient encounters, to assist in determining the veracity of the National Partnership Agreement payment rates. The Ministry is assisting both Districts through this process with the first COVID costing submission due by end May.

## **Non Admitted (NAP)**

In response to the COVID-19 pandemic, the District increased the number of services provided via telehealth/telemedicine to keep our patients out of our hospitals and safely isolated in their homes. As of YTD April the number of non-admitted occasions of service provided via telephone and videoconferencing has increased by 17% and 611% respectively. Face to face occasions have decreased by 4% during the same period.

## **REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE**

### **Private Health Insurance Usage**

For the month of April 2020, 16.44% (1,701 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was a decrease of 801 (32.01%) patients who elected to use their private insurance compared to the same period last year and a decrease of 360 (17.47%) in total separations from previous month. Again this was associated with the Government's requirement to cease all non-essential surgery, as part of the national response to COVID-19.

For the month ended April 2020 conversions for facilities as compared to the same period last year were:

- RPAH – a decrease of 391 (30.88%) private patients.
- Concord – a decrease of 288 (27.66%) private patients.
- Canterbury Hospital – a decrease of 107 (49.46%) private patients.
- IRO – a decrease of 11 (100%) private patient.
- Balmain Hospital – a decrease of 4 (36.36%) private patients.

### **Single Room Usage**

For the month of April 2020, 9.70% of patients were flagged as infectious across the District.

For the month, 15% of all available single rooms were occupied by private patients and 41% of all private patients were accommodated in single rooms.

### **SLHD Strategic Revenue Network**

Key notes:

- SLHD Strategic Revenue Committee resumed in May 2020.
  - The importance of capturing costs relating to COVID-19 was discussed.
  - Budget process was outlined
  - Updating Roadmaps was discussed.
- Clinician Billing Portal (CBP) has been put on hold due to recent competing priorities. There are 68 registered users and total \$195K has been raised through the portal to date.

## **REDESIGN AND SERVICE IMPROVEMENT**

### **Innovations**

- The District Performance Unit and Strategic Relations and Communications are currently planning for the first virtual Pitch event which will be held early in the new financial year.
- The theme for the Pitch is 'What's next for healthcare following our response to COVID-19?'
  - What does 'business as usual' look like after COVID-19?
  - What ideas have worked for you and your colleagues during this time?
  - How should COVID-19 reshape the future of healthcare?
- There will be up to 8 Pitches at the event, with a total of \$100K in funding available.

## Other Projects

- Hand Clinic
  - The Redesign Team was consulted by the Director, Allied Health to assist with conducting some diagnostics work within Hand Clinic at RPAH.
  - A process map and stakeholder map has been developed from feedback given at the session conducted on the 12 February. This is in the process of being validated.
  - Data is also being collected by the Allied Health Performance & Data Analyst for analysis.
- RPAH Transfer of Care Project
  - Diagnostics – STARS extracted for discharge times and day of week by clinical stream and speciality units, length of stay data complete for RPA & IRO
  - Diagnostics - interviews have been conducted
  - Reinforcing Sponsors have been identified

## Accelerating Implementation Methodology (AIM):

- The next AIM course is scheduled for the 10 and 11 September 2020.

## HealthPathways

### Content development

No Workgroups held in April as the team continues to focus on development and maintenance of COVID-19 content and supporting the SLHD Pandemic Action Plan through deployment to PHU and CGU helplines.

### COVID content

COVID-19 content continues to be updated and developed in-line with latest Health advice and testing and treatment options. Current COVID-19 content includes:

- COVID-19 Practice Management
- COVID-19 Requests
- COVID-19 Information
- COVID-19 Impact on Local Services
- COVID-19 Recent Changes
- COVID-19 Telehealth
- COVID-19 Initial Assessment and Management
- COVID-19 Ongoing Assessment and Management

Currently we are developing specific content for GP support with RACF COVID patients.

### Content in Development

May will see the publication of pathways and referral information for Neurology, Neurosurgery and Urology. Initial workgroup planning has commenced with the Heads of Department at Concord and RPAH for ENT and Ophthalmology services.

### Usage of HealthPathways

Usage fell in April compared to March and the peak of COVID-19 activity and uncertainty in General Practice. Usage figures do remain high compared to twelve months earlier and COVID-19 content accounted for 17.18% of content viewed in April and 10.91% for May 1-17.

	May 1-17, 2020	April 2020	March 2020	April 2019
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# Board Report

Users	856	1,235	1,879	961
Sessions of use	4,176	6,942	8,428	4,801
Unique Page Views	11,469	18,187	21,998	14,237
Total Page Views	14,527	23,003	27,476	17,628

## **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 April 2020 based on the District's budgeted NCoS.

For the month of April 2020, Sydney Local Health District (SLHD) General Fund (GF) Expenditure was \$0.051M unfavourable to budget. YTD April 2020 GF Expenditure was \$14.531M (0.94%) unfavourable to budget. YTD April 2020 Expenditure increased significantly (by \$97.655M or 6.67%) compared to YTD April 2019. The average monthly expense rate increased from \$145.289M from July 2018 to March 2019 to \$156.819M from April to June 2019 and has decreased to an average of \$156.253M YTD April 2020. Increase in FTE numbers and the impact of COVID-19 is contributing to these results.

GF Revenue was \$7.014M (4.22%) unfavourable to budget for the month and \$11.804M (0.74%) unfavourable to YTD April 2020 budget. For the period ended 30 April 2020, the District's GF NCoS was \$26.335M unfavourable to budget.

The District has assessed the YTD April 2020 costs of providing services for the following unforeseen events: COVID-19 \$37.85M (\$29.11M Incremental and \$8.73M Base), Bushfire support (including Mental Health) \$1.1M and the NZ Volcano \$1M.

The Chief Executive and the Executive Director of Finance have identified a \$69.14M unfavourability to NCoS Budget (excluding the impact of Doubtful Debts) for 2019/20. This position has improved since last month due to the readjustment associated with not requiring as many ICU beds for COVID-19 as predicted last month.

The unfavourability comprises: the management of the COVID-19 process (\$50.14M Expense), Own Source Revenue reductions (\$15.6M) related to COVID-19 (due to decrease in elective surgery activity, clinic workload and overseas patients) and the reduction in actual single room bed day rates paid by health funds and the continued reduction in the number of private patients entering our Facilities and unfavourability in Intra Health Hosted revenue (\$3.4M) as a result of ICT transition of the eMR team to SWSLHD.

The Full Year Projection includes costs associated with full occupancy in June of the additional ICU beds capacity created in the District and additional Elective Surgery expenses that may be paid to Private Healthcare providers. The projection also includes other additional expenses related to COVID-19 such as Fever Clinics, Flying Squads (for Drive-Thru Staff Screening, Airports and Cruise Ships), Special Health Accommodation, Call Centres, ICT, RPA Virtual, Goods & Services (including PPEs), RMR (including refurbishments) and Communication.

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 nine months of the 2019/20 financial year.

The major variances for the month were:

## Expenditure

- For the month of April 2020, GF Total Expenditure was \$0.051M unfavourable to budget, reflecting unfavourable results for Annual Leave Provision (\$3.320M), G&S Admin (\$1.305M), G&S Support (\$0.144), RMR (\$1.398M), VMO Payments (\$0.472M) and Grants (\$0.624M) offset by favourable results for Salary & Wages (\$4.259M), G&S Clinical (\$3.178M) and Other Employee (\$0.202M). SLHD has received \$12.121M of COVID-19 budget supplementations in April 2020 for the following incremental costs: ICU, Fever Clinics and Screening, Special Health Accommodation
- YTD April 2020, GF Total Expenditure was \$14.531M (0.94%) unfavourable to budget. This result reflects unfavourable results for Overtime (\$2.718M), Annual Leave Provision (\$13.416M), Superannuation (\$1.329M), G&S Drugs (\$10.693M), G&S Medical & Surgical Supplies (\$3.273M), G&S Prosthetics (\$4.800M), RMR (\$3.808M) and Grants (\$0.552M) offset by favourable variances in Salaries & Wages (\$0.817M), Other Employee (\$1.939M), VMO Payments (\$0.226M), G&S Admin (\$13.928M) and G&S Support (\$0.833M). SLHD has received \$16.888M of COVID-19 budget supplementations in March and April 2020 for the following incremental costs: ICU, Fever Clinics and Screening, Special Health Accommodation and Pathology. A further \$2.737M of received COVID-19 budget supplementations (including ICU Physiotherapy, ED Concierge, Enhanced Security, Clinical Support Positions and Maintenance Assistance Program) have not been recognised YTD April 2020 as they are yet to be expended.

## Revenue

- GF Total Revenue was \$7.014M (4.22%) unfavourable to budget for the month of April 2020. The result for the month reflects unfavourable variances for Patient Fees (\$3.567M), Facility Fees (\$1.384M), Prosthesis Income (\$0.753M), Car Park Fees (\$0.306M), Intra Health Hosted Revenue (\$0.322M) and Doubtful Debts (\$0.357M) offset by favourable variances in High Cost Drugs (\$0.701M). The increased unfavourabilities in Patient Fees, Facility Fees, Prosthesis income and Car Park Fees are a result of the impact of COVID-19.
- YTD April 2020, GF Total Revenue was \$11.804M (0.74%) unfavourable to budget. The unfavourable YTD result reflects unfavourable variances in Patient Fees (\$6.779M), Facility Fees (\$4.152M), Prosthesis Income (\$3.811M), Rent Income (\$0.969M) and Doubtful Debts (\$4.018M) offset by favourable variance in High Cost Drugs (\$10.740M) and Grants and Contributions (\$2.055M).

## SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$0.835M unfavourable to budget for the month of April 2020 and \$10.612M unfavourable to budget for YTD April 2020. This YTD result reflects unfavourable budget variances for Expenditure (\$7.678M) and Revenue (\$2.934M).

## CONSOLIDATED RESULT

For the period ended 30 April 2020, the consolidated YTD NCoS result for the General Fund and SP&T was \$36.949M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$22.210M), Own Source Revenue (\$10.542M) and Doubtful Debts (\$4.018M).

# Board Report

## FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

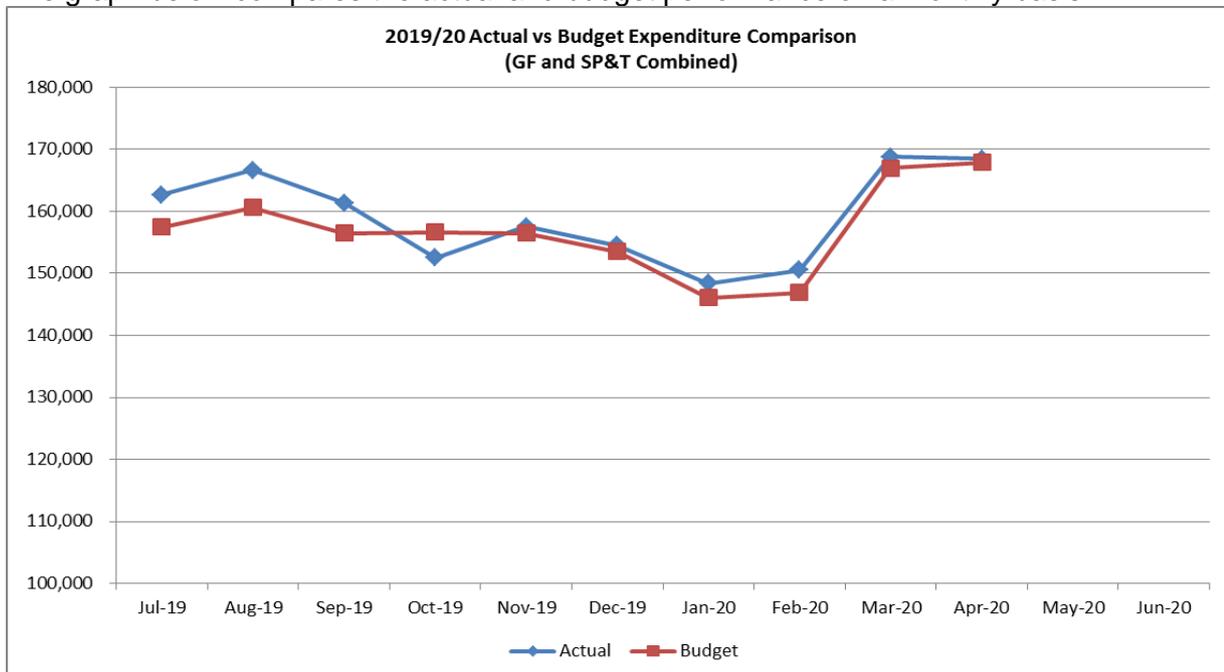
For the period ended 30 April 2020, SLHD recorded a Total Net Result of -\$53.673M (Note that Total Revenue was higher than Total Expenditure for YTD April 2020) which was \$36.888M (41%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD April 2020 was \$27.813M unfavourable to budget, reflecting unfavourable budget variances for Expenditure (\$17.597M) and Revenue (\$10.216M).

For the month of April 2020, Total Direct Revenue was \$7.066M unfavourable to budget, comprising unfavourable variances for the SP&T Fund (\$0.375M) and the General Fund (\$6.691M). YTD Total Direct Revenue was \$10.216M unfavourable to budget, comprising unfavourable variances for the General Fund (\$7.318M) and the SP&T Fund (\$2.898M). The YTD result for the GF reflects unfavourable variances in Patient Fees, User Charges, Grant Income and Other Income.

Total Direct Expenditure was \$0.977M favourable to budget for the month of April 2020, comprising a favourable result for the General Fund (\$1.390M) offset by an unfavourable result for the SP&T Fund (\$0.412M). YTD Total Direct Expenditure was \$17.597M unfavourable to budget, comprising \$11.513M unfavourable variance for the General Fund and a \$6.084M unfavourable variance for the SP&T Fund. The YTD result for the General Fund reflects unfavourable variances in Overtime (\$2.718M), On-costs (\$12.806M) and Direct Clinical Operating (\$11.239M) offset by favourable results for Salaries & Wages (\$0.817M), G&S Corporate (\$13.928M), G&S Supporting Services & Utilities (\$0.833M) and VMOs (\$0.226M).

## MONTHLY BUDGET PERFORMANCE

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



## LIQUIDITY

The Ministry of Health Finance Branch has advised that due to the change of payment terms from 20 calendar days to 5 business days for Small Vendors there is no data or % available for now. This will be available in May 2020.

The cash balance at 30 April 2020 for the SLHD Operating bank account was \$15.713M and the Operating Cash book balance was \$15.368M.

## **CAPITAL WORKS – SMRS PROJECTS**

As at 30 April 2020, the District's Full Year Capital Works budget relating to SMRS Projects is \$34.887M comprising \$15.953M of MoH funded and \$18.934M of locally funded projects. In April 2020, a MoH funded project amounting to \$130K relating to COVID-19 Clinics Security Enhancement was approved by MoH.

Additionally, the actual and committed expenditure for MoH funded Minor works & Equipment for COVID-19 was \$16.016M at the end of April 2020.

## **OTHER CAPITAL PROJECTS**

As at the end of April 2020, the District has expended an amount of \$2.937M relating mainly to PowerChart Maternity, Balmain Hospital Lift Controller Upgrade, Energy Efficiency Upgrade for Croydon and Redfern Community Health Centres and RPAH Virtual Hospital. The total expenditure of \$2.937M was sourced from the General Fund.

## **CAPITAL WORKS**

The District's Capital works and Engineering staff have done an exceptional job working with our clinicians to prepare and respond to COVID-19. This includes enabling the District to more than triple its ICU capacity if required, and facilitating the development of appropriate donning and doffing stations in the ICUs and in the COVI-19 wards.

### **RPA**

#### **Building 63 RPU**

Mechanical services and medical gases installation have commenced. Rough in for the electrical services is underway and the clean room materials have been procured.

#### **Paediatrics**

Demolition has commenced to the Paediatrics ward in Building 63. Service and material procurement is underway.

### **Concord**

#### **Building 75/76 – Fussell House**

Painting, electrical and hydraulic fit off for Level 1 Building 75 were all completed in April. Joinery installation for the bedrooms on the Ground Floor commenced. Drainage services and steel work for the outdoor terrace were all completed.

#### **Building 31 – Midwifery Group Practice**

Floor replacement and external framing as well as installation of the internal wall partitions were all completed in April. Structural beams were also installed and the electrical rough in commenced.

### **Canterbury Hospital**

#### **ED Expansion**

Works undertaken within the Paediatric area in April included sheeting, installation of external windows and service rough ins. The installation of the roof for the Medical Records Department was completed as well as framing, sheeting and setting and service rough ins. The construction of the link bridge is nearing completion. It is anticipated that Medical Records will be relocated in mid-June.

## **PLANNING**

### **Community Wellbeing Clinics**

The Planning Unit has been involved with Community Mental Health and Integrated Care in organising and providing a series of pop-up Community Wellbeing Clinics for populations with significant vulnerability; boarding house residents, people who are homeless, people living in social housing, people who speak limited English.

Clinics include COVID-19 screening and testing, vaccination against influenza, provision of a meal and the provision of health and hygiene packs.

To date almost 950 people have attended clinics. Additional clinics are planned for Redfern social housing estate and boarding houses in Summer Hill and Dulwich Hill.

Presentations have been made to the COVID-19 Steering Committee and the SLHD Board.

### **Camperdown-Ultimo Collaboration Area Alliance (C-U Alliance)**

ARUP Consultants has been appointed to lead this major transport study funded by Transport for NSW across the Camperdown-Ultimo Collaboration Area. Health Infrastructure (HI) and SLHD are working together on this to contribute to discussions on movement and place issues including traffic, public transport, pedestrian and cycling access and amenity. The Planning Unit and HI attended the initial workshop for this strategy which introduced the concepts associated with the study. The draft RPA Transport Study, developed as part of the Camperdown Health and Education Research Precinct (CHERP) study, will be considered at future meetings.

A further study of the C-U Alliance, the Camperdown Land Use Study, is nearing completion, with land use and strategic employment studies having been drafted for the consideration of the partners. Integral to this piece of work is the long term vision of siting of a Metro station and mass transit at RPA/Camperdown and the proposed establishment of biotechnology hub in Camperdown. The Strategy also recognises the critical importance of connectivity, affordable housing and place making. Priority strategic actions include developing a Master Plan (land use) for the Camperdown area, resolving a governance structure that integrates with the Alliance and undertaking work to identify priority anchor tenants to support the development of research and translation as part of the proposed Biotechnology hub. It has been proposed that the Biotechnology hub be situated on Parramatta Road on the Westconnex Dive Site.

Sydney Innovation Technology hub at Central Station is being strategically planned with connectivity to the hospital and universities in mind. The strategy is being developed by Deloitte and “shovel-ready” projects are currently under consideration.

### **Canterbury-Bankstown Integration**

The Clinical Services Plan for Canterbury Hospital was submitted three years ago. The Ministry of Health ensure that there is no duplication in services and to ensure that there is some level of planning integration between Bankstown and Canterbury Hospitals. The Planning Unit is undertaking work on the current flow patterns, inpatient and non-inpatient activity and forecasts to inform this planning study. The data clearly indicates that there are few flows from Canterbury into Bankstown Hospital. The District does not consider that the new Bankstown Hospital will address the needs of Canterbury Hospital. The District will continue to work with the Ministry to support the planning for the redevelopment of Canterbury Hospital which is one of the fastest growing communities in the State. In the meantime, the District is investigating opportunities to expand outpatients in the local area.

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

The Planning Unit has drafted feasibility studies of establishing maternity and paediatric units at the Concord Hospital in Stage 2. The assumptions behind these studies will be tested with the relevant Clinical Directors and the Executive Steering Committee.

Stage 2 will be concerned with the development of much needed infrastructure such as theatres, ICU, Emergency Department and diagnostic services.

## **SLHD Surgical Services Plan**

Consultations have been held with Canterbury Hospital surgery services as part of the District Surgical Services plan. This plan was put on hold with the onset of COVID-19.

To complete the engagement program, Balmain, Community Health and rpvirtual will be involved in consultations.

## **Clinical Stream Position Papers and final Strategic Plans**

The following Position Papers and Strategic Plans have now been completed and will be presented to the Board for consideration:

- Aged Care, Rehabilitation and Chronic Care Position Paper
- Allied Health Strategic Plan
- Cardiovascular Services Position Paper
- Cancer Services Position Paper
- Gastroenterology and Liver Position Paper
- Neurosciences Position Paper
- Pharmacy Strategic Plan
- Respiratory and Critical Care Position Paper
- Women's Health, Neonatology, Paediatrics Position Paper.

## **SYDNEY RESEARCH**

### **COVID-19 Operational Support**

Sydney Research continues to support Sydney Local Health District (SLHD) in its response to COVID-19. The team has taken part in regular virtual committee meetings, reviewing COVID-19 related correspondence, keeping partners of SLHD and Sydney Research informed with latest information on COVID-19 and managing meeting attendance records for the District. Ms Imogen Baker, Deputy Director, Sydney Research, has also been seconded to the COVID-19 Operations and SLHD Special Health Accommodation Centre as of 9 March 2020 and until further notice.

Sydney Research have also been working directly with the SLHD Research team on determining appropriate research practices and operation of clinical trials during the COVID-19 period as well as assisting with the submission of grants on COVID-related research.

### **Sydney Research: Return to BAU**

The Sydney Research team have prepared a detailed plan should the proposed easing of restrictions progress successfully and return to business as usual is feasible. This plan outlines the projects, programs and meetings that have been delayed or postponed due to COVID-19 and the actions required to get them back on-track.

## **OHMR – Embedding Quality Research**

The Embedding Quality Research (EQR) Steering Committee will meet on 22 May 2020. This meeting will be the first opportunity for representatives of the participating Local Health Networks, Specialty Health Networks, Advanced Health Research Translation Centres and the Centre for Innovation in Regional Health to discuss their research response and learnings from the COVID-19 pandemic.

## **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.

Progress reports from Round 4 winner's Dr Michelle Barakat-Johnson and Dr Adrienne Gordon were approved by the SLHD TRGS Coordinator, Ms Imogen Baker, and submitted to OHMR on 28 April 2020. Both reports identified significant delays as a result of COVID-19. Sydney Research has raised these issues with OHMR, who are now currently assessing options to support all Round 4 projects impacted by COVID-19.

The deadline for Round 5 Expression of Interests (EOI) is approaching soon. All SLHD EOIs must be submitted by Tuesday 9 June to, Ms Imogen Baker. All EOIs forwarded to Ms Baker will be reviewed and five projects will be put forward for consideration by the Chief Executive.

## **Patient Family Centred Care (PFCC) Research Working Group**

The date of publication for the Consumer and Community Engagement manuscript within the *Australian Health Review* has been delayed due to COVID-19 with date still to be determined.

The PFCC Research Working Group continues to work on the focus strategy to improve and engage consumers in research across the SLHD. A project proposal has been developed by the members of the Working Group that will be presented at the PFCC Steering Committee meeting on Wednesday 20 May 2020 for their endorsement.

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

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

- SHP Implementation Strategy
  - 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”*.
  - Platform 2 has identified another project examining the effects of mental health on the average length of stay post-surgery, which it will pursue concurrently with the multi-platform cellulitis project. Both projects will be piloted in SLHD later this year.
  - Platform 2 are also considering developing a consumer piece based on the multi-platform cellulitis project and the findings from the data working group. The SLHD leads nominated for this piece are Dr Karena Conroy and Adj Assoc Prof Greg Fairbrother. Karena and Greg have been meeting with SHP and members of Platform 1 to determine what this piece of work might entail.
- The Byrne report of the Governance Review of SHP has been released and circulated to Sydney Research partners. An action plan is being finalised for SHP to implement.
- Sydney Research are progressing the 'Encouraging More Clinical Trials in Australia' project by co-ordinating the recruitment of an externally funded Project Manager. The position had been previously advertised in April 2020 but the preferred candidate had withdrawn their application. The position is currently being readvertised with a closing date of 22 May 2020.

- Sydney Research continues to assist with the recruitment for the SHP Executive Director position. A position description has been developed and finalised with the next round of recruitment commencing soon.

## **Biodesign**

Sydney Research continues to support the coordinators in the planning of the Biodesign 2.0 and its potential expansion across NSW. The program was initially planned to start in June 2020 but has since been postponed due to COVID-19 constraints. The Sydney Research team will meet with the coordinators on Wednesday 27 May 2020 to further discuss plans and potential dates for the Biodesign 2.0 program

## **Franklin Women**

SLHD is pleased to continue to participate in the Franklin Women Mentoring Program for 2020. The Mentoring Program aims to support the career development of women over a 5-month program. The 2020 Mentoring program will kick-off on 9 June 2020 and workshop sessions will be delivered virtually in line with COVID-19 guidelines.

SLHD have nominated Professor Joy Ho, Acting Director of Haematology and Director of Research, Institute of Haematology, RPAH as mentor and Dr Amali Mallawaarachchi, Clinical Geneticist, RPAH as mentee for the 2020 program.

## **Precinct Planning**

Sydney Research continues to participate in the Camperdown Ultimo Alliance Meeting Group and to participate in and support the land-use study across the Camperdown-Ultimo area. The meeting scheduled for 20 May 2020 has been postponed to 24 June 2020 due to COVID-19.

## **Sydney Biomedical Accelerator**

Sydney Research continues to assist and support the planning for the Sydney Biomedical Accelerator (SBA), a new state-of-the-art research facility to be co-located on the RPAH campus.

Adj Assoc Prof Vicki Taylor, Executive Director Sydney Research, has been participating in the Project Management meetings, Executive Sponsors and Executive Oversight Committees. The three MRI partners and their Boards have been notified that Adj Assoc Prof Taylor is their designated contact point and have nominated Mr William Groombridge and Mr Tony Pollitt to represent them on the SBA Project Management team.

An internal deadline of October 2020 has been set for the SBA detailed Business Case, which was requested by the NSW Minister for Health and Medical Research. To assist in achieving that deadline, the SBA project leads have established four streams of work – Research Vision & Functional Requirements, SBA Operating Model & Governance, Infrastructure, and Detailed Business Case. Each work stream will involve representatives from SLHD, the University of Sydney and the three Medical Research Institutes. The first two workstreams (Research Vision and Operating Model) are expected to meet virtually in late May 2020.

## **Australian Clinical Trials Alliance**

The Australian Clinical Trials Alliance (ACTA) have been providing regular summaries keeping its members informed of the up-to-date guidance relating to COVID-19 and the conduct of clinical trials. Sydney Research has been ensuring that this information is circulated to study coordinators and researchers across SLHD and regularly including these summaries in the weekly e-Update.

As part of our new membership with ACTA, SLHD is able to submit a nomination/s to be considered for ACTA's prestigious Trial of the Year Award. Sydney Research is currently co-ordinating SLHD's

nomination/s for this award, where Adjunct Associate Professor Vicki Taylor will review each application received and will submit the preferred trial/s to the SLHD CE for consideration and approval.

## International Clinical Trials Day

Sydney Research have assisted in the development of communications for International Clinical Trials Day on 20 May 2020. A message from CE and Executive Director Sydney Research, a Sydney Connect Story and banner have all been prepared to recognise those involved in the conduct of trials within the District as well as celebrate SLHD's new membership with ACTA.

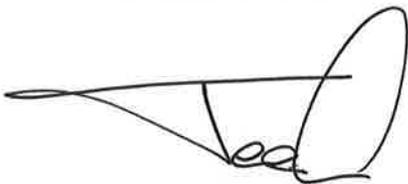
## Other Activities

- Sydney Research continues to support and explore:
  - The establishment of the Pharmaceutical Manufacturing Lab to be located within the NSW State Biobank. Project costs are being finalised
  - The NSW State Biobank by linking them with potential partners, clinicians and researchers.
  - The Tissue Analytics digital wound application project.
  - The Royal Prince Alfred Immune Effector Cell Quality Service Steering Committee
  - CHERP Precinct Committee support
  - CHERP Planning and Development Committee support
- Sydney Research has commenced a process of updating its branding across all digital communication platforms. New branding has been applied to the Sydney Research Twitter account, the weekly e-Update and has commenced steps towards updating the website.
- Through the Sydney Research Council, weekly e-update, communications and social media, Sydney Research continues to promote internal and partner educational, research and grant activities to its audience of 761 subscribers.
- @SydneyResearch currently has 965 followers on Twitter.

## COVID-19

SLHD has continued to undertake a wide range of activities to manage and plan for COVID-19. A detailed series of presentations of the District's preparedness for and response to COVID-19 will be presented to the May Board Meeting.

The Board is referred to the Daily Situation Reports for details on activities during the month.



Dr Teresa Anderson AM  
**Chief Executive**  
Date: 15.6.20