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## Sydney Local Health District

### Meeting One Hundred and Five of the Board

Date: Monday 16 November 2020  
Time: 9.00am  
Venue: Zoom Meeting  
Chair: Ms Victoria Weekes, Deputy Chair

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#### 1. Present and apologies

Ms Victoria Weekes, Deputy Chair  
Dr Thomas Karplus, Member  
Mr David McLean, Member  
A/Professor Christine Giles, Member  
Ms Ronwyn North, Member  
Dr Tim Sinclair, Executive Director of Operations, SLHD  
Ms Frances O'Brien, Member  
Professor Paul Torzillo AM, Member  
Ms Kerry-Anne Hartman, Member  
Dr Mary Haines, Member  
Dr Teresa Anderson, AM, Chief Executive

#### Apologies

The Hon. Ron Phillips AO, Chair  
Mr Richard Acheson, Member

#### In attendance

Dr Alicja Smiech, Chair, Medical Staff Executive Council (Departed 11.00am)  
Ms Nerida Bransby, Secretariat  
Ms Karinya Belleair, GHMP Trainee (Departed 11.00am)  
Ms Michaela Christy, GHMP Trainee (Departed 11.00am)  
Mr Thomas O'Sullivan, GHMP Trainee (Departed 11.00am)

#### 2. Welcome and introductions

The Chair acknowledged the traditional owners of the land and welcomed members and guests to meeting one hundred and five 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.

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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 of the previous meeting held 19 October 2020

The minutes of the Board Meeting held on Monday 19 October 2020 were moved and seconded as a true and accurate record of the meeting with the following amendments:

- Agenda Item 9, dot point 7, sentence to be re-worded.
- Agenda Item 14.1, dot point 2, sentence to be re-worded.

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 – October 2020

The Chair declared that the CE Report for October 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 Board Self-Assessment has been deferred. The Board agreed for the Chief Executive to have initial discussions with the Australian Institute of Company Directors with whom we have a partnership. Following this, it is to be placed on the Agenda for the Board Planning Day in February 2021.
- The report to outline the pressures faced by the District for this financial year is to be provided following the schedule of the purchasing meetings with the MoH. The Budget is to be handed down tomorrow. The time frame for the Budget Presentation is unsure.
- Women's Health, Neonatology and Paediatrics and the Director of Aboriginal Health have commenced the review on the low birth weight in babies.
- A brief on the outcome of the HACs review will be provided at the meeting in February 2021.
- The incomplete Mental Health Report was due to a loading issue with HIE. This agenda item can be removed from the action list.
- Copies of the presentations at the COVID-19 are now being forwarded to the Board. This agenda item can be removed from the action list.

## 6. Patient Story

Dr Anderson provided a verbal report on a patient with concerns about nursing care, cleaning in general and changing of bed linen.

Following discussion, the Board agreed to the recommendation to consider having these items included on the 'bedside communications board' or other appropriate location that advises patients and their visitors when linen is changed. A brief will be provided at the next meeting.

## 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. The Board agreed to have the Chair of the Audit and Risk Committee attend the December 2020 Board Meeting.

## 8. Chair's Report

Ms Weekes provided a verbal report on the fortnightly meeting held with the Board Chairs and the Secretary including:

- The vaccination process will be co-ordinated by the Commonwealth
- Budget Processes.
- Discussion with Board Members re convening a group to look at Board size, workload and responsibilities of the Board Members and the Chairs.

### **Presentation - *The Redevelopment of RPAH* - Dr Teresa Anderson AM**

The Board received a copy of the presentation via email including:

- Our Vision for RPA
- RPA – Premier Principal Referral Centre
- Game Changes in RPA Models of Care
- Game Changes at RPA and future Healthcare
- Development Objectives
- RPA's Research and Innovation Partnerships are Strong
- The Broader Precinct Plan
- Sustainability is core to our Plan
- Precinct Plan
- An Anchor in the Most Innovation Ready District in NSW
- Health and Industry Co-location and Collaboration
- Redevelopment Tick Boxes – CODID-19 Recovery Plan
- RPA in Collaboration Area: Accelerating NSW Economic Outcomes
- A fast-tracked redevelopment
- Project Leadership and Integrated Team Structure

- Project Governance Structure

Following the presentation the Board discussed:

- The District has a good relationship with the University of Sydney and will continue to strengthen
- Sustainability Buildings
- Physical designs
- First building delivered in 2025
- Dr Anderson, Dr Sinclair and Mr Gowdy were on the selection panels for the Architect, Project Manager and Cost Manager.

Ms Weekes thanked Dr Anderson for the presentation.

## 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 September 2020.
- Structure is now in place for the review to improve the District's performance in relation to all HACs. The review will look at age and clinical indicators.
- Recruiting to appropriate positions is challenging.
- Ims+ is going live today in our District. Training for staff should reach 90% today.
- 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 for August 2020 when compared to the same period last year by -2.01. Premium staff usage has increased for Nursing and Allied Health for August 2020 compared to the same period last year by 0.81 and 0.98 respectively. The District is working with the NSW Health Workforce Branch to strengthen its workforce surge plans in preparation for an escalation in the COVID-19 response.
- The District is performing well with Emergency Treatment Performance as discussed at the recent Performance Meeting with the MoH.
- NWAU Mental Health Admissions is significantly up.
- There are currently 560 people in the Health Hotels.
- For the period ended 30 September 2020, GF Expenditure was \$50.868M (10.39%) unfavourable to budget. Stimulus funding is one month behind. Finances for the District is discussed daily.
- Under the Public Health Act, invoices for quarantine accommodation will be raised by NSW Revenue under Sydney Local Health District, these funds then pass through but not kept by the District.
- The launch of the Sister Alyson Bush Lounge and Smoking Ceremony for the Parent and Baby Unit went well last Friday.
- Prime real estate has been sourced for Green Square. Community consultation dates to be set.

- Sydney Research is continuing and progressing extremely well during COVID-19. The Education and Research Committee meeting is being held today.
- The recent articles in the media concerning the Special Health Accommodation were discussed.
- Challenges for staff at the airport concerning exemptions.
- The updated information on COVID-19 was noted.

## 9.1 Finance and Performance Reports

### 9.1.1 SLHD Board reporting pack – September 2020

The Board received, read and noted the SLHD Board Reporting Pack for September 2020. A presentation on Cyber Security will be provided to the Board following the presentation to the next Audit and Risk Committee.

### 9.1.2 Selected Performance Indicators – September 2020

The Board received, read and noted this report. The Board discussed and compared the data with Sydney LHD and Northern Sydney LHD. This is due to all COVID-19 patients attending RPA Hospital.

### 9.1.3 HealthPathways Dashboard Report

The Board received, read and noted this report.

### 9.1.4 MoH Board Report for the SLHD

The Board received, read and noted this revised report for September 2020.

## 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 noted this report for the period July 2020 – September 2020 is due in December 2020.

- (ii) Changes to the NSW Incident Management Policy

The Board received, read and noted this report.

- (iii) SLHD Risk Register

The Board noted this report is due in December 2020.

## 9.5 Audit and Risk Committee Report – Period 6 June – 2 October 2020

The Board received read and noted this report for the period 6 June – 2 October 2020 including:

- The processes in place in this report
- Risks analysis and what is required from Audits
- Robust discussions at the Audit and Risk Committee
- Flexibility with COVID-19 risks.

## 9.6 Facility Reports – September 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.

- (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. The Board noted there were no issues to note and requested challenges to be included in the report.

(x) RPA Virtual Hospital

The Board received, read and noted the RPA Virtual Hospital report. RPAH Virtual Hospital are to be congratulated on receiving the Premier's Award.

(xi) SLHD Special Health Accommodation

The Board received, read and noted the Special Health Accommodation report.

(xii) Tresillian

The Board received, read and noted the Tresillian report.

(xiii) Lifehouse

The Board received, read and noted the Lifehouse report.

(xiv) Public Health Unit

The Board received, read and noted this report.

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

The Board received, read and noted this report.

(xvi) Croydon / Marrickville / Redfern Community Health

The Board received, read and noted this report.

## 10. Matters for approval / resolution

10.1 Calendar of Board meetings and subcommittee meetings for 2021.

The Board received, read and noted the meeting schedule.

## 11. Board Committee reports / minutes

11.1 Finance, Risk and Performance Management Committee

The Board received, read and noted minutes of the meeting held on 12 October 2020.

11.2 Education and Research Committee

The Board noted the next meeting is to be held on 16 November 2020.

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## 11.3 Communications Committee

The Board noted the next meeting is to be held on 2 February 2021.

## 11.4 Audit and Risk Committee

The Board received, read and noted minutes of the meeting held on 15 October 2020.

## 11.5 Health Care – Clinical Quality Council

The Board received, read and noted minutes of the meeting held on 23 September 2020.

## 11.6 Health Care – Clinical Council

The Board noted the next meeting is to be held on 25 November 2020.

## 11.7 Medical Staff Executive Council

The Board received, read and noted the minutes of the meeting held on 6 November 2020.

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

The Board noted the next meeting is to be held on 2 December 2020.

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

The Board noted the next meeting is to be held on 24 November 2020.

## 11.10 Organ Donation for Transplant – Quarterly Report (July 2020 - September 2020)

The Board received, read and noted this report for the period July 2020 – September 2020.

## 12. Other Committee reports / minutes

### 12.1 Sustainability Committee (bi-monthly)

The Board noted the meeting held on 9 October 2020 was cancelled.

### 12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 9 September 2020. The Board discussed the review of scope of practice that occurs every five years, however these conversations should occur yearly at their performance reviews.

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

The Board noted the meeting held on 15 October 2020 was cancelled.

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

The Board received, read and noted the minutes of the meeting held on 21 October 2020.

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12.5 Finance Leaders Forum (previously Revenue Enhancement Development Committee)

The Board received, read and noted the minutes of the meeting held on 21 October 2020.

12.6 NSW Health / SLHD Performance Review Meeting

The Board noted the meeting was held on 12 November 2020.

12.7 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting held on 27 October 2020.

12.8 Major Procurement, Assets and Imaging Steering Committee

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

12.9 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the minutes of the meeting held on 20 October 2020 were not available.

12.10 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 21 October 2020.

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

The Board noted the next meeting will be held on 3 December 2020.

12.12 Minutes of the District Security Co-ordination Committee

The Board received, read and noted the minutes of the meeting held on 23 September 2020.

## 13. Matters for noting

13.1 HealthShare NSW News September/October 2020

The Board received, read and noted this correspondence.

13.2 Brief – Appointment of Chair, SLHD Audit and Risk Committee

The Board received, read and noted this correspondence.

13.3 Correspondence – Statewide Activity 2019 / 2020

The Board received, read and noted this correspondence.

## 14. Other Business

14.1 Correspondence – Expression of Interest - Review of LHDs Board Reports for discussion

The Board received, read and noted this correspondence.

## 14.2 AGM

The Board congratulated Corryn McKay and her team on the exceptional virtual AGM.

## 14.2 COVID-19 Safe Christmas

Dr Anderson provided a verbal report for a COVID-19 Safe Christmas for staff including:

- Celebrate and hold outdoor events with social distancing
- The use of vinyl Christmas trees to place on walls
- Staff can wear Christmas scrubs
- COVID safe Christmas decorations

Dr Alicja Smiech thanked Dr Mary Haines for her presentation on Value Based Healthcare Research at the Value Based Healthcare (VBHC) Forum held last week. Her interactive session was excellent and very well received by participants.

## 15. Next Meeting

The next meeting is to be held on Monday 14 December 2020 at 9.30am. The Chief Executive advised the Board that the District is currently discussing the plans for how meetings will be held next year.

The meeting closed at 11.15am.

  
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Chair

14.12.20  
\_\_\_\_\_  
Date

## Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board November 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 overdue during the month of September.

Mental Health Readmissions within 28 days have decreased slightly for the month of July 2020 to 17.2%, from a July 2019 result of 17.8%. 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 5.8% for the month and 5.6% YTD August, which is slightly above the State rate of 5.6% for the month and equal to the State result of 5.6% YTD. Unplanned Emergency Representations (same ED within 48 hours) were 4.7% for the month and 4.6% YTD September 2020, which is slightly above the State rate of 4.3% for the month and 4.1% YTD September 2020.

The District remains under the benchmark (2.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI) with a result of 1.6 per 10,000 bed days for the month of August 2020. There was no Central Line Associated Bloodstream (CLAB) infections during August 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 within benchmark for 9 of the reported Hospital Acquired Complications (HACs) for the 12 month period August 2019 - July 2020. The remaining 5 HACs are performing within the acceptable tolerance range.

Fall related injuries has a rate of 6.1 per 10,000 episodes, which is slightly above the target of 5.7. For the 12 month rolling period of August 19 to July 20, this represents an increase of 3 falls.

Hospital acquired persistent incontinence has a rate of 6.4 per 10,000 episodes, with a target of 5.8. For the 12 month rolling period of August 19 to July 20, this represents an increase of 5 instances of hospital acquired persistent incontinence.

Hospital acquired malnutrition has a rate of 39.2 per 10,000 episodes, with a target of 29.7. For the 12 month rolling period of August 19 to July 20, this represents an increase of 8 instances of malnutrition.

Hospital acquired birth trauma has a rate of 135.3 per 10,000 episodes, against a target of 98.8. For the 12 month rolling period of August 19 to July 20, this represents an increase of 24 instances of birth trauma.

3<sup>rd</sup> and 4<sup>th</sup> degree perineal lacerations has a rate of 426.2 per 10,000 on a target of 384.1. For the 12 month rolling period of August 19 to July 20, the number of instance of perineal lacerations decreased by 1.

Work continues to improve the District's performance in relation to all HACs, with facilities/services in the process of finalising HAC Action Plans, which will be overseen by the newly established SLHD HAC Committee.

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 for September 2020 when compared to the same period last year by -1.02. Premium staff usage has increased for Nursing and Allied Health for September 2020 compared to the same period last year by 0.40 and 1.03 respectively.

The District is working with the NSW Health Workforce branch to strengthen its workforce surge plans in preparation for an escalation in the COVID-19 response. Initial focus was on potential workforce challenges in ICU surge activity and included identifying key specific workforce trigger points that would inform local planning as well as those that may need to inform potential deployment of has been the development of a specific workforce focussed escalation plan that will ensure is aligned to current and ongoing work within the SHEOC.

As indicated last meeting, the Ministry of Health's assessment of the preparedness of SLHDs workforce surge plan was that we are prepared and low risk. They commented that the SLHD Workforce Surge Plan was well considered plans with clear escalation measures, FTE requirements across all services/levels and strategies to surge and that we can accommodate surge with internal, private and other supplementary workforces.

The output of the work with the Ministry Workforce Branch is a specific workforce focussed escalation plan that is aligned to current and ongoing work within the SHEOC with the potential for centralised redeployment if required.

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 -9.47% in the number of separations (13,134) for the month of September 2020 when compared to the same period last year. YTD September separations have decreased by 10.54%. This is consistent with the decrease in elective surgery and reduced inpatient activity associated with COVID-19. In September 2020, the District's occupancy rate decreased by 2.07%, to 86.02% when compared to the 88.09% in September 2019.

There were 12,461 attendances to the District's Emergency Departments in September 2020, which is a 13.36% decrease from 14,383 when compared to the same month last year. YTD Emergency Department attendances have decreased by 15.13% to 37,249, when compared to the same period in the previous year. YTD September case weighted attendances have decreased by -13.14%, when compared to the previous year. The District is investigating the impacts of COVID-19 on the reduction of Emergency Department presentations in partnership with the George Institute.

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

The District continues to work on ETP performance. There was a 2.31% increase in ETP in the month of September 2020, to 69.31%, when compared to the same month in the previous year. YTD September there has been a slight increase (1.16%) in ETP to 68.83%. Admitted ETP was below target (50%) for the month at 43.3%.

## **Transfer of Care**

The District is performing slightly below the transfer of care (TOC) target (90%) for September 2020, with 86.8% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. This has been particularly impacted at RPA by the large number of patients coming from the Police Quarantined Hotels who need to be managed in a COVID-19 pathway.

## **ED Triage**

The District is performing well in relation to the triage targets and achieved Triage Categories 1, 4 and 5 for the month of September. Triage Categories 2 and 3 are slightly below the revised targets, however are exceeding the previous targets.

## **Elective Surgery**

There were 619 less elective surgeries performed in September 2020 when compared to the same period in the previous year, representing a decrease of 23.34%.

For the month of September, 100% of both Category A and Category B elective surgery patients were admitted within the clinically appropriate timeframe for their surgery, and 95% of Category C. The District has plans in place to catch up on the backlog of surgery resulting from the cessation of all non-urgent surgery in response to COVID 19. FYTD September there has been an 12.61% (145) increase in surgical patients not ready for care, when compared to the same period last year.

Elective surgery has gradually recommenced across the District to 100% capacity towards the end of July 2020. To ensure Royal Prince Alfred Hospital does not undo its COVID-19 preparedness; to supplement capacity, collaborative care arrangements are continuing to work well with Chris O'Brien Lifehouse, The Mater Private, North Shore Private, Sydney Day Surgery, Sydney Adventist Hospital, Strathfield Private, Chatswood Private and Genea. Since March 2020, the District has completed surgery for over 1500 public patients via these collaborative care arrangements.

In addition, the District has commenced an internal strategy to increase additional surgical activity from October 2020 to reduce the elective surgical back log 'Surgical Bubble' at Institute of Rheumatology of Orthopaedics, Canterbury and Concord Hospitals.

## **Emergency Surgery**

There were 46 less emergency surgeries performed in the month of September 2020 when compared to the same month last year, representing a 3.84% decrease. This may reflect the gradual increase in elective surgeries.

## **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 14.6% decrease in the number of Hospital in the Home overnight separations in September in comparison to the same month last year, due to the impact of COVID-19. This has been replaced by an increase in virtual health care.

## 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 22.8% variance for the month of August, excluding Dental.

Stream	Target	Actual	Variation	Variation %
Acute*	28,324	26,682	- 1,642	-5.80%
ED	3,934	3,579	- 355	-9.02%
NAP	8,403	21,852	13,449	160.05%
SNAP**	2,312	2,083	- 229	-9.89%
MH Admit***	2,963	3,261	298	10.05%
MH NAP	1,900	1,284	- 616	-32.42%
<b>Total</b>	<b>47,836</b>	<b>58,741</b>	<b>10,905</b>	<b>22.80%</b>
Dental DWAU	10,836	9,164	- 1,672	-15.43%
Dental NWAU#	1,361	1,151	-210	-15.43%
<b>Total (NWAU)</b>	<b>49,197</b>	<b>59,892</b>	<b>10,695</b>	<b>21.74%</b>

\* 10 uncoded episodes

\*\* 15 ungrouped episodes

\*\*\* 1 uncoded episode

# NWAU=589/4691\*DWAU

### Clinical Costing

The District and Network Return Round 24.3 (July 2019 to March 2020) and Round 24.4 (April to June 2020) are progressing, with the first draft submission made in late October. The District Costing Team is currently in the process of refining the cost fractions and correcting data issues.

## REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

### Private Health Insurance Usage

For the month of September 2020, 15.03% (2,045 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was a decrease of 255 (12.47%) patients who elected to use their private insurance compared to the same period last year and a decrease of 118 (5.45%) in total separations from previous month. For the month ended September 2020 conversions for facilities as compared to the same period last year were:

- RPAH – an increase of 8 (0.72%) private patients.
- Concord – a decrease of 194 (19.69%) private patients.
- Canterbury Hospital – a decrease of 70 (45.16%) private patients.
- IRO – a decrease of 3 (11.54%) private patient.
- Balmain Hospital – an increase of 4 (25%) private patients.

### Single Room Usage

For the month of September 2020, 8.15% of patients were flagged as infection control across the District.

For the month, 18% of all available single rooms were occupied by private patients and 38% of all private patients were accommodated in single rooms.

## **SLHD Strategic Revenue Network**

Key notes:

- SLHD Strategic Revenue Network meeting was held in September 2020. Initiatives for revenue generation was discussed for each facility.
- Clinician Billing Portal (CBP) has gained some momentum with RPAH, CRGH and TCH working to identify and sign up staff specialists to bill through the application. There are currently 71 registered users and a total \$396K has been raised through the portal to date.

## **REDESIGN AND SERVICE IMPROVEMENT**

### **Innovations**

- The 21st Pitch event took on a virtual format and was presented to over 150 staff via live stream.
- This Pitch was 'bigger than ever' with the funding available to be doubled to \$100,000 and each presenter was only give five (5) minutes to present.
- Eight innovative ideas were presented, with \$91,124 in prize money awarded to all 4 pitches.
  - The "Reusable and transparent face masks with N95 respirator to improve interpersonal communication in healthcare" project by Dr Ryan Downey and Luke Gordon was the big winner with \$50,000 awarded to rapidly prototype and evaluate a reusable and transparent N95 face mask for use in healthcare settings
  - The "Culturally designed breast screening shawls to be worn by Aboriginal women in BreastScreen SLHD" project by Karen Richa was awarded \$10,000 to introduce breast screening shawls to increase awareness about the importance of screening for the early detection of cancer and to make the screening experience more culturally inclusive and positive.
  - The "Brace yourself for a new future with AI" project by Oyku Dalci was awarded \$28,624 to use Artificial Intelligence to revolutionise Orthodontic Care in NSW by using Dental Monitoring to remotely examine and monitor orthodontic patients.
  - The "Group in a box" project by Aimee Nicholls was awarded \$2,500 to create multiple bespoke boxes that contain ready to go group activities for use with clients and nurses on the Missenden Acute Unit.

### **Other Projects**

- Hands Up Project (RPA Hand Clinic)
  - The Project Management Plan has been finalised and is in the process of being signed.
  - The project is currently in the diagnostics phase of the project where data is being analysed, patient and staff surveys conducted.
- RPAH Transfer of Care Project – 'Good to Go, Discharge by 10 and 2'
  - The Diagnostic phase is underway
  - Medical Interviews have commenced
  - Nursing Interviews have been undertaken and responses being collated
  - Main themes are currently being finalised, including barriers to discharging by 10am and 2pm
  - Feedback sought from the Director of Patient and Family Experience to review main themes from consumers regarding Discharge from hospital

## HealthPathways

### **Content development**

Additional content for Neurology, Urology and Continence were published in September alongside content updates and full periodic reviews to Asthma Cycle of care, problem gambling, IUD management and Hyperlipidaemia. A body of work also continued to ensure alignment of our service listings to the 28 e-Referral forms being released to GPs across October and November. The HealthPathways Operational Team has continued to provide support to both the Summer Hill Drive Through service and the SLHD Negative Hot Line service.

### **COVID content**

Work continues to develop and lead the COVID-19 Recovery clinical pathway. Presently we are collaborating with NSW Health and the RACGP to align content ahead of local specialist consultation.

### **Usage of HealthPathways**

Overall usage of pathways remains higher than pre-COVID-19 days. User rates are stable and in line with recent monthly usage. The gain in new users that started in March/April of this year has continued with minimal drop off of users, this is extremely favourable when benchmarked against other NSW HealthPathways regions who are reporting significant user drop off when compared to earlier in 2020.

	October 1-15, 2020	September 2020	August 2020	September 2019
<b>Users</b>	782	1,251	1,306	938
<b>Sessions of use</b>	3,888	8,696	8,224	5,025
<b>Unique Page Views</b>	10,558	22,988	21,879	14,255
<b>Total Page Views</b>	13,055	28,602	27,244	17,671

## **FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS**

### **GENERAL FUND (GF)**

The 2020/21 Interim 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 2020 based on the District's budgeted NCoS.

For the period ended 30 September 2020, GF Expenditure was \$50.868M (10.39%) unfavourable to budget after receiving \$46.5M COVID-19 Stimulus Budget for the period of July and August 2020. The unfavourable result is primarily due to unfunded COVID-19 Incremental expense of \$33.871M for Elective Surgery, Clinics and Screening, COVID-19 Wards, Pathology testing, Special Health Accommodation, Cleaning, PPE and Patient Transport. There is a lag in the payment of the COVID-19 Stimulus Budget impacting on the year to date result.

Excluding the impact of COVID-19, the District is \$17M unfavourable to YTD September 2020 Expense budget. This is partly due to the requirement to reflect 48% of the annualised budget in the period July to December 2020.

YTD September 2020 Expenditure increased significantly (by \$60.219M or 12.54%) compared to YTD September 2019. The average monthly expense rate increased from \$145.289M for the period July 2018 to March 2019 to \$156.819M for the period April to June 2019 (excluding LSL adjustment in June 2019) to \$160.292M (excluding LSL adjustment in June 2020) for the 2019-20 Financial Year to \$180.132M YTD Sep 2020. Increase in FTE numbers and the impact of COVID-19 is contributing to these results. This is not surprising given the large number of patients particularly from the Police Managed Quarantine Hotels and the Special Health Accommodation that need to be managed each day on a COVID-19 pathway increasing the expense for each patient.

GF Revenue (including Doubtful Debts) was \$16.858M (8.49%) favourable to budget for the month and \$23.874M (4.52%) favourable to YTD September 2020 budget. This favourability is primarily due to Quarantined Hotel Passenger Fees (\$30.616M). The District continues to see unfavourable results in Patient Fees, Facility Fees, Prosthesis Income, Car Park Fees, Pharmacy Sales and Conferences & Training Receipts as a result of the impact of COVID-19. The District also continues to see a reduction in the number of private health insurance patients and a reduction in actual single room bed day rates paid by health funds.

For the period ended 30 September 2020, the District's GF NCoS was \$26.994M unfavourable to budget.

The District, based on MoH requirement to show full year COVID-19 impact, projects the NCoS to be unfavourable for the 2020/21 financial year by \$211.632M relating to unfavourable results for: Expense (\$313.467M) related to the management of the COVID-19 process; Doubtful Debts (\$12.126M); and, Own Source Revenue (\$12M) due to the impact of COVID-19 and the reduction in actual single room bed rates paid by health funds. This is offset by favourability in revenue for Quarantined Hotel Passengers (\$125.961M).

The Chief Executive and the Executive Director of Finance are confident that the District would have an on budget NCoS result (excluding the impact of COVID-19, reduction in single room bed rates paid by health funds, and Doubtful Debts) for the 2020/21 financial year despite the challenges that are facing the District. The District has continued to maintain the good controls that it has in place and monitors performance on a daily basis despite the material increase in all activity (prior to the advent of COVID-19) and the impact of the management of the COVID-19.

The major variances for the month were:

## Expenditure

- GF Total Expenditure for the month of September 2020 was \$9.588M (5.08%) favourable to budget. The result for the month was primarily attributable to unfavourable results for Employee Related Expenses (\$8.334M), VMOs (\$0.446M), RMR (\$1.258M), Other Expenses (\$0.497M) and favourable for Goods & Services (\$20.123M). The District received \$46.5M COVID-19 Stimulus Budget for the period of July and August 2020 in September 2020.
- YTD September 2020, GF Total Expenditure was \$50.868M unfavourable to budget, primarily reflecting unfavourable results for Salaries & Wages (\$22.419M), Overtime (\$5.316M), Annual Leave Provision (\$3.273M), Superannuation (\$3.739M), G&S Clinical (\$0.89M), G&S Admin (\$9.484M), VMO Payments (\$1.474M) and RMR (\$2.809M).

## Revenue

- GF Total Revenue for the month of September 2020 was \$16.858M (8.49%) favourable to budget, reflecting favourable results for User Charges (\$19.463M) and Grants & Contributions (\$0.688M) offset by unfavourable results for Patient Fees (\$1.792M), Other Sources of Revenue (\$0.075M) and Doubtful Debts (\$1.403M).

- YTD September 2020 GF Revenue was \$23.874M (4.52%) favourable to budget. This result reflects favourable variance in Quarantined Hotel Passengers (\$30.616M), Grants and Contributions (\$1.118M), High Cost Drugs (\$1.318M) offset by unfavourable variances in Facility Fees (\$1.391M), Prosthesis Income (\$0.415M), Pharmacy Sales (\$0.434M), Car Park Fees (\$1.025M) and Patient Fees (\$2.299M). The unfavourability in Facility Fees, Prosthesis Income, Pharmacy Sales and Car Park Fees is predominantly due to the impact of COVID-19.

## **SPECIAL PURPOSE AND TRUST (SP&T)**

SP&T NCoS was \$1.108M unfavourable to budget for the period of September 2020. This result reflects favourable budget variance for Expenditure (\$0.76M) and unfavourable budget variance for Revenue (\$1.868M).

## **CONSOLIDATED RESULT**

For the period ended 30 September 2020, the consolidated YTD NCoS result for the General Fund and SP&T was \$28.101M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$50.108M), Doubtful Debts (\$3.048M) and Loss on Sale of Asset (\$0.038M) offset by favourable variance for Own Source Revenue (\$25.093M).

## **FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT**

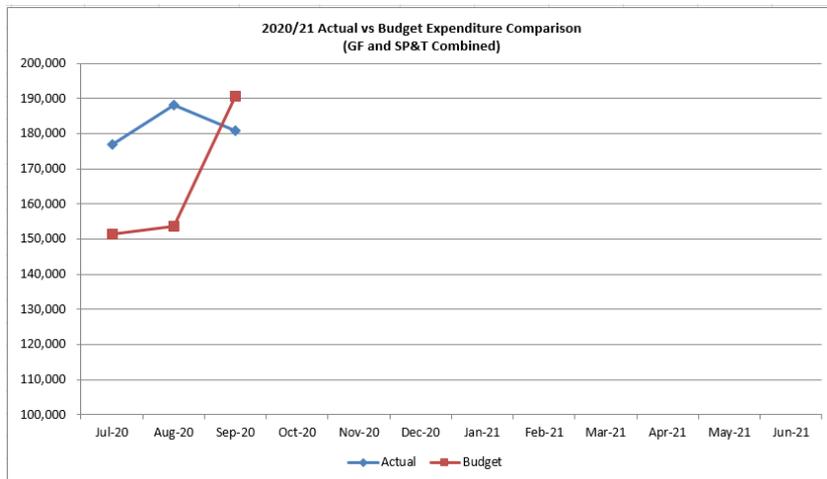
For the period ended 30 September 2020, SLHD recorded a Total Net Result of -\$20.602M which was \$28.127M (58%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD September 2020 was \$22.682M unfavourable to budget, reflecting an unfavourable budget variance for Expenditure (\$47.749M) offset by a favourable budget variance for Revenue (\$25.067M).

For the YTD September 2020, Total Direct Revenue was \$25.067M favourable to budget, comprising a favourable variance for the General Fund (\$26.960M) offset by an unfavourable variance for SP&T Fund (\$1.893M). This result for the GF reflects unfavourable variances in Patient Fees and Other Income offset by favourable variances in User Charges and Grant Income.

YTD September 2020 Total Direct Expenditure was \$47.749M unfavourable to budget, comprising an unfavourable variance for General Fund (\$47.913M) offset by a favourable variance for SP&T Fund (\$0.164M). The result for the General Fund reflects unfavourable variances in Salaries & Wages (\$22.419M), Overtime (\$5.316M), On-costs (\$6.472M), VMOs (\$1.474M), Direct Clinical Operating (\$0.890M), G&S Corporate (\$9.484M), G&S Supporting Services & Utilities (\$1.530M) and Grants (\$0.355M).

## **MONTHLY BUDGET PERFORMANCE**

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



## LIQUIDITY

The cash balance at 30 September 2020 for the SLHD Operating bank account was \$17.170M and the Operating Cash book balance was \$17.041M.

## CAPITAL WORKS – SMRS PROJECTS

As at 30 September 2020, the District's Full Year Capital works budget relating to SMRS Projects is \$24.558M comprising \$6.635M of MoH funded and \$17.923M of locally funded projects.

Actual expenditure as at the end of September 2020 was \$2.892M which is on budget.

Additionally in the current pandemic circumstances, the actual and committed expenditure for MoH funded Minor works & Equipment for COVID-19 was \$2.729M at the end of September 2020.

## OTHER CAPITAL PROJECTS

As at the end of September 2020, the District has not expended any amount yet relating to other capital projects.

As at the end of September 2020, the District has expended an amount of \$0.167M relating to Croydon Health Centre Intellectual Disability Unit. The total expenditure of \$0.167M was sourced from the General Fund.

## CAPITAL WORKS

### RPA

#### **Parent and Baby Unit**

The initial site survey of the Parent and Baby Unit was undertaken in September and procurement has continued for early works. The construction site perimeter was also extended as possession of the existing Satellite Renal Dialysis Carpark was taken.

#### **Building 63 RPU Hot Cells**

Medical gas service rough-ins and mechanical works to the hot cells continued throughout September 2020. COVID-19 has continued to impact the delivery of this project due to the hot cells installation team being based in Italy and the clean room panels being manufactured in France.

## **Pharmacy Manufacturing Bld 11 Level 2**

The initial site set out of the Pharmacy Manufacturing labs occurred in September and demolition of the mechanical services commenced.

## **NICU Isolation Room**

The capital works program for the NICU Isolation Room was completed and handed over to the users for occupation and utilisation.

## **Concord**

### **Helipad Remediation Works**

Stage 1 works including installation of screw piers and additional site set out works were completed in September. Excavation and formwork also commenced.

### **Concord Redevelopment Phase One**

- Topping out of the structure with completion of 45 suspended deck concrete pours. Remaining pours within the Concourse.
- The Topping out Ceremony with NSW Health Minister occurred on 8th October 2020.
- Removal of Tower Crane 2 (SAS)
- Concourse Link Bridge on Level 1 concrete pour
- Continuation of internal fit out works:
- Tower A – Commencement of Painting and Vinyl Works
- Tower B – Services Rough in Up to Level 3
- Tower C – Services Rough in up to Level 1
- Facade installation including glazing, Kingspan and terracotta has progressed on Tower A with 20% of the building facade complete.
- Scaffold has been stripped on the west elevation of Tower A

## **Canterbury Hospital**

### **ED Expansion**

During September works to the Triage 1 and 2 spaces as well as the reception and flight deck included the completion of service rough-ins and smoke wall installation. The pneumatic tube line was relocated and wall sheeting commenced.

## **PLANNING**

### **SLHD Surgical Services Plan**

The Planning Unit, together with the Program Director of Surgery and the Executive Director of Operations continues to conduct cross-District consultations with surgical services heads of Department and related departments.

Arising from these consultations, planning papers are being developed for:

- Trauma, Rehabilitation and Geriatrics
- Urology
- Gynaecology
- Ophthalmology
- High Volume Short Stay

These papers will support the overall Surgical Services Strategy.

## **RPA Redevelopment**

The Planning Unit has updated the Capacity Outcome Table which logs the expected bed and service changes at RPA for 2026 and 2031.

A revised presentation on the RPA redevelopment has been developed.

## **Camperdown-Ultimo Collaboration Area Alliance (CUCA Alliance) and Sydney Innovation Technology Precinct**

The Chief Executive and the Director of Planning are represented on the Tech Central Government Advisory Committee. A Planning workshop for this group was attended. An RPA/Precinct tour for Treasury and Tech Central executive was conducted in early October.

The Planning Unit has continued to contribute to the transport and land use studies sponsored by the Collaboration Area and to ensure the full alignment of the RPA redevelopment work and future health development with these Alliance studies.

Comments were provided by the District on a related draft Committee for Sydney transport strategy.

## **Green Square HealthOne- RPA HealthOne, Green Square**

With the recent securing of a site in central “Green Square” for the healthone, the Planning Unit, with Integrated Care, has facilitated and organised a series of workshops and a discussion to prioritise services, models of care and spaces for the HealthOne.

This has included, with Integrated Care:

- Updating and revising data and information on Green Square and on the health status profile of Green Square.
- A major piece of work in consulting with all HealthOne potential users, determining their service access plans and prioritising and fitting these plans into the available spaces.
- Reviewing and revising the draft Schedule of Accommodation to fit a new model for the service-one that assumes a strong virtual service, sessional usage of the facility, activity-based working and strong collaboration with the local health and medical “neighbourhood”.
- Consultation with the Academic Primary Care Users Group to support the models of care.

## **Clinical Stream Position Papers**

The Planning unit has worked with the new Renal and Urology stream to support their development of a Position Papers outlining the vision and key priorities.

## **Workforce and Education Strategic Plans**

The Planning unit has worked with the District Workforce Unit and the CEWD to scope their Planning processes and to plan the consultation process.

## **Role Delineation**

The District is currently working with clinicians to affirm or amend the current Ministry of Health guide to the delineation of hospital roles.

## **SYDNEY RESEARCH**

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

Sydney Research continues to support Sydney Local Health District (SLHD) in its response to COVID-19. The team participates in virtual meetings, reviews COVID-19 related correspondence, manages meeting attendance records for the District, and communicates the latest information to SLHD and Sydney Research stakeholders.

# Board Report

Two (2) studies have progressed to the full application stage in Round 2 of the NSW Health COVID-19 Research Grant Program, with applications due to the Office of Health and Medical Research (OHMR) on 30 October 2020. Outcomes will be announced in November 2020.

Lead Investigator	Project title	Funding Requested
Prof Elizabeth Denney-Wilson	Protecting our frontline workers: Outcomes, attitudes and recommendations from a successful large-scale P2/N95 respirator fit-testing program in Sydney Local Health District	\$66,129
Prof Martin Ng	Bioengineering Next Generation Personal Protective Masks	\$433,572

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

Two (2) full applications for TRGS Round 5 with SLHD as the Host Organisation were submitted to OHMR on 20 October 2020.

Lead Investigator	Project title	Funding Requested
Dr Mark Dennis	Efficacy and Value in Expedited out of hospital arrest care And ECMO CPR (ECPR) – The EVIDENCE Study	\$992,178
Dr Andrew McDonald	Enhancing Integration with primary care of patients with severe mental illness using an Online Shared Care Plan and Telehealth Solution	\$998,755

A further four (4) full applications for TRGS Round 5 with SLHD as a Partner Organisation were endorsed by the Chief Executive, SLHD and submitted on 20 October 2020.

Host LHD	Project title
HNELHD	How does long-acting depot buprenorphine impact the high-risk post-release period for people with opioid dependence?
MLHD	“DANMM that’s good!” Implementing and evaluating the Deadly Aboriginal and Torres Strait Islander Nursing and Midwifery Mentoring (DANMM) Program
NSLHD	Mobile Health Technology Solutions to Expand Pulmonary Rehabilitation Services for Chronic Obstructive Pulmonary Disease (COPD): The m-PRTM Implementation Project
WSLHD	Preventing cellulitis: Healthy Legs Program (HeLP)

Both host and partner full applications were reviewed by the Sydney Research team and certified by the Chief Executive, SLHD with outcomes notified in February 2021.

Sydney Research continues to support the implementation of TRGS studies from Rounds 1 to 4. The team have arranged for A/Prof Tim Wand to present the findings of their successful TRGS project to the SLHD Clinical Council on 25 November 2020. The reporting of TRGS outcomes to the SLHD Clinical Council ensures that the District can continue to support research to improve health services delivery and ultimately patient outcomes.

Sydney Research is also exploring opportunities with the Executive Director, OHMR and Chief Executive, SLHD to sustain TRGS projects post-study completion and enable sustainable integration across health services. Potential opportunities include progressing implementation through Advanced Health Research Translation Centres (AHRTCs) collaborations such as Sydney Health Partners and support from pillar agencies including the Agency for Clinical Innovation.

## **National Clinical Trials Governance Framework**

The Australian Commission on Safety and Quality in Healthcare has selected SLHD as one of the fourteen sites to participate in the pilot program of the National Clinical Trials Governance Framework (NCTGF). The purpose of the NCTGF pilot is to assist health service organisations assess their capacity to meet the standards set for clinical trial services as provided in the Governance Framework, and to identify additional resources that may be required to support national implementation.

Sydney Research has been involved on the NCTGF Implementation Committee chaired by the SLHD Chief Executive, which was established to facilitate and lead the implementation of the Framework. The Committee met on 19 October 2020 to discuss the scope and necessary expertise and resourcing required to undertake the pilot. Sydney Research will continue to be involved in the pilot.

## **OHMR – Embedding Quality Research**

The Embedding Quality Research (EQR) Working Group met on 7 October 2020 with Dr Angela Todd and Sharon Lee providing an update on existing research governance and consumer involvement initiatives led by Sydney Health Partners. Engagement and linkage with active initiatives will support priority setting for the EQR Working Group and minimise duplication, to ensure the EQR initiative is best placed to provide value to its stakeholders at the local and state level. Nominations have been provided to OHMR to establish the EQR Research Governance sub-group, with a local lead to be announced by the end of 2020.

The EQR Steering Committee convened on 2 October 2020. Prof Christine Jorm provided an overview of the pilot program in Research Capacity Building for Clinical Nurse and Midwife Consultants, led by NSW Regional Health Partners and the University of Newcastle. An update on a preliminary inquiry on a state-wide clinical trial management system (CTMS) was also provided, with further consultation to progress its implementation and local ongoing contribution supported by the EQR Steering Committee. Following this endorsement, an open tender and Request for Quote will be initiated, with members to provide input on scope and CTMS requirements. Integration of the state-wide CTMS with REGIS is also a priority, with REGIS modules to support data collection and reporting for the national Clinical Trials Governance Framework also to be explored.

NSW OHMR Executive Director will meet with the Sydney Research and SLHD Research teams on 28 October 2020 to discuss the transition between the REDCap platform and REGIS to facilitate the District's research reporting requirements.

## **Digital Health Cooperative Research Centre (DHCRC)**

The Sydney Research team and Mitchell Burger, Director, Strategy, Architecture, Innovation and Strategy, SLHD ICT Services are forming a consolidated proposal of DHCRC projects planned for SLHD. The Chief Executive, Executive Director, Sydney Research, Director of Research, and Chief Information Officer will determine the organisational priorities for digital health research and resources to be allocated.

DHCRC have partnered with RMIT Online to develop three, virtual micro-credentialed courses on digital health transformation, which include Digital Health Strategy and Change, Technology Enabled Care, and Healthcare Design. The DHCRC had initially offered each of their partners a sponsored place in one of these courses. SLHD nominated the following three staff members and each were awarded a sponsored place in their chosen course.

- Ms Rachael Mulley, Program Manager, Mental Health Services
- Ms Rachel Marnell, Nurse Manager, Sydney District Nursing
- Ms May Suk-Man Kwan, Neurosciences Physiotherapist, RPA

DHCRC have also partnered with Dr Ori Guides to develop a course on 'data visualisation and location intelligence for public health', to be held on 27 November 2020. The course will provide beginners with the training and skills in relevant health data visualisation techniques and data interpretation. DHCRC partners have been offered 10 fully-sponsored places in this course. An expression of interest was circulated among SLHD Executive and research staff, with nominations for participants due 1 November 2020.

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

The PFCC Research Working Group continues to progress its initiatives to improve consumer and community involvement in the conduct of research across SLHD. Dr Karena Conroy and Adj A/Prof Greg Fairbrother are coordinating three active initiatives:

### *Measurement tools*

The Working Group has identified a critical reporting gap in identifying consumer involvement in research at SLHD. Modification of the state-wide Research Ethics Governance Information System (REGIS) is being investigated to record this as part of project registration. A sub-group with the SLHD Research and Sydney Research teams, as well as consumer representatives met on 24 September 2020 to articulate the inputs for REGIS, in order to effectively measure consumer involvement in the design and conduct of research. The parameters have been further refined and submitted to OHMR for feedback and clarification of reporting outcomes.

### *Case Examples*

The sub-group convened on 22 September 2020 to progress case examples of consumer involvement in research. It was thought that demonstrating best practice would be valuable to researchers and consumers, with the potential to inform a state-wide policy. A proposal with potential research questions and methodology is being developed to assist guide case development.

### *Organisational Support*

The RPA Consumer Participation Coordinator and SLHD Policy Officer are supporting the PFFCC initiative coordinators to review existing policies and the development of the 2020-2023 SLHD Consumer and Community Participation Framework. A District-wide policy on consumer involvement in research is also being developed to align with the Framework.

## **Franklin Women**

SLHD will participate in the Franklin Women Academic Partners Leaders Brunch, to be held on 10 November 2020. This year's event will focus on flexible working, which has been identified as a key driver of gender equality and the new 'normal' following the COVID-19 pandemic. Participants from the SLHD Executive will be notified in late October 2020.

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

Prof Don Nutbeam has commenced as the new Executive Director of Sydney Health Partners. Prof Nutbeam is currently a Professor of Public Health at the University of Sydney and recently the Principal Senior Advisor to the Sax Institute and Board Member of Western Sydney LHD. Prof Nutbeam officially commenced on 5 October 2020, with Prof Jennings to remain with Sydney Health Partners until the end of October 2020. Sydney Research has also welcomed Prof Nutbeam as a representative on the Sydney Research Council.

The Sydney Research team continues to work closely with the Sydney Health Partners (SHP) team to support the following key initiatives:

### **SHP Implementation Strategy**

- SLHD is the lead organisation for the implementation of the SHP Strategic Platform 2 “*Transforming how research improves patient outcomes to meet the needs of our community*” and continue to participate across all five (5) of the Platforms.
- Adj A/Prof Fairbrother and Dr Conroy have been coordinating the Cellulitis Consumer Reference group, which will provide guidance on the proposed cellulitis prevention model of care and educational resources.
- A follow-up meeting with nominated Consumer Participation Coordinators from SLHD, NSLHD and WSLHD and the Principal Investigator Prof Vicki Flood was held on 12 October 2020. The coordinators confirmed that 8 consumers (5 SLHD, 1 NSLHD, and 2 WSLHD) have expressed interest in participating in the reference group. A/Prof Fairbrother and Lara Leibbrandt, SLHD Consumer Participation Coordinator, will arrange the appropriate induction paperwork and training for consumers, with the initial meeting of the reference group to be scheduled in late January 2021.

### **Encouraging More Clinical Trials in Australia**

- An Advisory Panel has been established to progress this Sydney Health Partners initiative, in collaboration with the NHMRC Clinical Trials Centre and OHMR. The Panel met on 14 September 2020 to review and update the priorities and milestones for the project, which have changed in light of the COVID-19 pandemic. The next meeting is planned for November 2020 and will focus on priority setting, review of current initiatives and milestone reporting. SLHD is the funding administrator for the initiative, with Sydney Research and SLHD Research represented on the Advisory Panel.

### **Sydney Research Council**

The Sydney Research Council met virtually on 29 September 2020. Dr Shaheen Hasmat, SMRO and PhD candidate, Chris O'Brien Lifehouse provided an update on the Bionic Lid Implant for Natural Closure (BLINC), after receiving the inaugural Big Idea People's Choice Award in 2019. Dr Hasmat has been performing cadaveric trials of the device and preparing for live animal trials, which together will provide him with the safety and efficacy data required before progressing to human trials. Since receiving the award, Dr Hasmat has submitted an application for the NHMRC Ideas Grant and was invited write a chapter on BLINC as part of 'Biomedical Innovations in Neuroscience for Global Health' book soon to be published by Springer. Dr Hasmat attributed these achievements to the support and recognition provided by the Big Idea.

Mathew Proft, Director, Innovation and Technology Precinct, NSW Treasury also presented to the Council the vision and strategy for the future Sydney Tech District (formerly Tech Central). The Chief Executive, SLHD, Director of Planning and Executive Director, Sydney Research, Adj A/Prof Vicki Taylor, will continue to work closely with NSW Treasury to ensure health and medical research remains a key component in the plans for the Precinct.

Jared Kendler, Executive Director, Precincts and Innovation Ecosystems, NSW Treasury and Mathew Proft and other Treasury representatives were provided a tour of the sites for the RPA redevelopment and Sydney Biomedical Accelerator on 8 October 2020 and have been offered an open invitation to participate in Sydney Research Council meetings to facilitate their plans for the Precinct.

A/Prof Meg Jardine has been appointed as the new Director for the NHMRC Clinical Trials Centre. A/Prof Meg Jardine is currently a practicing nephrologist at Concord Hospital and recently the Head of Renal Trials for The George Institute. A/Prof Jardine commenced in the role on 19 October 2020. Sydney Research has welcomed A/Prof Jardine as a new representative on the Sydney Research Council.

Sydney Research has thanked and acknowledged Prof John Simes for all his support and contributions as the outgoing Director, to the Sydney Research partnership. Prof John Simes will retain a senior position at the NHMRC Clinical Trials Centre to support clinical trials research and continue to participate on the Sydney Research Council in his new role.

### **Sydney Biomedical Accelerator**

Sydney Research continues to lead planning for the Sydney Biomedical Accelerator (SBA), a state-of-the-art research and innovation facility to be located within the RPA and University of Sydney campuses. The business case for the SBA was endorsed by SLHD and the University of Sydney and submitted to the NSW Minister for Health and Medical Research and Secretary, NSW Health on 24 August 2020.

Adj A/Prof Vicki Taylor is leading the SBA Program Office to complete the detailed design and integration activities for the SBA planned for 2020. Activities and milestones will support MRI merger planning, consultant engagement for the workforce analysis and governance in line with the Health Infrastructure NSW Facility Planning Process. Feedback provided by Health Infrastructure NSW will further strengthen the case for investment and prepare for project registration by NSW Health with the Infrastructure NSW Investor Assurance Framework and Gateway Review Process.

An SBA Partners meeting has been scheduled for Thursday 29 October, which will involve the Board members and Directors from the three partnering MRIs the Centenary, Heart Research and Woolcock Institutes, as well as representatives from SLHD and the University of Sydney and EY who are engaged to work with us on this key initiative. This will be an opportunity for all partners to further engage with the vision and current strategy for the SBA and establish next steps to progress the full business case for submission to the NSW Ministry for Health and Medical Research and Secretary, NSW Health.

### **Other Activities**

In addition to the above, Sydney Research continues to support key activities in SLHD and with interagency partners:

- University of Sydney Faculty of Medicine and Health Research Centres Review and application for the Institute for Musculoskeletal Health
- Representing SLHD in planning for key precinct developments, including the Camperdown-Ultimo Collaboration Area, Camperdown Health Education and Research Precinct, Tech Central and Central Railway developments, Eveleigh and Pyrmont.
- The Royal Prince Alfred Immune Effector Cell Quality Service Steering Committee
- The establishment of the Ab Initio pharmaceutical manufacturing facility to be located within the NSW State-wide Biobank.
- Sydney Institute for Women, Children and their Families webinar on the First 2000 Days
- Participation in ACTA training workshop for consumer involvement in clinical trials, facilitated by Telethon Kids Institute

- Presentation on SLHD clinical trials activity and innovation during COVID-19 for the ARCS Virtual Summit
- Participation in Health Consumers NSW/SHP stakeholder workshop on involving consumers in health research and the development of training opportunities
- Australian Academy of Health and Medical Sciences Annual Meeting 2020
- Planning for the National Clinical Trials Governance Framework pilot implementation in RPA
- Industry and innovation partnership opportunities with Cicada Innovations and IDE Group
- Researcher capacity building with the Train the Trialist education program, a submission to The Pitch innovation challenge in September 2020
- Progressing the evaluation of the inaugural Biodesign Sydney program and linkage with the SPARKS program
- Sydney Research will be hosting a social distanced event to watch and participate in the SLHD 2020 AGM

Through the Sydney Research Council, communications and social media, Sydney Research is promoting internal and partner educational and research activities.

- The Sydney Research weekly electronic newsletter, e-Update, has an audience of 804 subscribers
- @SydneyResearch currently has 1,032 followers on Twitter

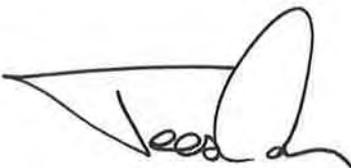
## **COVID-19 UPDATE**

SLHD has undertaken the following activities in October 2020:

- Enhanced and expanded Contact Tracing through the SLHD Public Health Unit for locally acquired cases. Support to NSW Health and the State of Victoria in providing contact tracing to assist their outbreak management team.
- Expanded ICU capacity at RPA, Concord and Canterbury Hospitals in the event of surge in demand due to an outbreak.
- Expanded Renal Dialysis surge capacity to match projected need in the event of an outbreak developed.
- Provided Special Health Accommodation for incoming international passengers under the Public Health Order requiring medical supervision.
- Provision of accommodation for community transmission cases who are unable to safely self-isolate in the home environment.
- Provision of accommodation for passenger requiring to quarantine in accordance Public Health (COVID-19 Border Control) Order 2020 NSW requiring additional care that is not available within the NSW Police managed quarantine hotels.
- Expanded community based COVID-19 Screening Clinics established at Rozelle, Redfern, Summer Hill, Homebush, Eddy Avenue, Roselands, in addition to pop up clinics for outbreak surveillance (e.g. Marriott Hotel) currently seeing between seeing at times over 3,000 people on a busy days.
- Expanded facility based COVID-19 Screening Clinics established at RPA, Concord and Canterbury Hospitals currently seeing between 400-1000 people per day.
- Establishment of COVID-19 Screening Clinics in areas of special need such as social housing areas like Waterloo, Riverland etc.
- Creation of Staff and Visitor Screening Stations to check all people entering the health facilities established at all sites.
- Development of staff and visitor screening app to allow registration of all people entering our facilities in accordance with the current COVID-19 MoH guidelines.
- Special Flying Squad Teams established to support community testing, Special Health Accommodation and other sites.

- COVID-19 Testing team established to support the SESLHD Screening Team at the international airport terminal.
- COVID-19 Screening, Testing team and Health Border Control team established at the Domestic Terminal to screen and validate permits for all passengers and crew alighting from flights originating from Victoria.
- COVID-19 Screening, Testing team and Health Border Control team established at the Central Train Station to screen and validate permits for all passengers alighting from trains originating from Victoria.
- Development of COVID-19 Hotline to provide results to people following COVID-19 swabbing.
- Enhanced Environmental Health Officer inspections of food outlets with SLHD to ensure they have and comply with appropriate COVID-19 Safety Plans.
- Establishment of Tiger Teams to provide support to facilities and services in COVID-19 operations.
- Support to the MOH with staff to work in the State Health Emergency Operations Centre (SHEOC).
- Regular meetings with Emergency Management representatives from LGAs (City of Sydney, Inner West, Burwood, Strathfield, Canada Bay and Canterbury Bankstown Councils).
- Development, fit out and use of special purpose vehicle to run mobile COVID-19 Testing Clinics.
- Central coordination of COVID-19 activities through the SLHD Operations Centre, central coordination of supply and ordering of PPE, equipment and other issues.
- Continuation of Fit Testing for staff from high risk areas, note this is on top of existing Fit Checking that currently occurs.
- Extensive planning, preparedness and response work undertaken with RACFs within SLHD to prepare these facilities in the event of a COVID-19 outbreak.
- Extensive planning, preparedness and response work undertaken with disability group homes within SLHD to prepare these group homes in the event of a COVID-19 case being detected within or near these group homes.
- Commencement of a research study to compare the viability of different types of samples as a testing medium/collection modes to test for COVID-19 (Saliva, Sub-lingual, Throat and Nose).
- Work with the PHEOC in developing a framework to deal with an outbreak within a social housing complex.
- Work with the PHEOC in developing forward planning for airport arrivals (international freight and passenger arrivals into Sydney).

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



Dr Teresa Anderson AM

**Chief Executive**

Date: 16.12.20