
Sydney Local Health District

Meeting One Hundred and Six of the Board

Date: Monday 14 December 2020
Time: 9.30am
Venue: Centre for Education and Workforce Development / Zoom Meeting
Chair: Ms Victoria Weekes, Acting Chair

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
Ms Frances O'Brien, Member
Professor Paul Torzillo AM, Member
Ms Kerry-Anne Hartman, Member
Dr Mary Haines, Member
Mr Richard Acheson, Member
Dr Teresa Anderson, AM, Chief Executive

Apologies

In attendance

Mr Jim Mitchell, Chair, SLHD Audit and Risk Committee (Departed 9.45am)
Dr Tim Sinclair, Executive Director of Operations, SLHD
Dr Alicja Smiech, Chair, Medical Staff Executive Council (Departed 11.30am)
Mr Ross Sinclair, Executive Director of Finance
Ms Nerida Bransby, Secretariat

2. Welcome and introductions

The Chair acknowledged the traditional owners of the land and welcomed members and guests to meeting one hundred and six of the Sydney Local Health District (SLHD) Board.

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.

Minutes

4. Confirmation of previous minutes

4.1 Minutes of the previous meeting held 16 November 2020

The minutes of the Board Meeting held on Monday 16 November 2020 were moved and seconded as a true and accurate record of the meeting.

The Chair signed the minutes.

4.2 CE Report – November 2020

The Chair declared that the CE Report for November 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 is to be placed on the Agenda for the Board Planning Day in February 2021.
- The 2020-2021 Budget Presentation is today. This agenda item can be removed from the action list.
- The review on the low birth weight for Aboriginal babies has commenced and ongoing.
- A brief on the outcome of the HACs review will be provided at the meeting in February 2021.
- The Chair of the Audit and Risk Committee Meeting attended the meeting today. This agenda item can be removed from the action list.

5.2 Brief – Feedback re Patient Story concerning Linen

The Board received, read and noted this brief including:

- Adding value to patient board
- 3,500 beds changed daily
- Patient goals are provided on bed boards
- The need to enhance communications to patients and families re linen changes

This agenda item can be removed from the action list.

5.3 Financial Statements 2019 / 2020 - Mr Jim Mitchell, Chair of the Audit and Risk Committee

Mr Mitchell provided a verbal report including:

- The Committee meets seven times per year.
- Of the seven meetings held, two of these meetings focus on Financials at the end of March and at the end of the Financial Year.

Minutes

- Duration of all meetings is three hours.
- Committee reviews risk management, controls in place and compliance.
- Audits include COVID screening stations and testing clinics, oral health and deteriorating patients.
- Retirement of Michael Clarke, Director, Internal Audit and Fleur Harriton is acting.
- Agile approach to Audit Program
- Looks at risk register with a focus on the top ten risks, risks are reviewed and actions addressed.

Ms Haines, Member of the Audit and Risk Committee responded:

- Culture is healthy and strong.
- Internal Audit is focused.
- Staff are receptive to audits.

Dr Anderson responded:

- Strong membership of Audit and Risk Committee includes, external independent members and Board Members.
- Good assurance from the Committee we are heading in the right direction.
- Level of skills is appreciated.

The Chair thanked Mr Mitchell for attending the meeting.

Presentation – 2020-2021 Budget Presentation

Dr Anderson and Mr Sinclair presented on the 2020-2021 Budget Presentation including:

- Acknowledge of Country
- Overview of the Service Agreement
- Strategic Priorities
- NSW Premier's Priorities
- NSW Health Outcome and Business Plan 2019-2020 to 2022-2023
- Alignment of directions and strategies to outcomes
- Governance
- NSW Outcome, Budget Schedule part one, two and three
- Capital Program
- Purchased Volumes
- Election Commitment
- NSW Health Strategic Priorities
- Performance against strategies and objectives
- Performance Deliverables
 - Value based healthcare
 - Integrated care
 - Towards zero suicides
- Budget Principles
- 2020-2021 Budget from MoH

Minutes

- Activity NWAU Prices 2020-2021
- Activity NWAU Targets 2020-2021
- 2020-2021 Budget Allocations
- Service Agreement 2020-2021
- Next Steps

Following the presentation the Board discussed:

- Very tight budget
- Challenges for Staff
- Stimulus funds for surgery
- Focus for health is to identify efficiencies
- Our role in COVID-19 is where we are located
- Population growth

Ms Weekes thanked Dr Anderson and Mr Sinclair for the presentation.

6. Patient Story

Dr Anderson provided a verbal report on an organ donation patient and the effect on the donor family, the recipients and their families and the staff. Acknowledgement to the staff for this highly complex system to manage.

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. Chair's Report

Ms Weekes provided a verbal report including:

- The Board Planning Day is 15 February 2021.
- Congratulations to Professor Torzillo and A/Professor Giles on their re-appointments.
- A/Professor Giles will represent the Board on the MoH Committee for Board Reports. These discussions will be shared with the District Executive.
- Ms Weekes to email Board Members on the key issues discussed at the fortnightly meeting with the Board Chairs and the Secretary and will also share relevant materials.

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.
- There were no RCAs overdue for the month of October 2020.
- Mental Health Readmissions within 28 days have increased slightly for the month of August 2020 to 18.0%, from an August 2019 result of 16.3%. As of YTD August 2020 readmissions are 17.6% which is slightly above the YTD August 2019 result of 17.1%. Strategies to improve mental health performance remain a focus for the District.
- The Director of Medical Services and Executive Director Clinical Governance and Risk will participate on the HAC Review Committee.
- Emergency Department Activity is continuing to increase compared to the previous months as restrictions on the movement of people due to COVID start to relax.
- The District is performing well in relation to the triage targets and achieved Triage Categories 1, 4 and 5 for the month of October. Triage Categories 2 was 84.99%, which is a slight increase on the 83.33% for the same period in the previous year and Triage Category 3 was 83.83%, which is a significant increase on the 74.06% for the same period in the previous year and only just shy of target. Again this is impacted by the patients from the Police Quarantine Hotels and the Special Health Accommodation who are on a COVID pathway when they present to ED.
- There were 25 less emergency surgeries performed in the month of October 2020 when compared to the same month last year, representing a 1.97% decrease. This is most likely due to the increase in Elective Surgery activity.
- HealthPathways have improved communications with the Primary Health Network and General Practitioners.
- Safework have granted permission to fix the counter within the Concord Centre for Mental Health.
- NSW Future Health Strategy timetable will be provided at the Board Meeting in March 2021. A copy of the SLHD submission to the Ministry of Health on the NSW Health Future Health Strategy is to be provided to the Board.
- The information on Planning was noted.
- The information on Research was noted.
- The updated information on COVID-19 was noted. In particular the opening of another hotel due to the borders opening. The Hotel Quarantine Model will remain the same

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – October 2020

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

9.1.2 Selected Performance Indicators – October 2020

The Board received, read and noted this report.

9.1.3 HealthPathways Dashboard Report

The Board received, read and noted this report.

9.1.4 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 this report for the period July 2020 – September 2020.

(ii) Falls

The Board received, read and noted this report.

(iii) SLHD Risk Register

The Board received, read and noted this report.

9.5 Audit and Risk Committee Report (period 1 December 2020 - 11 March 2021)

The Board noted this report for the period 1 December 2020 – 11 March 2021 is due in April 2021.

9.6 Facility Reports – October 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 in particular the staff movements while Dr Wallace has a period of maternity leave.

(v) Drug Health Services

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

(vi) Mental Health Services

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

(vii) Oral Health Services and Sydney Dental Hospital

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

(viii) Population Health

The Board received, read and noted the report.

(ix) Royal Prince Alfred Hospital

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

(x) RPA Virtual Hospital

The Board received, read and noted the RPA Virtual Hospital report in particular the visit to RPA virtual by Minister Dominello.

(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 Update to the Delegations Manual

The Board endorsed the recommendation to update the Delegations Manual in relation to Privacy.

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 9 November 2020.

11.2 Education and Research Committee

The Board received, read and noted the minutes of the meeting held on 16 November 2020. The Board supported the change to the Terms of Reference for the Education and Research Committee to accommodate the National Clinical Trials Governance Framework.

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 11 December 2020.

11.5 Health Care – Clinical Quality Council

The Board received, read and noted minutes of the meeting held on 28 October 2020.

11.6 Health Care – Clinical Council

The Board noted the meeting was held on 25 November 2020.

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11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 5 February 2021. Dr Anderson thanked Dr Smiech for Chairing this Committee with good engagement from clinicians.

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

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

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board noted the next meeting is to be held on 30 March 2021.

11.10 Organ Donation for Transplant – Quarterly Report (October 2020 – December 2020)

The Board noted this report for the period October 2020 – December 2020 is due in February 2021.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

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

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 14 October 2020.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board noted the meeting held on 18 November 2020 was cancelled.

12.4 Surgical Demand Committee (bi-monthly)

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

12.5 Finance Leaders Forum (previously Revenue Enhancement Development Committee)

The Board received, read and noted the minutes of the meeting held on 18 November 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 noted the meeting held on 24 November 2020 was cancelled.

12.8 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted the minutes of the meeting held on 10 November 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 18 November 2020.

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

The Board received, read and noted the minutes of the meeting held on 3 December 2020.

12.12 Minutes of the District Security Co-ordination Committee

The Board noted the meeting held on 28 October 2020 was cancelled.

13. Matters for noting

13.1 Waterloo Healthy Living Program Evaluation Report

The Board received, read and noted this report.

13.2 Brief – STARS Executive Steering Committee

The Board received, read and noted this brief. The Board supported the information contained in the brief regarding the STARS Executive Steering Committee and proposed clinical variation governance structure with focus areas being provided to the Board.

13.3 Seclusion and Restraint

The Board received, read and noted the information contained in the brief regarding seclusion and restraint of mental health consumers in declared emergency departments.

14. Other Business

14.1 Thank you from the Chief Executive

Dr Anderson thanked the Board Chair and all the Board Members, the Legal team led by David Wilke and Dean Bell, all the District Executive Directors and Ms Bransby for their support and assistance throughout the long standing and complex legal matter.

Minutes



15. Next Meeting

The next meeting is to be held on Monday 15 February 2021 at 9.00am.

The meeting closed at 11.45am.

A handwritten signature in black ink, appearing to be "A. Miller", written over a horizontal line.

Chair

15.2.21

Date

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

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 October.

Mental Health Readmissions within 28 days have increased slightly for the month of August 2020 to 18.0%, from an August 2019 result of 16.3%. As of YTD August 2020 readmissions are 17.6% which is slightly above the YTD August 2019 result of 17.1%. Strategies to improve mental health performance remain a focus for the District.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation at 4.9% for the month and 5.3% YTD September, which is slightly below the State rate of 5.6% for the month and YTD September which is an improvement on last month. Unplanned Emergency Representations (same ED within 48 hours) were 4.5% for the month and 4.6% YTD October 2020, which is equal to the State rate of 4.5% for the month and slightly above the state rate of 4.2% YTD October 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 September 2020. There were no Central Line Associated Bloodstream (CLAB) infections during September 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 September 2019 - August 2020. The remaining 5 HACs are performing within the acceptable tolerance range.

Fall related injuries has a rate of 6.0 per 10,000 episodes, which is slightly above the target of 5.7. For the 12 month rolling period of, September 2019 - August 2020, this represents an increase of 2 falls in comparison to the same period in the previous year.

Hospital acquired persistent incontinence has a rate of 6.3 per 10,000 episodes, with a target of 5.8. For the 12 month rolling period of September 2019 - August 2020, this represents an increase of 6 instances of hospital acquired persistent incontinence in comparison to the same period in the previous year.

Hospital acquired malnutrition has a rate of 39.5 per 10,000 episodes, with a target of 29.7. For the 12 month rolling period of September 2019 - August 2020, the number of instances of malnutrition decreased by 9 in comparison to the same period in the previous year.

Hospital acquired birth trauma has a rate of 127.0 per 10,000 episodes, against a target of 98.8. For the 12 month rolling period of September 2019 - August 2020, this represents an increase of 16 instances of birth trauma in comparison to the same period in the previous year. The Executive Director of Operations is continuing to Work with Women's Health, Neonatology and Paediatrics to identify strategies to improve these results.

3rd and 4th degree perineal lacerations has a rate of 411.6 per 10,000 on a target of 384.1. For the 12 month rolling period of September 2019 - August 2020, the number of perineal lacerations decreased by 12 in comparison to the same period in the previous year.

Work continues and the District is focused on improving 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 which is co-chaired by the Executive Director of Operations and the Director of Clinical Governance and Risk.

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 October 2020 when compared to the same period last year by -0.28. Premium staff usage has increased for Nursing and Allied Health for October 2020 compared to the same period last year by 0.40 and 0.56 respectively.

The District has continued to work with the NSW Health Workforce branch to ensure our workforce surge plans are in place for any escalation in the COVID-19 response. The Ministry of Health's assessment of the preparedness of SLHDs workforce surge plan is that we are prepared and low risk. The SLHD Workforce Surge Plan was considered well developed 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.

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 -8.81% in the number of separations (13,906) for the month of October 2020 when compared to the same period last year. YTD October separations have decreased by 10.13%. This is consistent with the decrease in elective surgery and reduced inpatient activity associated with COVID-19. In October 2020, the District's occupancy rate decreased by 0.25%, to 87.14% when compared to the 87.39% in October 2019. This is a significant improvement on last month as normal activity starts to increase.

There were 13,494 attendances to the District's Emergency Departments in October 2020, which is an 8.73% decrease from 14,784 when compared to the same month last year. YTD Emergency Department attendances have decreased by 13.52% to 50,742, when compared to the same period in the previous year. YTD October case weighted attendances have decreased by -11.77%, when compared to the previous year. Emergency Department Activity is continuing to increase compared to the previous months as restrictions on the movement of people due to COVID start to relax.

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 0.07% decrease in ETP in the month of October 2020, to 68.33%, when compared to the same month in the previous year. YTD October there has been a slight increase (0.87%) in ETP to 68.72%. Admitted ETP was below target (50%) for the month at 44.98%.

Transfer of Care

The District is performing slightly below the transfer of care (TOC) target (90%) for October 2020, with 86.75% 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 Quarantine Hotels and Special Health Accommodation (SHA) 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 October. Triage Category 2 was 84.99%, which is a slight increase on the 83.33% for the same period in the previous year and Triage Category 3 was 83.83%, which is a significant increase on the 74.06% for the same period in the previous year and only just shy of target. Again this is impacted by the patients from the Police Quarantine Hotels and the Special Health Accommodation who are on a COVID pathway when they present to ED.

Elective Surgery

There were 429 less elective surgeries performed in October 2020 when compared to the same period in the previous year, representing a decrease of 15.06%. The largest impact has been at RPA due to the ongoing need to support the COVID-19 response.

For the month of October, 100% of Category A elective surgery patients were admitted within the clinically appropriate timeframe for their surgery, 98.3% of Category B, and 93.8% 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 October there has been an 14.09% (644) 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. Royal Prince Alfred Hospital (RPA) remains at approximately 75% capacity to ensure RPA does not undo its COVID-19 preparedness. To supplement capacity at RPA, 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 and Chatswood Private. Since March 2020, the District has completed surgery for over 2000 public patients via these collaborative care arrangements. Concord Hospital also has collaborative care arrangements at Strathfield Private and Waratah Private to catch up on their surgery backlog following the concord COVID-19 cluster elective theatre closures in October.

In addition, the District has continued a targeted internal strategy to increase additional surgical activity from August 2020 to reduce the elective surgical back log at Institute of Rheumatology of Orthopaedics, Canterbury and Concord Hospitals. Over 150 additional elective cases have been completed since August 2020.

Emergency Surgery

There were 25 less emergency surgeries performed in the month of October 2020 when compared to the same month last year, representing a 1.97% decrease. This is most likely due to the increase in Elective Surgery activity.

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 6.9% decrease in the number of Hospital in the Home overnight separations in October in comparison to the same month last year, due to the impact of COVID-19. This has been substituted by an increase in virtual health care. The decrease in Hospital in the Home compared to the previous year is less than it was last month as activity in the community increases with the easing of COVID-19 restrictions.

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 21.41% variance for the month of September, excluding Dental. The significant increase in NNWAU activity is due to the Special Health Accommodation and the COVID-19 Screening Clinics including at the airport.

Stream	Target	Actual	Variation	Variation %
Acute*	42,922	39,199	- 3,724	-8.68%
ED	5,904	5,313	- 591	-10.01%
NAP	12,366	31,772	19,407	156.94%
SNAP**	3,275	3,077	- 198	-6.04%
MH Admit	4,445	4,807	362	8.14%
MH NAP	2,850	2,961	111	3.89%
Total	71,761	87,128	15,367	21.41%
Dental DWAU	19,929	20,952	1,023	5.13%
Dental NWAU#	2,502	2,631	128	5.13%
Total (NWAU)	74,263	89,759	15,496	20.87%

* 177 uncoded episodes

** 4 ungrouped episodes

NWAU=589/4691*DWAU

Clinical Costing

The District Performance Unit has submitted the final costing for the District and Network Return (DNR) Round 24.3 (July 2019 to March 2020) and Round 24.4 (April to June 2020). The data quality score in the final submission was 0.93% of episodes, which is a significant improvement on the initial submission result of 11.31%.

The DNR Audit Program has commenced, with the main focus for this Round being on the reasonableness of the average costs across various clinical areas.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of October 2020, 15.15% (2,173 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was a decrease of 330 (13.18%) patients who elected to use their private insurance compared to the same period last year and an increase of 128 (6.26%) in total separations from previous month. For the month ending October 2020, private patient conversions for facilities as compared to the same period last year were:

- RPAH – a decrease of 136 (10.82%) private patients.
- Concord – a decrease of 108 (10.49%) private patients.
- Canterbury Hospital – a decrease of 67 (41.10%) private patients.
- IRO – a decrease of 12 (42.86%) private patients.
- Balmain Hospital – an increase of 7 (28%) 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, 21% of all available single rooms were occupied by private patients and 39% of all private patients were accommodated in single rooms.

SLHD Strategic Revenue Network

Key notes:

- SLHD Strategic Revenue Network meeting was held in October 2020. MoH discussed the rollout of new financial class. Each facility presented on the respective quality framework outlining progress on revenue improvement.
- 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 89 registered users and total \$447K has been raised through the portal to date.

REDESIGN AND SERVICE IMPROVEMENT

Innovations

- As part of the measures the SLHD are taking to protect our staff, patients and community against any potential transmission of COVID-19 (coronavirus), any events which bring groups of people together, such as The Pitch, have been cancelled until further notice.
- However, due to the success of the September 2020 Virtual Pitch, the Performance Unit is planning to hold additional Virtual Pitches during 2021.

Other Projects

- Hands Up Project (RPA Hand Clinic)
 - The Project Management Plan is in the process of being signed by the Executive Sponsor.
 - The project is finalising the diagnostics phase of the project with the report scheduled to be ready by end of November 2020.
- RPAH Transfer of Care Project – ‘Good to Go, Discharge by 10 and 2’ is in the Diagnostic Phase:
 - JMO survey questions finalised
 - Allied health survey released
 - Collation of all diagnostic data collection to date to identify whether any gaps remain

- Drafting of Diagnostic Report has begun
- Met with Demand Management Unit to discuss bed demand/capacity modelling completed

HealthPathways

Content development

New content was added for vascular surgery services as well as updates and full periodic reviews of Stroke and multiple Child Health and development content. Work to develop specific new content for Prader-Willi and puberty issues continued. Further review of previously published and new content development for Intellectual Disability and access to disability services also progressed during October.

COVID content

The Sydney led Work continues to develop and lead the COVID-19 Recovery clinical pathway (publication scheduled for the 20th November 2020).

Usage of HealthPathways

Overall usage of pathways remains steady. User rates are stable and in line with recent monthly usage. User engagement data remains steady with minimal drop off for the last quarter of new users acquired at the outbreak of the COVID-19 pandemic. Sydney is one of only a handful of HP programs achieving this engagement out of the 31 Australian HP programs.

	November 1-19, 2020	October 2020	September 2020	November 1-19 2019
Users	837	1,222	1,251	754
Sessions of use	5,071	8,248	8,696	3,299
Unique Page Views	13,173	22,809	22,988	9,610
Total Page Views	16,254	28,098	28,602	11,905

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 31 October 2020 based on the District's budgeted NCoS.

For the period ended 31 October 2020, GF Expenditure was \$56.552M (8.5%) unfavourable to budget after receiving \$78.640M COVID-19 Stimulus Budget. The unfavourable result is primarily due to unfunded COVID-19 Incremental expense of \$32.032M for Elective Surgery, Clinics and Screening, COVID-19 Wards, Pathology testing, Special Health Accommodation, Cleaning, PPE, Contract Tracing and SHEOC. This is paid in arrears as reconciliation of the COVID-19 expenses is undertaken.

Excluding the impact of COVID-19, the District is \$24.520M unfavourable to YTD October 2020 Expense budget. This is partly due to the requirement to reflect 48% of the annualised budget in the period July to December 2020 and the fact that a significant number of patients from the Police Quarantine Hotels and the Special Health Accommodation come to the District under a COVID-19 pathways increasing the costs associated with each of these patients.

YTD October 2020 Expenditure increased significantly (by \$88.585M or 13.98%) compared to YTD October 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 \$180.55M YTD Oct 2020. Increase in FTE numbers and the impact of COVID-19 is contributing to these results.

GF Revenue (including Doubtful Debts) was \$11.12M (6.93%) favourable to budget for the month and \$34.994M (5.08%) favourable to YTD October 2020 budget. This favourability is primarily due to Quarantined Hotel Passenger Fees (\$45.459M). 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.

Excluding the impact of COVID-19, the District is \$0.133M unfavourable to YTD October 2020 GF Revenue budget.

For the period ended 31 October 2020, the District's GF NCoS was \$21.558M unfavourable to budget. Excluding the impact of COVID-19, the District's NCoS was \$24.653M 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 \$152M relating to unfavourable results for: Expense (\$272M) related to the management of the COVID-19 process; Doubtful Debts (\$15M); and, Own Source Revenue (\$15M) 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 (\$150M).

Despite the challenges facing the District, 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. 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 October 2020 was \$5.684M (3.23%) unfavourable to budget. The result for the month was primarily attributable to unfavourable results for Employee Related Expenses (\$6.975M), VMOs (\$0.712M), RMR (\$0.298M), Other Expenses (\$0.069M) and favourable for Goods & Services (\$2.369M). The District received \$32.077M COVID-19 Stimulus Budget for the period of September 2020 in October 2020. Excluding the impact of COVID-19, the District is \$7.523M unfavourable to the expense budget for the month of October 2020.
- YTD October 2020, GF Total Expenditure was \$56.552M unfavourable to budget, primarily reflecting unfavourable results for Salaries & Wages (\$25.329M), Overtime (\$6.647M), Annual Leave Provision (\$4.872M), Superannuation (\$5.019M), G&S Clinical (\$7.799M), G&S Admin (\$2.209M), VMO Payments (\$2.186M) and RMR (\$3.107M). Excluding the impact of COVID-19, the District is \$24.520M unfavourable to YTD October expense 2020 budget.

Revenue

- GF Total Revenue for the month of October 2020 was \$11.12M (6.93%) favourable to budget, reflecting favourable results for User Charges (\$14.147M) including Quarantined Hotel Fees

(\$14.842M), and Grants & Contributions (\$0.153M) offset by unfavourable results for Patient Fees (\$1.229M), Other Sources of Revenue (\$0.277M) and Doubtful Debts (\$1.673M). Excluding the impact of COVID-19, the District is \$0.798M unfavourable to revenue budget for the month of October 2020.

- YTD October 2020 GF Revenue was \$34.994M (5.08%) favourable to budget. This result reflects favourable variance in Quarantined Hotel Fees (\$45.459M), Grants and Contributions (\$1.271M), High Cost Drugs (\$1.359M) offset by unfavourable variances in Facility Fees (\$1.72M), Prosthesis Income (\$0.53M), Pharmacy Sales (\$0.461M), Car Park Fees (\$1.386M) and Patient Fees (\$3.528M). The unfavourability in Facility Fees, Prosthesis Income, Pharmacy Sales and Car Park Fees is predominantly due to the impact of COVID-19. Excluding the impact of COVID-19, the District is \$0.133M unfavourable to YTD October 2020 revenue budget.

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$2.002M unfavourable to budget for the period of October 2020. This result reflects favourable budget variance for Expenditure (\$0.926M) and unfavourable budget variance for Revenue (\$2.928M). The District continues to invest in its capital infrastructure.

CONSOLIDATED RESULT

For the period ended 31 October 2020, the consolidated YTD NCoS result for the General Fund and SP&T was \$23.559M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$55.626M), Doubtful Debts (\$4.72M) and Loss on Sale of Asset (\$0.04M) offset by favourable variance for Own Source Revenue (\$36.826M).

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

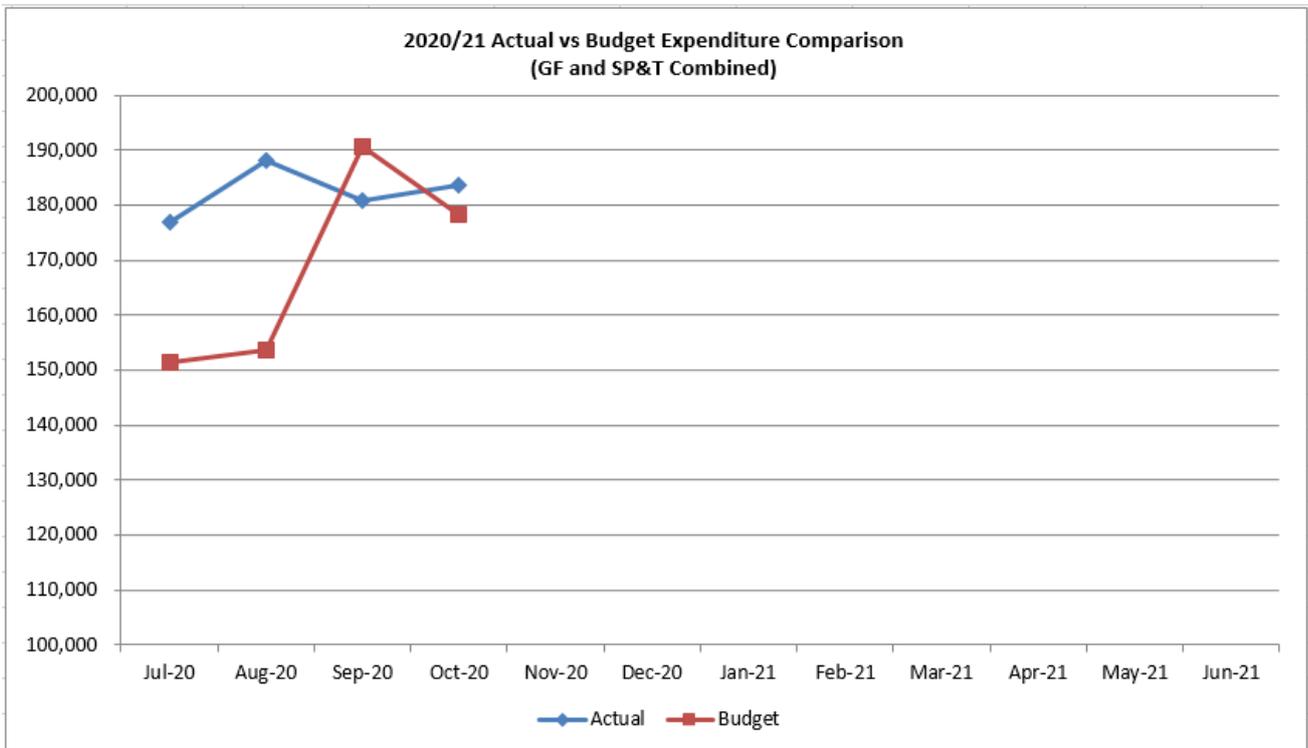
For the period ended 31 October 2020, SLHD recorded a Total Net Result of -\$13.042M which was \$23.592M (64%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD October 2020 was \$16.379M unfavourable to budget, reflecting an unfavourable budget variance for Expenditure (\$53.172M) offset by a favourable budget variance for Revenue (\$36.794M).

For the YTD October 2020, Total Direct Revenue was \$36.794M favourable to budget, comprising a favourable variance for the General Fund (\$39.754M) offset by an unfavourable variance for SP&T Fund (\$2.960M). 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 October 2020 Total Direct Expenditure was \$53.172M unfavourable to budget, comprising an unfavourable variance for General Fund (\$53.275M) offset by a favourable variance for SP&T Fund (\$0.102M). The result for the General Fund reflects unfavourable variances in Salaries & Wages (\$25.329M), Overtime (\$6.647M), On-costs (\$9.215M), VMOs (\$2.186M), Direct Clinical Operating (\$7.799M), G&S Corporate (\$2.209M), and Grants (\$0.400M) offset by favourable variances in G&S Supporting Services & Utilities (\$0.472M)

MONTHLY BUDGET PERFORMANCE

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



LIQUIDITY

The cash balance at 31 October 2020 for the SLHD Operating bank account was \$22.136M and the Operating Cash book balance was \$21.955M.

CAPITAL WORKS – SMRS PROJECTS

As at 31 October 2020 the District's Full Year Capital works budget relating to SMRS Projects is \$24.598M comprising \$6.675M of MoH funded and \$17.923M of locally funded projects.

Actual expenditure as at the end of October 2020 was \$3.823M which is on budget.

The actual and committed expenditure for MoH funded Minor Works & Equipment (MW&E) for COVID-19 was \$3.735M at the end of October 2020.

OTHER CAPITAL PROJECTS

As at the end of October 2020, the District has expended an amount of \$0.202M relating to Croydon Health Centre Intellectual Disability Unit. The total expenditure of \$0.202M was sourced from the General Fund.

CAPITAL WORKS

RPA

Parent and Baby Unit

During the month of October, excavation works to the Parent and Baby unit commenced. The existing walkway awning was completely removed and profiles and grid lines were installed for the site survey and set out.

Building 63 RPU Hot Cells

Medical gas service rough-ins and mechanical works to the hot cells continued throughout October 2020. Temporary mechanical services were also installed to create airflow within the hot cell area.

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

Construction works to the Pharmaceutical Manufacturing labs continued throughout October. The installation of wall partitions was completed and electrical and hydraulic service rough-ins were underway.

Fertility Clinic – Lactation Room and Offices Stage 1

Construction works and service rough ins were completed in October. Painting works were underway and the installation of joinery commenced.

Concord

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

Helipad Remediation Works

Concrete in the first parking bay was poured and cured in October and strip formwork was completed. The redevelopment Main Contractors commenced their drainage works around the perimeter of the helipad which needs to be completed prior to further works being undertaken.

Concord Centre for Mental Health – Security Airlocks

Concrete works were completed in October and the manufacturing of steel works commenced.

Canterbury Hospital

ED Expansion

During October works to the Triage 1 and 2 spaces as well as the reception and flight deck included the installation of door hardware and completion of service fit offs. A BCA inspection was successfully completed and commissioning works commenced.

PLANNING

Concord Hospital Stage 2 Clinical Services Plan

The Planning Unit has completed the draft of the Stage 2 Concord Hospital Clinical Services Plan. This two volume draft plan has now been issued to key stakeholders in the District and the Hospital for comment.

The Plan proposes a number of major new future-oriented acute care models and service developments to support improved integration, improved patient flow, reduced lengths of stay and improved patient and staff experience. Components of this redevelopment include:

- A major Ambulatory Care Precinct
- Redesigned and upgraded critical care services - Emergency Department, ICU and Theatres
- Upgraded core diagnostic and procedural services – Imaging (including Neuro-Imaging), Pathology, Cardiovascular, Genomics, Neurosciences and Respiratory
- Additional inpatient acute care capacity
- Capacity for more complex surgery and more minimally invasive surgeries and procedures
- A new Maternity service
- A new Paediatric service
- A new Special Care Nursery
- Enhanced health and medical research, innovation and education, fully integrated with clinical care.

Comments on the draft plan are being logged and will be discussed at the Executive Services Committee.

Future Health Strategy

The Planning Unit developed the SLHD submission to the Ministry of Health on the NSW Health Future Health Strategy. The submission outlines the important issues and priorities outlined in the SLHD Strategic Plan and in related plans and incorporates the outcomes from the four executive/staff consultation forums held across SLHD to comment on the draft themes of the Strategy.

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

The Planning Unit is working with Sydney Research, The Ministry and the Office of Health and Medical Research to deliver a Think Tank on Industry engagement in the Camperdown precinct. This Think Tank will be held on the 15th December and will include a range of clinicians, researchers and academics, encouraged to provide blue sky ideas about industry engagement.

SLHD Surgical Services Plan

The Planning Unit, together with the District Director of Surgery has drafted planning papers for:

- Trauma, Rehabilitation and Geriatrics
- Urology
- Gynaecology

These papers will support the overall District Surgical Services Strategy.

Green Square HealthOne- RPA HealthOne, Green Square

Integrated Care with the Planning Unit and Health Infrastructure 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:

- Functional Brief Workshop
- Risk Workshop
- Activity forecasts and projections
- Workforce Plan with a view to facilitating the Financial Impact Statement
- Academic Primary Care Users Group to support the models of care.

Workforce and Education Strategic Plans

The Planning unit continues to work with the District Workforce Unit and the CEWD to scope their processes to inform their forthcoming Strategic Plans including the on-line consultation process, to commence in early February.

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.

Two (2) studies have progressed to the full application stage in Round 2 of the NSW Health COVID-19 Research Grant Program. Both applications were submitted to the NSW Office of Health and Medical Research (OHMR) on 30 October 2020, with outcomes expected to be announced in late 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	\$453,488

National Clinical Trials Governance Framework

The Australian Commission on Safety and Quality in Healthcare has selected SLHD as one of 14 sites to participate in the pilot program of the National Clinical Trials Governance Framework (NCTGF). The purpose of the 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 is represented 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, necessary expertise and resourcing required to undertake the pilot. Sydney Research has also been nominated to participate in the RPA Hospital Facility Working Party, which convened on 12 November 2020 which will review, coordinate and implement the requirements of the NCTGF as part of the pilot.

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

Board Report

Dr McDonald	Andrew	Enhancing Integration with primary care of patients with severe mental illness using an Online Shared Care Plan and Telehealth Solution	\$998,755
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A further four (4) full applications with SLHD as a Partner Organisation were endorsed by the Chief Executive, SLHD and submitted on 20 October 2020.

Host LHD	Project title	Funding Requested
HNELHD	How does long-acting depot buprenorphine impact the high-risk post-release period for people with opioid dependence?	\$798,652
MLHD	"DANMM that's good!" Implementing and evaluating the Deadly Aboriginal and Torres Strait Islander Nursing and Midwifery Mentoring (DANMM) Program	\$375,475
NSLHD	Mobile Health Technology Solutions to Expand Pulmonary Rehabilitation Services for Chronic Obstructive Pulmonary Disease (COPD): The m-PRTM Implementation Project	\$920,878
WSLHD	Preventing cellulitis: Healthy Legs Program (HeLP)	\$990,071

Both host and partner full applications were reviewed by the Sydney Research team and certified by the Chief Executive, SLHD. Outcomes will be 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 his 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 projects post-completion of TRGS funding 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.

OHMR – Embedding Quality Research

The Embedding Quality Research (EQR) Steering Committee convened on 2 October 2020. Prof Christine Jorm, Director, NSW Regional Health Partners, 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.

The Embedding Quality Research (EQR) Working Group met on 7 October 2020 with Dr Angela Todd and Ms 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 NSW OHMR Executive Director met with the Sydney Research and SLHD Research teams on 28 October 2020 to discuss the transition between the REDCap and REGIS platforms to facilitate the District's reporting requirements on research. It was agreed that the SLHD Research Offices and Ethics Committees would use REGIS for all reporting from January 2021.

Digital Health Cooperative Research Centre (DHCRC)

The Sydney Research team and Mitchell Burger, Director, Strategy, Architecture, Innovation and Research, SLHD ICT Services, are preparing a consolidated proposal of DHCRC projects planned for SLHD. Once this document has been finalised, the Chief Executive, Executive Director, Sydney Research, Director, SLHD Research and Chief Information Officer will consider and determine the organisational priorities for digital health research and appropriate allocation of resources.

DHCRC have partnered with RMIT Online to develop three, virtual micro-credentialed courses on digital health transformation, including 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 and Sydney Research nominated the following three staff members and Sydney Research negotiated for all three to be 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 Hospital

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 Ellis Longhurst, Health Information Manager, Clinical Governance Unit, accepted into the course.

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 research conducted across and within SLHD. With oversight from Executive Director Sydney Research and the Sydney Research team Dr Karena Conroy and Adj A/Prof Greg Fairbrother are coordinating the following three (3) active initiatives:

Measurement tools

The Working Group has identified a reporting gap in identifying consumer involvement in research across and within SLHD. To address this gap, a modification of the state-wide Research Ethics Governance Information System (REGIS) is being investigated with the NSW OHMR to record consumer involvement as part of already established projects registration processes. A sub-group comprising representatives from the SLHD Research and Sydney Research teams, along with consumer representatives met on 24 September 2020 to discuss the key parameters required to effectively measure consumer involvement in the design and conduct of research. The drafted parameters were submitted to OHMR on 29 September 2020 for feedback and clarification of reporting outcomes. The sub-group is currently working on developing a mock report to identify key reporting measures, which will be submitted to OHMR for consideration when finalised.

Case Examples

The PFCC Research Working Group agreed that demonstrating best practice would be valuable for both researchers and consumers interested in being involved in research, with the potential to inform

the development of a District-wide policy for consideration. The sub-group convened on 22 September 2020 to discuss the best approach in developing a case example of consumer involvement in research and its key outcomes. Since this meeting, the sub-group have developed a proposal with potential research questions and methodologies being developed to assist case development. An option currently being canvassed is an ethnographic study focused on 'How does a successful consumer-researcher engagement process work, in real time?' that could be investigated with the Sydney Health Partners collaborative cellulitis project and consumer reference group led by SLHD. A meeting is to be scheduled to finalise the approach for this study.

Organisational Support

A/Prof Fairbrother, Dr Conroy and Ms Vogelzang met with the Consumer and Community Participation (CCP) team on 30 October 2020 to discuss the most effective way to involve consumer representatives across the PFCC Research Working Group initiatives. It was agreed that a SLHD Research Consumer Reference Group, chaired by A/Prof Fairbrother and consisting of consumer representatives from across the facility networks, should be established to support the project and SLHD research in the long-term. The SLHD Research Consumer Reference Group would work closely with and provide guidance to the PFCC Research Working Group and report to the SLHD Consumer and Community Advisory Council. A/Prof Fairbrother and Dr Conroy are developing a presentation with the CCP team that will be used to introduce the project and intentions of a reference group to the SLHD Consumer Network.

Franklin Women

Ms Rina Ward attended the 2020 Franklin Women Mentoring Program Grand Finale celebration on 5 November 2020. As part of the finale celebration, the Franklin Women team debriefed on the 2020 program and provided each partner organisation with formal evaluation report. Despite the impact of the COVID-19 pandemic and virtual delivery of the program, this report demonstrated that the program continues to have a positive impact its participants with 88% of participants stating that the program added value to their personal leadership or career development.

SLHD participated in the Franklin Women Academic Partners Leaders Brunch 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 were Adj A/Prof Vicki Taylor, Executive Director, Sydney Research, Ms Gina Finocchiaro, Director, Workforce and Corporate Operations and Mr Ross Sinclair, Executive Director, Finance.

Sydney Health Partners (SHP)

Prof Don Nutbeam officially commenced as the new Executive Director of Sydney Health Partners on 5 October 2020. 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.

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

SHP Implementation Science Grant Scheme

- On 13 November, Sydney Research and the Chief Executive, SLHD, reviewed four shortlisted submissions in the 2020 SHP Implementation Science Grant Scheme. Of the total 37 applications received by SHP, 15 were submitted by the District, with 4 recommended for further consideration.
- The District has confirmed a one-off contribution to the following projects:

Board Report

Lead Investigator	Project title	Funding Requested
Prof Chris Semsarian	A web-based intervention to support families following sudden cardiac death in the young	\$25,000
A/Prof Jane Beith	Implementing an oncologist-delivered intervention for fear of cancer recurrence: Adoption, costs, barriers and facilitators	\$25,000
Dr John Cullen	HIPFFIT: HIP Fracture and Frailty Improvement Translational project	\$25,000

- Support for one-off joint funding with the Sydney Cancer Institute is being sought for the following project:

Lead Investigator	Project title	Funding Requested
Dr Marion Dimigen	Medical Imaging for COVID-19 Efficacy (MICE)	\$24,551

- SHP will be formally notified of the funding contributions at the SHP Board meeting on 7 December 2020. A condition of funding will be the delivery of progress and final reports to Sydney Research, as well as communication and dissemination of findings as appropriate to District and external stakeholders.

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 23 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

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.

The Sydney Research Council met virtually on 27 October 2020, where Prof Ron Trent provided a presentation on the recently established SLHD Institute of Precision medicine and Bioinformatics and background on the Institutes origins, goals and functions. Prof Tim Lambert provided a complementary presentation on the translational aspects of precision therapeutics, which emphasised the value of the Institute and its future impact.

Dr Pamela Garrett also provided a presentation on the proposed Camperdown Biotechnology Hub, which will form part of the greater Camperdown-Ultimo Collaboration Area and Camperdown Innovation Precinct. As part of this presentation, Dr Garrett outlined the vision and key priorities for the Hub, including a mass transit solution for Camperdown and a space that fosters industry partnerships and collaboration.

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 was held on 29 October 2020 that involved the Board members and Directors from the three partnering MRIs - the Centenary, Heart Research and Woolcock Institutes - as well as representatives from SLHD, the University of Sydney and EY, who have been engaged to progress planning work on this key initiative. This meeting was an opportunity for all partners to further engage with the vision and current strategy for the SBA, the CHERP precinct, RPA Redevelopment and USyd Campus planning and establish next steps to progress the full business case for submission to the NSW Minister of 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, RPA Redevelopment, 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 Pharma 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 partnership opportunities with Cicada Innovations, MTPConnect and IDE Group
- Contributing reviewer to SLHD Virtual Mega Pitch event on 25 September 2020, reviewing 23 applications for innovations to enhance health service delivery and workforce capacity.
- Researcher capacity building with the Train the Trialist education program, a submission to The Pitch innovation challenge in September 2020.
- Contributing reviewer to SLHD Quality Awards event on 5 November 2020, reviewing applications for 12 District awards for excellence in service or innovation.
- Coordination of rpavirtual presentation at EY Smart Health Collaborative Event.
- Progressing the evaluation of the inaugural Biodesign Sydney program and planning for 2021
- Meeting with Western Health & Victorian Health and Human Services Building Authority in relation to New Melton Hospital to share the rpavirtual experience.
- Representation at the ACTA AGM and DHCRC AGM, both to be held on 26 November 2020.
- Commencement of permanent recruitment of the Executive Officer, Sydney Research position, which provide stability, skill and knowledge retention, workforce capacity building, as well as leave cover to ensure business continuity to support Sydney Research strategic priorities.

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 805 subscribers @SydneyResearch currently has 1,037 followers on Twitter

COVID-19 UPDATE

SLHD has undertaken the following activities in November 2020:

Facilities

- Maintained Contact Tracing capability through the SLHD Public Health Unit for locally acquired cases. Expanded ICU capacity at RPA, Concord and Canterbury Hospitals in the event of surge in demand due to an outbreak.
- Maintained Renal Dialysis surge capacity to match projected need in the event of an outbreak developed.
- Continued Staff and Visitor Screening Stations to check all people entering the health facilities established at all sites.
- Continued the roll out of the staff and visitor screening app to allow registration of all people entering our facilities in accordance with the current COVID-19 MoH guidelines.

Special Health Accommodation

- Continued to provide Special Health Accommodation for incoming international passengers under the Public Health Order requiring medical supervision.
- Continued to provide accommodation for community transmission cases who are unable to safely self-isolate in the home environment.
- Public Health (COVID-19 Border Control) Order 2020 NSW No.2 revoked effective 0001hrs 23 Nov 2020. 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 provided whilst order in force.

Airport and XPT (Central Station)

- Continued the COVID-19 Testing team to support the SESLHD Screening Team at the international airport terminal.
- Continued the COVID-19 Screening, Testing team and Health Border Control team at the Domestic Airport (T2 & T3) to screen and validate permits for all passengers alighting from flights originating from Victoria. Screening against the Public Health (COVID-19 Border Control) Order 2020 NSW No.2 completed at midnight 22 Nov 2020.
- Continued the COVID-19 Screening, Testing team and Health Border Control team at the Central Train Station to screen and validate permits for all passengers alighting from trains originating from Victoria. Screening against the Public Health (COVID-19 Border Control) Order 2020 NSW No.2 completed at midnight 22 Nov 2020.
- Continued the COVID-19 Screening, Testing team and Health Border Control team at the Domestic Airport (T2 & T3) to screen and validate permits for all passengers alighting from flights originating from Victoria. Screening against the Public Health (COVID-19 Border Control— South Australia) Order 2020 commenced 19 Nov 2020.

COVID-19 Drive Through and Walk-in Clinics

- Continued the 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 1,000 - 3,000 people per day.
- Continued the facility based COVID-19 Screening Clinics established at RPA, Concord and Canterbury Hospitals currently seeing between 300-600 people per day.
- Continued COVID-19 Screening Clinic processes and testing of these in areas of special need such as social housing areas like Waterloo, Riverland etc.

Tiger Team and Flying Squad

- Continued the use of the Special Flying Squad Teams to support community testing, Special Health Accommodation and other sites and support to facilities and services in COVID-19 operations.
- Continued the use of the special purpose vehicle to run mobile COVID-19 Testing Clinics.

SLHD Public Health Unit

- Continued the COVID-19 Hotline to provide results to people following COVID-19 swabbing.
- Continued the expansion of Environmental Health Officer inspections of food outlets and commercial businesses with SLHD to ensure they have and comply with appropriate COVID-19 Safety Plans.

LHD and MoH initiatives and support

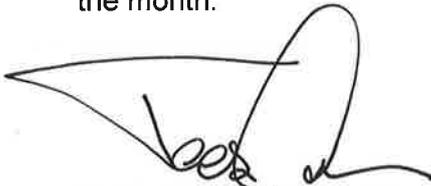
- Continued to support to the MOH with staff to work in the State Health Emergency Operations Centre (SHEOC).
- Central coordination of COVID-19 activities through the SLHD Operations Centre, central coordination of supply and ordering of PPE, equipment and other issues.
- Continuation of Fit Testing for staff from high risk areas, note this is on top of existing Fit Checking that currently occurs.
- Continued support and 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.
- Continued 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).

Interagency

- Continued to hold regular meetings with Emergency Management representatives from LGAs (City of Sydney, Inner West, Burwood, Strathfield, Canada Bay and Canterbury Bankstown Councils).
- 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).
- Continued the Interagency Governance Committee to support

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



Dr Teresa Anderson AM
Chief Executive

Date: 14.12.20