
Sydney Local Health District

Meeting One Hundred and Nine of the Board

Date: Monday 19 April 2021
Time: 9.00am
Venue: Boardroom, Level 11, KGV Building
Chair: Ms Victoria Weekes, Acting Chair

1. Present and apologies

Ms Victoria Weekes, Acting Chair
Dr Thomas Karplus, Member
Mr David McLean, Member
Ms Ronwyn North, Member
Ms Frances O'Brien, Member
Ms Kerry-Anne Hartman, Member
Mr Richard Acheson, Member
Professor Paul Torzillo AM, Member
A/Professor Christine Giles, Member

Apologies

Dr Teresa Anderson, AM, Chief Executive
Dr Mary Haines, Member

In attendance

Dr Tim Sinclair, Executive Director of Operations, SLHD
Dr Alicja Smiech, Chair, Medical Staff Executive Council (Departed 10.55am)
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 nine 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 22 March 2021

The minutes of the Board Meeting held on Monday 22 March 2021 were moved and seconded as a true and accurate record of the meeting with two minor amendments.

The Chair signed the minutes.

4.2 CE Report – March 2021

The Chair declared that the CE Report for March 2021 was ready for publication.

Presentations:

1. Vaccination Hub

Dr Tim Sinclair presented on the planning for a Vaccination Hub.

The presentation outlined the detailed planning of the Vaccination Hub, the physical set up and management structure, and risk management. The Hub management structure is the District's responsibility and staffed by personnel from the District, and the Hub's operational staffing are being sourced from Districts across the state, which will operate under the management direction of the District. All staff are being trained as required by the Health directions and multiple run throughs are being undertaken before going live to ensure rigour of systems and processes. The Board discussed the significant ongoing support from the District for the State's response to COVID, the extent to which it was being appropriately compensated and how impacts to the District's businesses as usual operations are being managed

The Chair thanked Dr Sinclair for the presentation.

5. Matters arising from the previous minutes

5.1 Action sheet

The Board received and discussed the action list including:

- The Board Self-Assessment Survey was circulated to Board Members. The outcome of the survey will be discussed at the next Board Meeting.
- The paper relating to the District's Risk Management Plan for Quarantine Hotels is being updated and will be provided at the next meeting.
- A letter, together with a proposal has been sent to the Secretary from the Board concerning the use of the Concord Hospital redevelopment contingency funds. A copy of this correspondence is to be provided to the Board. This agenda item can be removed from the action list.
- A letter of congratulations has been sent from the Board to the leads in the National Centre for Veterans' HealthCare (NCVH) at Concord Hospital. A copy of this

correspondence is to be provided to the Board. This agenda item can be removed from the action list.

- A letter of congratulations has been sent to the team on the outcome of the National Clinical Trials Governance Framework (NCTGF) at Royal Prince Alfred Hospital. A copy of the abovementioned correspondence is to be provided to the Board. This agenda item can be removed from the action sheet.
- Executive Summary now includes dot points in the HAC Committee Report with key key management insights. This agenda item can be removed from the action list.

6. Patient Story

Dr Sinclair provided a verbal report from a cardiothoracic patient at RPAH outlining his positive experience from admission to discharge. This story is a good example of our patient and family centred care approach.

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 2021

The Board received and noted the Board Calendar for 2021.

8. Chair's Report

This agenda was deferred.

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 January 2021.
- Bed Block for mental health patients in the Emergency Departments continues to be a challenge. A copy of the brief sent to the Minister's Office is to be forwarded to the Board.
- Premium staff usage has decreased for Medical for February 2021 when compared to the same period last year by -2.05. Premium staff usage has increased for Nursing and Allied Health for February 2021 compared to the same period last year by 3.84 and 0.14 respectively.

Minutes

- There were 12,852 attendances to the District's Emergency Departments in February 2021, which is a 10.92% decrease from 14,427 when compared to the same month last year. YTD Emergency Department attendances have decreased by 10.24% to 105,870, when compared to the same period in the previous year. YTD February case weighted attendances have decreased by -8.73%, 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.
- There were 252 less elective surgeries performed in February 2021 when compared to the same period in the previous year, representing a decrease of 4.70%.
- Private Hospital Contracts end 30 June 2021.
- Elective Surgery catch-up is still on track.
- It is to be noted there has been no impact or adverse events on Clinical Care during COVID-19.
- Private Health Insurance usage for the month of February 2021, 16.68% (2,066 separations) of all patients discharged by SLHD facilities were classified as privately insured.
- HealthPathways have included new COVID-19 vaccination guidelines and resources have been developed at a state-wide HP level and added to the site. This information provides General Practice with information on becoming a vaccination service, accreditation, practice guidelines and referral points for non-participating practices.
- For the period ended 28 February 2021, GF Expenditure was \$55.225M (3.99%) unfavourable to budget after receiving \$179.39M COVID-19 Stimulus Budget. The unfavourable result is primarily due to the timing of the COVID-19 expense adjustment of \$45.669M for Elective Surgery, Clinics and Screening, COVID-19 Wards, Pathology testing, Special Health Accommodation, Cleaning, PPE, Contract Tracing and SHEOC.
- Excluding the impact of COVID-19, the District is \$9.556M unfavourable to YTD February 2021
- Health Funds have reduced single room bed day rates. Furthermore, the impact of the additional \$12.594M full-year OSR budget allocated by MoH to the District has resulted in an \$8.396M unfavourability to YTD February 2021 OSR budget.
- Doubtful Debts related to Quarantined Hotel Passenger Fees amounts to \$9.856M YTD February 2021.
- ICON Radiotherapy has been the successful tender for the Radiation Oncology Service at Concord.
- The information on Research was noted. A/Professor Giles sought the support and recommendation from the Board for the preparation of a short paper summarizing key performance indicators on the economic and community benefits of investment in research to inform the development of a number of indicators to be included in the current suite of Research KPIs. This research project was fully supported by the Board. Further, it was agreed that latest 3 year data set of research KPIs would be analysed and reported in table form, with the assistance of the Performance Unit.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – February 2021

The Board received, read and noted the SLHD Board Reporting Pack for February 2021.

9.1.2 Selected Performance Indicators – February 2021

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.

9.1.5 HAC Committee Report

The Board received, read and noted this report.

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 January 2021 – March 2021 is due in May 2021.

(ii) Complaints Management

The Board received, read and noted this report.

(iii) SLHD Risk Register

The Board noted this report is due in June 2021.

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

The Board received, read and noted this report for the period 1 December 2020 - 11 March 2021.

9.6 Facility Reports – February 2021

(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. The Board discussed the ongoing challenges faced by Mental which had further increased in recent months. The Board re-iterated its support for the various proposed initiatives to address the challenge in particular the expansion of the District's step-down mental health facilities, which have proven so successful and safe with the Eureka program. It was noted that the primary barrier to this initiative is securing a suitable location from the State.

(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.

Minutes

- (xi) SLHD Special Health Accommodation

The Board received, read and noted this very comprehensive 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. The Board requested further information on the adverse events being reported due to the implementation of the vaccination program.

- (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

Nil to report

11. Board Committee reports / minutes

11.1 Finance, Risk and Performance Management Committee

The Board received, read and noted the minutes of the meeting held on 8 March 2021.

11.2 Education and Research Committee

The Board received, read and noted the minutes of the meeting held on 15 March 2021.

11.3 Communications Committee

The Board received, read and noted the minutes of the meeting held on 6 April 2021. Mr McLean advised the Board of the barriers associated with donations and fundraising and the need to seek the service of a professional philanthropist

11.4 Audit and Risk Committee

The Board received, read and noted the minutes of the meeting held on 25 March 2021.

Minutes

11.5 Health Care – Clinical Quality Council

The Board received, read and noted minutes of the meeting held on 24 March 2021.

11.6 Health Care – Clinical Council

The Board noted the next meeting is to be held on 26 May 2021.

11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 7 May 2021.

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

The Board noted the meeting was held on 2 March 2021.

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board received, read and noted minutes of the meeting held on 30 March 2021.

11.10 Organ Donation for Transplant – Quarterly Report
(January 2021 – March 2021)

The Board noted this report for the period January 2021 – March 2021 is due in May 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 12 March 2021.

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 9 February 2021.

12.3 Surgical Demand Committee (bi-monthly)

The Board noted the next meeting is to be held on 21 April 2021.

12.4 Finance Leaders Forum (previously Revenue Enhancement Development Committee)

The Board received, read and noted the minutes of the meeting held on 17 February 2021.

12.5 NSW Health / SLHD Performance Review Meeting

The Board received, read and noted the minutes of the meeting held on 5 March 2021.

12.6 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting held on 23 March 2021.

12.7 Major Procurement, Assets and Imaging Steering Committee

12.5 NSW Health / SLHD Performance Review Meeting

The Board received, read and noted the minutes of the meeting held on 5 March 2021.

12.6 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting held on 23 March 2021.

12.7 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted the minutes of the meeting held on 9 March 2021.

12.8 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the next meeting is to be held on 20 April 2021.

12.9 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 17 March 2021.

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

The Board received, read and noted the minutes of the meeting held on 1 April 2021.

12.11 Security and Violence Prevention Committee

The Board received, read and noted the minutes of the meeting held on 24 February 2021.

13. Matters for noting

13.1 Letter of Appreciation

The Board received, read and noted this correspondence.

14. Other Business

Nil to report

15. Next Meeting

The next meeting is to be confirmed for Monday 17 May 2021 at 9.00am.

The meeting closed at 11.00am.



Chair

17 May 2021
Date

Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board April 2021

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 February.

Mental Health Readmissions within 28 days have increased for the month of December 2020 to 17.5% in comparison to 13.7% for the same period in the previous year. The District continues to focus on strategies to improve mental health performance.

The District continues to perform well in relation to unplanned readmissions within 28 days of separation at 5.9% for the month and 5.2% YTD January, which is slightly below the State rate of 6.3% for the month and 5.7% YTD January. Unplanned Emergency Representations (same ED within 48 hours) were 4.7% for the month and 4.6% YTD February 2021, which is slightly above the State rate of 4.6% for the month and slightly above the state rate of 4.4% for YTD February 2021.

The District remains under the benchmark (2.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI) with a result of 0.9 per 10,000 bed days for the month of January 2021, representing an improvement compared to November 2020 (1.3/10,000 bed days). There was 0 Central Line Associated Bloodstream (CLAB) infections during January 2021. 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 10 of the reported Hospital Acquired Complications (HACs) for the 12 month period January 2020 – December 2020. One HAC is performing within the acceptable tolerance range and the other 3 HACs are underperforming.

Fall related injuries has a rate of 7.2 per 10,000 episodes, which is slightly above the target of 5.7. For the 12 month rolling period of January 2020 – December 2020, this represents an increase of 15 falls.

Hospital acquired persistent incontinence has a rate of 6.0 per 10,000 episodes, with a target of 5.8. For the 12 month rolling period of January 2020 – December 2020, this represents an increase of 3 instances of hospital acquired persistent incontinence.

Hospital acquired endocrine complications has a rate of 40.4 per 10,000 episodes, with a target of 29.7. For the 12 month rolling period of January 2020 – December 2020. This represents an increase of 23 instances of hospital acquired endocrine complications.

Hospital acquired birth trauma has a rate of 122.3 per 10,000 episodes, against a target of 98.8. For the 12 month rolling period of January 2020 – December 2020, this represents an increase of 15 instances of birth trauma.

3rd and 4th degree perineal lacerations has a rate of 374.5 per 10,000 on a target of 384.1. For the 12 month rolling period of January 2020 – December 2020, the number of instance of perineal lacerations decreased by 33. There has been significant focus by the Womens, Neonatology and Paediatric Stream on strategies to reduce this HAC.

Work continues to improve the District's performance in relation to all HACs, with facilities/services providing monthly updates to their HAC Action Plans, which is overseen by the SLHD HAC Steering Committee. District HAC Operational Coordinators and Clinical Leads for each of the HACs have been appointed to further support facilities and services in the development of strategies to reduce HACs District wide.

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 February 2021 when compared to the same period last year by -2.05. Premium staff usage has increased for Nursing and Allied Health for February 2021 compared to the same period last year by 3.84 and 0.14 respectively.

The District is continuing to work 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. One of the current focuses is on increasing the deployment of nursing, medical and administration staff to support the COVID-19 Vaccination Program in NSW.

Activity

There was an decrease of 6.53% in the number of separations (12,864) for the month of February 2021 when compared to the same period last year. YTD February separations have decreased by 7.33%. This is consistent with the decrease in elective surgery and reduced inpatient activity associated with COVID-19. In February 2021, the District's occupancy rate decreased by 0.51%, to 86.90% when compared to the 87.41% in February 2020.

There were 12,852 attendances to the District's Emergency Departments in February 2021, which is a 10.92% decrease from 14,427 when compared to the same month last year. YTD Emergency Department attendances have decreased by 10.24% to 105,870, when compared to the same period in the previous year. YTD February case weighted attendances have decreased by -8.73%, 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 0.32% decrease in ETP in the month of February 2021, to 64.75%, when compared to the same month in the previous year. YTD February there has been a slight increase (0.24%) in ETP to 68.53%. Admitted ETP was below target (50%) for the month at 44.33%, which is a 2.39% increase on the same period in the previous year.

Transfer of Care

The District is performing below the transfer of care (TOC) target (90%) for February 2021, with 82.52% of all patients transferred from ambulance to our emergency departments in 30 minutes or less.

ED Triage

The District continues to perform well in relation to the triage targets and achieved Triage Categories 1, 4 and 5 for the month of February. Triage Categories 2 and 3 performance continues to exceed the previous targets, however are below the revised targets at 84.33% (target 95%) and 78.08% (target 85%) respectively.

Elective Surgery

There were 252 less elective surgeries performed in February 2021 when compared to the same period in the previous year, representing an decrease of 4.70%.

For the month of February, 100% of Category A, 100% of Category B, and 97.06% of Category C elective surgery patients were admitted within the clinically appropriate timeframe for their surgery. 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. YTD February there has been an 8.33% (764) 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. Additional agreements have been signed with St Luke's Private and St George Private.

In addition, the District is continuing 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 55 less emergency surgeries performed in the month of February 2021 when compared to the same month last year, representing a 4.7% decrease.

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 33.7% decrease in the number of Hospital in the Home overnight separations in December 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 20.6% variance for YTD February, excluding Dental.

Stream	Target	Actual	Variation	Variation %
Acute*	109,501	101,525	- 7,976	-7.28%
ED	15,981	15,056	- 925	-5.79%
NAP	30,866	78,458	47,592	154.19%
SNAP**	8,475	7,330	- 1,146	-13.52%
MH Admit***	11,659	11,278	- 381	-3.27%
MH NAP^	6,121	6,575	454	7.42%
Total	182,603	220,221	37,618	20.60%
Dental DWAU	40,758	40,101	- 657	-1.61%
Dental NWAU#	5,118	5,035	-82	-1.61%
Total (NWAU)	187,721	225,256	37,535	20.00%

* 453 uncoded episodes

** 72 ungrouped episodes

*** 12 uncoded episodes

^ January data

NWAU=589/4691*DWAU

Clinical Costing

The Round 24 costing result has been loaded into the ABM Portal. The District had an average cost per NWAU of \$5,016 in comparison to the State average of \$5,119.

The District Costing Team is progressing the darft submission for Round 25.1, with the following improvements currently underway:

- Implemetation of a S100 high cost drug patient level feeder from iPharmacy
- Testing of an Operating Theatre medical and surgical supplies patient level feeder from hTrak, with the aim to implement in R25.2

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of February 2021, 16.68% (2,066 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was a decrease of 233 (9.98%) patients who elected to use their private insurance compared to the same period last year and an increase of 61 (3.04%) in total separations from previous month.

For the month ended February 2021 conversions for facilities as compared to the same period last year were:

- RPAH – a decrease of 162 (13.48%) private patients.
- Concord – a decrease of 42 (4.21%) private patients.
- Canterbury Hospital – a decrease of 9 (6.43%) private patients.
- IRO – a decrease of 13 (39.39%) of private patients.

- Balmain Hospital – a decrease of 7 (38.88%) private patients.

Single Room Usage

For the month of February 2021, 9.02% of patients were flagged as infection control across the District.

For the month, 20% of all available single rooms were occupied by private patients and 33% of all private patients were accommodated in single rooms.

SLHD Strategic Revenue Network

Key notes:

- SLHD Strategic Revenue Network meeting was held in February 2021. Discussions about the rollout of the new financial class was discussed. Each facility discussed their respective revenue strategies and performance.
- Clinician Billing Portal (CBP) is progressing with RPAH, CRGH and TCH working to identify and sign up staff specialists to bill through the application. There are currently 110 registered users and total \$643K has been raised through the portal to date.

REDESIGN AND SERVICE IMPROVEMENT

Innovations

The Pitch

- The next round of the Pitch is being planned for 4 June 2021.
- Finalists and the panel will meet and present from the Kerry Packer Education Centre with the event broadcasted via Zoom.

Projects

- Hands Up Project (RPA Hand Clinic)
 - The Project Management Plan is in the process of being signed by the Executive Sponsor.
 - Project Diagnostic Report is being reviewed based on sponsor feedback.
 - Solutions Workshops are in the process of being conducted for all staff
- RPAH Transfer of Care Project – ‘Good to Go, Discharge by 10 and 2’
 - Diagnostic report endorsed by Whole of Health group & awaiting EDO review/sign off.
 - Planning for solutions workshop
- Diabetes Model of Care Redesign
 - Project Management Plan signed off
 - Key stakeholder interviews completed (x20 in total with representation across RPAH/CRGH/TCH/Community)
 - Workshop being planned to present back interview findings & define a new model of care

Accelerating Implementation Methodology (AIM):

- The 2-day AIM course planned for 18-19 February went ahead successfully with a total of 15 participants who provided positive feedback upon completion.
- Remaining dates for the AIM course in 2021 are:
 - 19-20 April
 - 24-25 May
 - 6-7 September
 - 15-16 November

HealthPathways

Content development

New COVID-19 vaccination guidelines and resources have been developed at a state-wide HP level and added to the site. Information provides General Practice with information on becoming a vaccination service, accreditation, practice guidelines and referral points for non-participating practices.

Work continues on the reorganisation and identification of content across the HP community resulting in the reclassification of previously published content. As a result the overall completed pages number has dropped, as anticipated, along with the number of pages still to localise to Sydney relevant versions. A significant number of un-required pages will also be removed as identified by our current non-clinical RMO position who is leading this body of work. The program team is waiting for the conclusion of the RPA Hands Unit re-design solutions phase to commence development of specific hand condition, plastic surgery pathways which will align with the planned build of wound care pathways. A specific primary and secondary care MDT wound care workgroup will occur after Easter 2021.

Usage of HealthPathways

Overall usage of pathways continues to grow, session and page view numbers are up compared to previous quarters. The overall spike of sessional use that occurred across the majority of HealthPathways regions last March and April is being maintained locally; however, unfortunately there have been reductions occurring at other regions such as Hunter New England and Tasmania. Based on analysis of sessions of use per regional population count, after 6.8 years of operation Sydney is the lead Australian HP site in terms of use as well as the amount of locally relevant content.

	February 1-21 2021	January 2021	December 2020	February 1 - 21 2020
Users	1,138	1,374	1,051	1,373
Sessions of use	7,256	9,154	6,555	5,291
Unique Page Views	19,393	25,216	18,211	14,774
Total Page Views	24,540	32,014	23,064	18,655

SLHD e-Referral Project

Service recruitment

Planning for the implementation e-Referral at Royal Prince Alfred Hospital continues. The Project Team have commenced Head of Department engagement activities in collaboration with the Ambulatory Care Business Unit. 15 services are now anticipated to go live with e-Referral as part of the September 2021 roll out.

Service	Deployment	Stage
Haematology	October 2018	Live
Rheumatology	June 2019	Live
Osteoporosis and Community Paediatrics	September 2019	Live
COVID-19 Monitoring – RPA Virtual	May 2020	Live
Haematology, Osteoporosis (ORP) , Rheumatology (OACCP) – Canterbury Hospital	August 2020	Live
Concord Hospital Phase 1 (22 services)	October 2020	Live

Concord Hospital Phase 2 (6 services)	TBC 2021	Design
Direct Access Colonoscopy and Inflammatory Bowel Disease – Royal Prince Alfred Hospital	November 2020	Live
Podiatry - SLHD	November 2020	Live
High Risk Foot Service and Palliative Care – Concord Hospital	November 2020	Live
Andrology – Concord Hospital	February 2021	Live
Urology – Royal Prince Alfred Hospital	TBC 2021	Design
Pelvic Mesh – Royal Prince Alfred Hospital	TBC 2021	Design
Orthopaedics – Royal Prince Alfred Hospital	TBC 2021	Initiation
Royal Prince Alfred Hospital (12 services)	September 2021	Initiation

Platform development

Active Directory integration work continues with support from SLHD ICT. Currently awaiting integration work to be completed by eHealth NSW.

General Practice:

- Significant increase observed in the number of referrals received during February 2021.
- 60% of General Practitioners using HealthLink to refer to SLHD have referred more than once.
- A total of 705 referrals have been received.

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

GENERAL FUND (GF)

The 2020/21 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 28 February 2021 based on the District's budgeted NCoS.

For the period ended 28 February 2021, GF Expenditure was \$55.225M (3.99%) unfavourable to budget after receiving \$179.39M COVID-19 Stimulus Budget. The unfavourable result is primarily due to the timing of the COVID-19 expense adjustment of \$45.669M for Elective Surgery, Clinics and Screening, COVID-19 Wards, Pathology testing, Special Health Accommodation, Cleaning, PPE, Contract Tracing and SHEOC.

Excluding the impact of COVID-19, the District is \$9.556M unfavourable to YTD February 2021 Expense budget.

YTD February 2021 Expenditure increased significantly (by \$209.64M or 17.04%) compared to YTD February 2020. 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 \$180.02M YTD Feb 2021. Increase in FTE numbers and the impact of COVID-19 is contributing to these results.

GF Revenue (including Doubtful Debts) was \$16.699M (9.52%) favourable to budget for the month and \$75.434M (5.54%) favourable to YTD February 2021 budget. This favourability is primarily due to Quarantined Hotel Passenger Fees (\$111.11M). The District has assessed the YTD February 2021 impact of COVID-19 on revenue reduction of \$10.536M for Patient Fees, Facility Fees, Prosthesis income, Pharmacy Sales, Car Parking Fees and Conference & Training Receipts. The reduction in the

Board Report

actual single room bed day rates paid by health funds has resulted in reduction in YTD February 2021 Patient Fees of \$4.324M. Furthermore, the impact of the additional \$12.594M full-year OSR budget allocated by MoH to the District has resulted in a \$8.396M unfavourability to YTD February 2021 OSR budget. Doubtful Debts related to Quarantined Hotel Passenger Fees amounts to \$9.856M YTD February 2021.

Excluding the impact of COVID-19 on Own Source Revenue and Doubtful Debts, the District is \$17.002M unfavourable to YTD February 2021 GF Revenue budget.

For the period ended 28 February 2021, the District's GF NCoS was \$20.209M favourable to budget. Excluding the impact of COVID-19, the District's NCoS was \$26.196M unfavourable to budget.

The table below shows the summary of the YTD February 2021 Financial Performance – including and excluding the impact of COVID-19:

	YTD Actual	YTD Budget	Variance (Actual vs Budget)	
Expense (incl COVID)	1,440,128	1,384,903	-55,225	unfav
COVID-19 impact:				
unfunded COVID-19	225,424	179,394	-46,030	unfav
Expense (excl COVID)	1,214,704	1,205,509	-9,194	unfav
Own Source Revenue (incl COVID)	-261,542	-170,618	90,924	fav
Doubtful Debts (incl COVID)	15,780	513	-15,268	unfav
Loss on Sale of Asset	223	0	-223	unfav
General Fund Revenue Total	-245,539	-170,105	75,434	fav
COVID-19 impact:				
Quarantined Hotel Passengers	-111,112	0	111,112	fav
Own Source Revenue Reductions	10,536	1,715	-8,821	unfav
Doubtful Debts	9,856	0	-9,856	unfav
COVID-19 impact Total	-90,720	1,715	92,435	fav
General Fund Revenue (excl COVID)	-154,818	-171,820	-17,002	unfav
NCOS (excl COVID)	1,059,885	1,033,689	-26,196	unfav

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 \$42M relating to unfavourable results for: Expense (\$158M) related to the management of the COVID-19 process; Doubtful Debts (\$24M); and, Own Source Revenue (\$30M) 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 (\$170M).

Excluding the impact of COVID-19, the District forecasts a break-even position for Expenditure offset by unfavourable positions for Own Source Revenue (\$30M) and Doubtful Debts (\$24M).

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 February 2021 was \$3.896M (2.23%) unfavourable to budget. The result for the month was primarily attributable to unfavourable results for Goods & Services (\$3.273M), VMOs (\$0.48M), RMR (\$0.093M), Other Expenses (\$0.806M) and favourable for Employee Related Expenses (\$0.756M). The District received \$25.936M COVID-19 Stimulus Budget for the period of January 2021 in February 2021. Excluding the impact of COVID-19, the District is \$1.717M favourable to the expense budget for the month of February 2021.
- YTD February 2021, GF Total Expenditure was \$55.225M unfavourable to budget, primarily reflecting unfavourable results for Salaries & Wages (\$19.829M), Overtime (\$11.055M), Annual Leave Provision (\$10.714M), Superannuation (\$7.988M), VMO Payments (\$3.507M), RMR (\$5.226M) and favourable for Goods & Services (\$3.291M). Excluding the impact of COVID-19, the District is \$9.556M unfavourable to YTD February expense 2021 budget.

Revenue

- GF Total Revenue for the month of February 2021 was \$16.699M (9.52%) favourable to budget, reflecting favourable results for User Charges (\$21.276M) including Quarantined Hotel Fees (\$19.903M), and Grants & Contributions (\$0.26M) offset by unfavourable results for Patient Fees (\$0.934M), Other Sources of Revenue (\$1.461M) and Doubtful Debts (\$2.294M). Excluding the impact of COVID-19 on Own Source Revenue and Doubtful Debts, the District is \$2.895M unfavourable to revenue budget for the month of February 2021.
- YTD February 2021 GF Revenue was \$75.434M (5.54%) favourable to budget. This result reflects favourable variance in Quarantined Hotel Fees (\$111.11M), Grants and Contributions (\$2.239M) and High Cost Drugs (\$2.45M) offset by unfavourable variances in Facility Fees (\$4.012M), Prosthesis Income (\$1.298M), Pharmacy Sales (\$1.043M), Car Park Fees (\$0.416M), Patient Fees (\$8.653M) and Doubtful Debts \$15.268M. 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 on Own Source Revenue and Doubtful Debts, the District is \$22.39M unfavourable to YTD February 2021 revenue budget.

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$4.005M unfavourable to budget for the period of February 2021. This result reflects favourable budget variance for Expenditure (\$1.185M) and unfavourable budget variance for Revenue (\$5.18M).

CONSOLIDATED RESULT

For the period ended 28 February 2021, the consolidated YTD NCoS result for the General Fund and SP&T was \$16.204M favourable to budget. The result comprises unfavourable variances for Expenditure (\$54.04M), Doubtful Debts (\$15.268M) and Loss on Sale of Asset (\$0.232M) offset by favourable variance for Own Source Revenue (\$85.744M).

Board Report

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

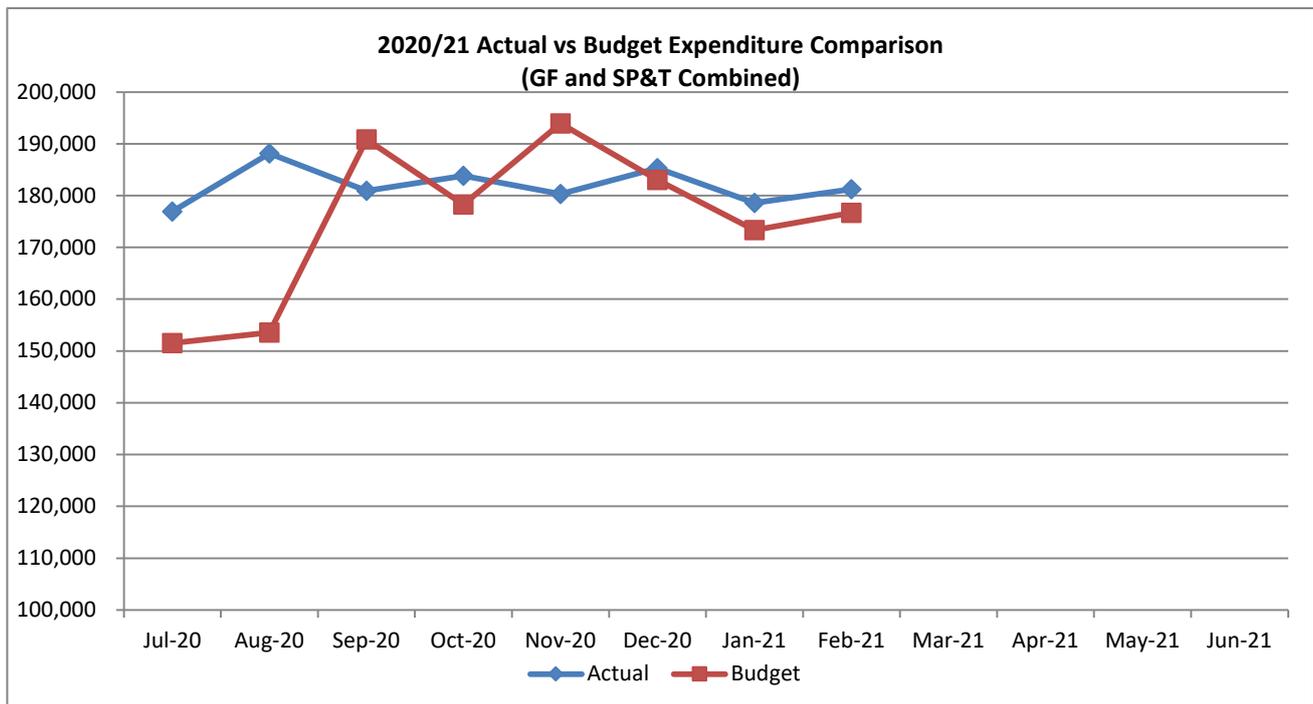
For the period ended 28 February 2021, SLHD recorded a Total Net Result of -\$20.722M which was \$16.155M favourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD February 2021 was \$36.469M favourable to budget, reflecting an unfavourable budget variance for Expenditure (\$49.226M) offset by a favourable budget variance for Revenue (\$85.695M).

For the YTD February 2021, Total Direct Revenue was \$85.695M favourable to budget, comprising a favourable variance for the General Fund (\$90.924M) offset by an unfavourable variance for SP&T Fund (\$5.229M). 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 February 2021 Total Direct Expenditure was \$49.226M unfavourable to budget, comprising an unfavourable variance for General Fund (\$49.644M) and favourable variance for SP&T Fund (\$0.417M). The result for the General Fund reflects unfavourable variances in Salaries & Wages (\$19.829M), Overtime (\$11.055M), On-costs (\$17.237M), VMOs (\$3.507M), Grants (\$1.386M) and Direct Clinical Operating (\$1.113M) offset by favourable variances in G&S Corporate (\$3.721M) and G&S Supporting Services & Utilities (\$0.683M).

MONTHLY BUDGET PERFORMANCE

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



LIQUIDITY

The cash balance at 28 February 2021 for the SLHD Operating bank account was \$26.227M and the Operating Cash book balance was \$26.04M.

CAPITAL WORKS – SMRS PROJECTS

As at 28 February 2021 the District's Full Year Capital works budget relating to SMRS Projects is \$17.842M comprising \$7.376M of MoH funded and \$10.466M of locally funded projects. In February 2021, a locally funded project (ICU Redesign at Royal Prince Alfred Hospital - \$1.290M) was approved by MoH.

Actual expenditure as at the end of February 21 was \$6.990M which is marginally on budget.

Additionally in the current pandemic circumstances, the actual and committed expenditure for MoH funded Minor works & Equipment for COVID-19 was \$5.234M at the end of February 2021.

OTHER CAPITAL PROJECTS

As at the end of February 2021, the District has expended an amount of \$1.661M relating to Croydon Health Centre Intellectual Disability Unit, RPA Transit Lounge, RPA Paediatrics, RPA Staff & Visitor Car Park and Wallacia New Cage. The total expenditure of \$1.661M was sourced from the General Fund.

CAPITAL WORKS

RPA

RPA Redevelopment

Key milestones achieved for the RPA Redevelopment in February 2021 are as follows:

- ESC endorsement of Renal Satellite relocation from Building 12 to Professor Marie Bashir Centre
- Appointment of Surveyor and tendering currently underway for BCA/DDA/Crown Certifier, ESD, Logistics, Traffic and Aviation Consultants
- Initial discussions for Investment Logic Mapping session and planning for Business Case is occurring
- Design coordination meetings with all project consultants are underway
- Further development of early works options and strategic critical paths
- Round 2 of Project User Group (PUG) sessions are complete
- Initial draft functional brief is complete

Paediatric Ward Stage 3

Drainage works were successfully completed and a new medical gas valve box was installed in February. The sheeting of new walls has progressed and setting out of the ceiling has commenced.

Parent and Baby Unit

During the month of February 2021, the stormwater and sewer lines within the building parameters were successfully installed. Civil and formwork continued in preparation for the first phase of the concrete slab pour which is scheduled to occur in mid-March 2021.

Building 63 RPU Hot Cells

Mechanical service works continued throughout February 2021 and the carbon filter steel cabinets were successfully installed onto the roof. COVID-19 has continued to impact the delivery of this project due to the clean room panels being manufactured in France. The installation of the hot cells was completed by the end of the month.

Pharmacy Manufacturing Bld 11 Level 2

Construction works to the Pharmaceutical Manufacturing labs continued throughout February including mechanical service fit offs, fire detection installation and laying of wall vinyl. Painting was also underway and electrical service fit offs are nearing completion.

rpaVirtual Stage 3

Stage 3 works to the rpaVirtual project were successfully completed in February. The project was commissioned and handed over for occupation by rpaVirtual.

Green ICU

Service rough-ins for nurse call, hydraulic and sprinkler system were completed in February 2021. Building works including wall sheeting and setting as well as electrical and mechanical service rough-ins continued throughout the month.

Endoscopy Pendant Replacement

The capital works program for the Endoscopy Pendant replacement project was completed in February. Commissioning of the new pendant has been undertaken and the area has been handed over ready for occupation.

Concord

Concord Redevelopment

Key milestones achieved for the Concord Hospital redevelopment included the commencement of the atrium roofing, internal fit out works to towers A, B and C as well as the first batch of communications rooms being handed over to the facility. Façade installation including glazing and terracotta also commenced.

Helipad Remediation Works

Electrical service fit offs for the helipad were completed in February 2021. Line marking and painting of the new helipad continued but were delayed due to inclement weather conditions.

Palliative Care Undercroft Storage

The capital works program for the undercroft storage at the Concord Centre for Palliative Care was also successfully completed and handed over to the facility in February.

Emergency Department Resuscitation Bays

Capital works including the wall preparation, cotton reel installation and hydraulic service rough-in were completed in February. Medical gas isolation and pipe diversion was undertaken and electrical rough-in and floor laying commenced.

Building 20 – Research

Building works that occurred during February 2021 on Level 1 included the completion of wall sheeting and setting, electrical service rough-ins and installation of a new air conditioning system. Painting of the new areas commenced and works to the communications room was underway.

Zetland

Child and Family Health Service (Tote Building)

The rough-in of air conditioning and hydraulic services was completed in February 2021. Wall framing is underway and electrical service rough-ins have commenced.

PLANNING

Board Planning Day

The Annual Board Planning Day was held this month with excellent participation of the Board and Executive of the District. A paper from the Planning day is being finalised.

Tech Central District (Camperdown-Ultimo Collaboration Area)

An intergovernmental workshop was held on 17th March, co-chaired by the CE and the Greater Sydney Commission (GSC). The Workshop focused on the Vision for CHERP, the RPA redevelopment and the precinct plans, Sydney Biomedical Accelerator, transport opportunities and Tech Central networking. It was attended by the University of Sydney GSC, Treasury, Premiers and Cabinet, Transport, Inner West Council, Health Infrastructure and the District.

A further interactive workshop is planned for early April to focus solely on Industry Engagement and Future Collocation in CHERP. This workshop will leverage from the major Industry Collocation Think Tank held in late 2020.

Significant input has been provided to the draft transport strategy for Camperdown-Ultimo Collaboration Area (Tech Central). The Strategy now includes a number of the priority strategies that the District has identified in its CHERP Transport and Traffic Plan.

The Planning Unit continues to attend the intergovernmental subcommittee (One-Gov) that is overseeing the Tech Central District development. Input has been provided into strategy and delivery framework and priority setting.

RPA Redevelopment – Ambulatory Care Planning

The Planning Unit is working with the RPA Redevelopment Team to develop a more in-depth plan and forecast for Ambulatory Care, taking into account the impacts of COVID, virtual care and changing models of care. Forecasts will span 2026 and 2031 and be developed individually for each clinical area.

Concord Hospital Stage 2 Clinical Services Plan

The revised draft of the Stage 2 Concord Hospital Clinical Services Plan, with the staff comments log, has been prepared for consideration by the Executive Steering Committee. The independent review of the final infrastructure is underway and has broadly supported the planning unit recommendations for future developments.

A meeting has been scheduled to discuss the plan with the District Aboriginal Health Workers as part of the Aboriginal Health Impact Statement.

Asset Management Planning

The Planning Unit is collaborating with Capital Assets, Property and Engineering to draft the Strategic Asset Management plan, the Asset Management Plans and the Capital Investment Strategies.

Dialysis Plan

Consultation continues with key dialysis service providers to finalise the SLHD Dialysis strategy based on new MoH guidelines for dialysis provision across the state.

Green Square HealthOne- RPA HealthOne, Green Square

The Planning Unit is working with Clinical Services Integration on the Academic Primary care Unit for the HealthOne.

Other Plans

The development of the following plans is being supported by the Planning Unit.

- SLHD Mental Health Strategic Plan
- SLHD Workforce Strategic Plan
- SLHD Education Strategic Plan
- SLHD Internal Audit Strategic Plan
- SLHD Carers Plan
- SLHD Rehabilitation Plan

SYDNEY RESEARCH

COVID-19 Operational Support

Sydney Research continues to support Sydney Local Health District (SLHD) in its response to COVID-19 and in the implementation of the COVID-19 Vaccination Program. The team participates in virtual meetings, reviews COVID-19 related correspondence and communicates the latest information to

SLHD and Sydney Research stakeholders. The team has also recently coordinated the registration of staff from Centenary, Heart Research and Woolcock Research Institute working within Royal Prince Alfred hospital or across the NSW Health network as part of Phase 1b of the COVID-19 vaccination roll-out.

Sydney Biomedical Accelerator

Sydney Research continues to lead the planning for the Sydney Biomedical Accelerator (SBA) Complex, a new world-class biomedical innovation precinct to be located within the RPA and University of Sydney campuses. A revised Investment Decision Document (IDD) has been submitted to the NSW Health Secretary and NSW Minister of Health and Medical Research on 2 March 2021. The revised IDD sought to address the feedback provided by Health Infrastructure NSW to further strengthen the case for investment and to prepare for project registration by NSW Health with the Infrastructure NSW Investor Assurance Framework and Gateway Review Process.

Dr Teresa Anderson AM, Chief Executive, SLHD and Adj A/Prof Vicki Taylor, Executive Director, Sydney Research are the SLHD Executive Leads on this project. To facilitate and continue the planning process, SLHD and the Sydney Research team have been working closely and collaboratively with representatives from the University of Sydney, Health Infrastructure NSW, Ernst & Young, and the three medical research institutes – Centenary Institute, Heart Research Institute and Woolcock Institute – via the regular SBA Executive Steering Committee and SBA Program Office meetings.

In collaboration with the University of Sydney, Sydney Research have developed correspondence to formally engage and seek the support of high profile individuals involved with or have interest in accelerating health research and development in NSW and Australia, including but not limited to the Hon Greg Hunt, the Hon Gabrielle Upton and those involved in the planning of Tech Central and the Camperdown Health Education and Research Precincts.

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

Sydney Research team to support the successful projects in Rounds 1-5 of the Translational Research Grant Scheme (TRGS).

The team are in the process of establishing a Steering Committee to support the successful TRGS Round 5 project, Efficacy and Value In Expedited out of hospital arrest care and ECMO CPR (ECPR) – EVIDENCE study led by Dr Mark Dennis and A/Prof Brian Burns. The Steering Committee will be chaired by Dr Tim Sinclair, SLHD Executive Director, Operations and is intended to ensure appropriate governance and oversight for the study. The Committee will consist of the Chief Executives from each LHD involved in the trials (Illawarra Shoalhaven LHD, Northern Sydney LHD, Nepean Blue Mountains LHD, South Eastern Sydney LHD, South Western Sydney LHD, St Vincent's Hospital Network, and Western Sydney LHD), as well as representatives from the NSW Health Ambulance, NSW Agency for Clinical Innovation, NHMRC Clinical Trials Centre, the NSW Ministry of Health Centre for Epidemiology and Evidence and a local consumer representative. An invitation has been circulated to these individuals and an initial meeting of the Steering Committee has been scheduled for Friday 16 April 2021.

National Clinical Trials Governance Framework

Sydney Research participated in the remote Pilot accreditation assessment of the National Clinical Trials Governance Framework (NCTGF) in Royal Prince Alfred (RPA) Hospital held on Wednesday 3 and Thursday 4 March 2021. The team have also contributed to the gathering of evidence and completion of requirements associated with both Standard 1 Clinical Trial Governance and Standard 2 Partnering with Consumers of the Framework in preparation for accreditation. As a result of this pilot accreditation process, the assessment team found that RPA had demonstrated established systems

across both standards, which is the highest achievable rating of health service compliance and maturity with the National Clinical Trials Governance Framework.

Office of Health and Medical Research – Embedding Quality Research

The Embedding Quality Research (EQR) Steering Committee convened on 18 February 2021. The NSW Office for Health and Medical Research (OHMR) provided an update on the NSW Health Intellectual Property (IP) and Commercialisation policy, which aligns with the recent review of the whole of Government IP policy completed in 2020. LHDs will be consulted to provide input on the commercialisation framework, with an asset register, template resources, education and specialist support services to be provided across the State. An IP Community of Practice will also be convened to build capacity in IP development and commercialisation. An update on participation in the pilot implementation of the National Clinical Trials Governance Framework was also provided by St Vincent's Health Network and SLHD, with pilot sites assessed on the achievement of actions in the Framework related to Standard 1: Clinical Governance and Standard 2: Partnering with Consumers.

As a priority, SLHD and nominated representatives will be invited to address research governance reform, with the EQR Steering Committee to provide guidance on strategic objectives and the EQR Working Group which has been Chaired and supported by Sydney Research will be reconstituted to deliver on agreed activities. With Sydney Research support and input OHMR will provide a scoping paper to the Secretary, NSW Health, with the group to ensure appropriate engagement and linkage with active initiatives to support priority setting and minimise duplication, to ensure the EQR initiative is best placed to provide value to its stakeholders at the local and state level.

Digital Health Cooperative Research Centre (DHCRC)

A meeting has been scheduled with representatives from the DHCRC on Tuesday 23 March 2021 to discuss the proposed initiatives to be led by SLHD and the support that can be provided through the collaborative. The attendees for this meeting include Dr Teresa Anderson, Adj A/Prof Vicki Taylor, Mr Richard Taggart, SLHD Chief Information Officer, Mr Michael Walsh, DHCRC Chair, Dr Terry Sweeney, DHCRC Chief Executive Officer, and Prof Tim Shaw, DHCRC Director of Research and Workforce Capacity.

Australian Clinical Trials Alliance

Sydney Research have coordinated the submission of the following two (2) SLHD applications for the Australian Clinical Trials Alliance (ACTA)'s annual 'Trial of the Year' award. Winners of the award will be announced in early May 2021 as part of the ACTA National Tribute and Awards Ceremony.

Trial	Chief Investigator
Communicating Healthy Beginnings Advice by Telephone (CHAT) study	A/Prof Li Ming Wen, Director of Research and Evaluation, SLHD Population Health
Population Health Research & Evaluation Hub	Professor Catherine Sherrington, Deputy Director, Institute for Musculoskeletal Health

Patient Family Centred Care Research Working Group

The Patient and Family Centred Care (PFCC) Research Working Group continues to progress its initiatives to strengthen consumer and community involvement in research conducted across and within SLHD. With oversight from Adj A/Prof Vicki Taylor and the Sydney Research team, Dr Karena Conroy and Adj A/Prof Greg Fairbrother are coordinating the following three (3) active initiatives:

Measurement tools

A sub-group comprising of consumer representatives and members from the SLHD Research and Sydney Research teams have developed key parameters for the state-wide Research Ethics

Governance Information System (REGIS) to effectively measure consumer involvement in the design and conduct of research. The drafted parameters and a mock report identifying key reporting outcomes for clinical research centres have been developed by the sub-group and are currently under review by a state-wide REGIS User Group as part of the REGIS review project led by OHMR.

Case Examples

The purpose of this initiative is to provide case examples of best practice that would be valuable for both researchers and consumers interested in being involved in research. A sub-group involving SLHD Researchers and consumer representatives have been developing a proposal outlining the key research questions and methodologies to examine an effective consumer-researcher relationship in the design, conduct and implementation of research. An option currently being canvassed is an ethnographic study focused on 'How does a successful consumer-researcher engagement process work, in real time?'

Organisational Support

A/Prof Fairbrother and Dr Conroy in collaboration with the Consumer and Community Participation team have developed a presentation to explain the PFCC Research Working Group initiatives and intentions to establish a District Research Consumer Reference Group. This presentation has been scheduled to be presented to the RPA Consumer Network in May 2021.

Dr Conroy and Sydney Research have also drafted a District-wide policy to support consumer involvement in research and have sought the input of Ms Tamsin McVeigh, A/Deputy Director of Clinical Governance, SLHD and Ms Myra Serrano, Policy Manager, SLHD.

Online Resources

The Sydney Research team have developed a monthly newsletter titled 'Consumers in Research', which will provide SLHD clinical departments and research teams with information on the latest initiatives, tool and events on consumer and community involvement in clinical trials and research. The first edition of the newsletter was circulated on Monday 1 March 2021 and has resulted in an increase of 92 new subscribers. A/Prof Fairbrother is developing an ethics application to undertake a series of interviews with consumers and researchers, which will form a regular component to the Consumers in Research newsletter and provide a personal insight into the ways that consumers can be involved as partners in research and the benefits of their involvement.

Dr Conroy and Sydney Research are in the process of developing a webpage for the Sydney Research website, which will centralise the tools and resources available and raise awareness of existing initiatives on consumer involvement in research for use by researchers across and within SLHD.

Both Dr Conroy and Dr Alan McPhail, Co-Chair, PFCC Research Working Group participated in the Consumer Health Forum of Australia Shifting Gears Summit on 18 and 19 March 2021. Consumers as leaders in healthcare and health research were central themes of this inaugural Australian and New Zealand Consumer Experience and Leadership Summit. Dr Conroy and Dr McPhail will be producing a findings report based on the sessions held during the Summit, which will highlight the latest initiatives discussed as an update for the PFCC Research Working Group and provide content for the webpage and newsletter.

Sydney Health Partners (SHP)

Dr Teresa Anderson AM and Adj A/Prof Vicki Taylor attended the Sydney Health Partners (SHP) Board Strategy Session on Wednesday 17 March 2021, which was scheduled to facilitate discussion amongst partners on the emerging ideas, projects and strategic priorities for SHP going forward.

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 continues to participate across all five (5) of the Platforms.
- Adj A/Prof Fairbrother has been leading the coordination of a Consumer Advisory group to support the collaborative cellulitis project. The Reference Group, consisting of patients and carers with experience of lower limb cellulitis, will assist in the evaluation of the new allied-health led model of care for cellulitis and in developing educational materials to support its implementation. The Advisory Group will involve eight (8) consumers across SLHD, NSLHD and WSLHD, and will aim to build knowledge of the patient experience and need in relation to cellulitis prevention service delivery. *Encouraging More Clinical Trials in Australia*

Encouraging More Clinical Trials in Australia

- The SHP Clinical Trials Advisory Panel (CTAP) has been established to progress this Sydney Health Partners initiative, in collaboration with the NHMRC Clinical Trials Centre and the NSW OHMR.
- SLHD is the funding administrator for the initiative, with Sydney Research and SLHD Research represented on the Advisory Panel.
- The Panel met on 23 February to review the report providing a summary of the current management of clinical trials and barriers to the conduct of clinical trials across Sydney Health Partners member health services and partner MRIs. Recruitment and the lack of a dedicated study coordinator role was identified as a central issue for the conduct of clinical trials across some of the partner organisations. SHP have proposed the ‘SHP Clinical Trials Pilot – Centralised Recruitment Project (CTP-CRP)’ to address these issues by establishing and evaluating the implementation of a Centralised Recruitment Service pilot at Royal North Shore Hospital.

Sydney Research Council

The Sydney Research Council met virtually on 23 February 2021. Dr Joseph Dusseldorp, a clinical academic affiliated with the ANZAC Research Institute, SLHD and the University of Sydney, provided a fabulous presentation on the translation of biotechnology into clinical practice with focus on the impact of machine learning on reconstructive surgery for facial palsy, implantable electronics for spinal cord stimulation, and 3D printing for ear reconstruction. Following this presentation, Dr Duncan Macinnis, Director of Stakeholder Engagement (NSW), MTPConnect will be meeting with Dr Dusseldorp to discuss potential funding opportunities through MTPConnect.

Dr Brendan Goodger, General Manager of Primary Care Improvement at the Central and Eastern Primary Health Network (CESPHN) also presented to the Council on the valuable role played by primary care professionals in research and the potential opportunities for collaboration. Following this presentation, Prof Don Nutbeam, Executive Director, SHP will be consulting with Dr Goodger to determine how the SHP partnership can best support the involvement of primary care professionals in research. Prof Stephen Simpson, Academic Director, Charles Perkins Centre will also be consulting with Dr Goodger to determine how the CPC can work collaboratively with the CESPHN on their key research themes like diabetes, nutrition, and exercise.

Dr Anderson AM, Adj Prof Taylor and the Sydney Research Council thanked and acknowledged Prof David Handelsman for all his support and contributions to the Sydney Research partnership. Prof Handelsman completed his term as the Director of the ANZAC Research Institute on 1 March 2021. Prof Handelsman will retain a senior position at the ANZAC Institute to continue his research and has been invited to provide a presentation to the Council at a later date.

Other Activities

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

- Camperdown Ultimo Alliance Meeting on Wednesday 3 March 2021
- University of Sydney Faculty of Medicine and Health Research Centres Review and application for the Institute for Musculoskeletal Health.
- RPA Redevelopment and Tech Central Connectedness Workshop on Wednesday 17 March 2021
- SLHD Close the Gap Events on Thursday 18 March 2021
- 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.

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 845 subscribers
- The PFCC Research Working Group monthly newsletter, 'Consumers in Research', has an audience of 152 subscribers.
- @SydneyResearch currently has 1,089 followers on Twitter

COVID-19 UPDATE

SLHD has undertaken the following activities to March 2021:

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.
- Continued to ensure COVID-19 Clinic surge capacity

COVID-19 Vaccination Hub and Vaccination Clinic

- Sydney LHD has been tasked to plan, create and establish a COVID-19 Vaccination Hub and a COVID-19 Vaccination Clinic capable of seeing up to 1000 people per day. The District worked closely with SHEOC, eHealth and the other LHDs in preparation for the program including the development of IT solutions to facilitate workflows and data capture.
- SLHD Vaccination Hub and RPA Vaccination Clinic commenced operations 22 Feb 2021.
- Planning underway for establishment of vaccination clinic at Sydney Airport on Tuesday 9 March 2020.

Special Health Accommodation

- Continued to provide Special Health Accommodation for incoming international passengers under the Public Health Orders who are symptomatic on arrival or become symptomatic during quarantine in a NSW Police managed hotel.

- Continued to provide accommodation for community transmission cases who are unable to safely self-isolate in the home environment.
- Continued to provide accommodation for passengers requiring quarantine in accordance Public Health Orders requiring additional care that is not available within the NSW Police managed quarantine hotels provided whilst order in force.

Airport

- Continued the SLHD 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 other states in response to outbreaks.
- Planning underway to establish NSW Health Testing Program for Airport Workers at Sydney International Airport (Saliva Testing). Daily testing to commence on 3 March 2020.

COVID-19 Drive Through and Walk-in Clinics

- Continued community based COVID-19 Screening Clinics established at Rozelle, Redfern, Summer Hill, Olympic Park, 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 facility based COVID-19 Screening Clinics established at RPA, Concord and Canterbury Hospitals capable of seeing between 300-1200 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.
- Tiger teams remain available to support staff if required

SLHD Public Health Unit

- 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.
- Continued inspections by Environmental Health Officer inspections of commercial businesses within the quarantine hotels to ensure they have and comply with appropriate COVID-19 Safety Plans.
- Enhanced Environmental Health Officer inspections of food outlets with SLHD to ensure they have and comply with appropriate COVID-19 Safety Plans.

Strategic Communications and Relations

- Extensive work with our Diversity Hub to increase knowledge and testing for COVID-19 within the various diverse communities within SLHD.

Quarantine Facility Surveillance Testing Project

- SLHD continues to work with HCA to manage NSW Health (Saliva) Testing Program at Quarantine Facilities. This requires workers in quarantine facilities to participant in daily saliva swabbing for COVID-19.
- Planning to roll out the program to the Sydney International Airport is progressing.

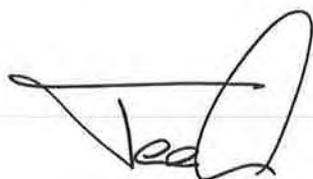
LHD and MoH initiatives and support

- 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.
- Extensive planning, preparedness and response work continues with RACFs within SLHD to prepare these facilities in the event of a COVID-19 outbreak.
- Extensive planning, preparedness and response work continues 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.
- Continuing 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). SLHD oversees the saliva testing program of all quarantine and border workers in partnership with the SHEOC.
- Expanded the SLHD EOC to cover Vaccination Roll out.
- Establishment of major Vaccination Clinic supported by RPA Hospital in the University of Sydney Mallett Street Building delivering vaccination to Phase 1a and Phase 1b workers.
- Establishment of Vaccination Clinic at Sydney Airport delivering vaccination to Phase 1a and Phase 1B Border Workers.

Interagency

- 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/PHRB in developing a framework to deal with an outbreak within a social housing complex.
- Work with the PHEOC in developing forward planning for marine vessel arrivals (White Bay Cruise Terminal).
- Continued charing of the Interagency Governance Committee to support the quarantine program

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



Dr Teresa Anderson AM

Chief Executive

Date: 7.6.21