
Sydney Local Health District

Meeting One Hundred and Fifteen of the Board

Date: Monday 20 September 2021

Time: 9.00am - 11.00am

Venue: Via Zoom

Chair: The Hon. John Ajaka, Chair

1. Present and apologies

The Hon, John Ajaka, Chair
A/Professor Christine Giles, Member
Ms Ronwyn North, Member
Dr Mary Haines, Member
Ms Kerry-Anne Hartman, Member
Mr Richard Acheson, Member
Mr John McGee, Member
Dr Teresa Anderson, AM, Chief Executive

Apologies

Nil

In attendance

Ms Nerida Bransby, Secretariat
Mr Ross Sinclair, Executive Director of Operations, SLHD
Dr Alicja Smiech, Chair, Medical Staff Executive Council
Mr Tom O'Sullivan, GHMP Trainee

2. Welcome and introductions

The Chair acknowledged the traditional owners of the land.

The Chair welcomed members and guests to meeting one hundred and fifteen 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.

Minutes

1. A/Professor Giles, Member declared that she has been re-appointed to the Cancer Australia Audit and Risk Committee.
2. Mr Ajaka declared that he has been appointed to Director, NSW Wheelchair Rugby League.

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

4. Confirmation of previous minutes

4.1 Minutes of the previous meeting held 16 August 2021

The minutes of the Board Meeting held on Monday 16 August 2021 were moved and seconded as a true and accurate record of the meeting.

The Chair will sign the minutes when received by email.

4.2 CE Report – August 2021

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

5. Matters arising from the previous minutes

5.1 Action sheet

The Board received and discussed the action list including:

- A list of the vaccination sites was provided to the Board Chair. This agenda can be removed from the action list.
- The remainder of the items are still pending.

6. Patient Story

Dr Anderson provided a verbal report on the actions taken to lock down an apartment building where COVID positive cases have been detected to protect the residents, the community and the relevant staff involved. Following the two weeks of quarantine, a letter of thanks was received from one grateful resident for keeping them safe.

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

The Chair provided a verbal report including:

1. The process for the appointment of new Board Members is being sped up, the members for each Board across the State is averaging six to seven.
2. Large uptake of vaccinations.
3. Board Members have to be vaccinated.
4. Ambulance response times and assistance from the NSW Fire Service
5. Staff leave requirements when the borders are re-opened.
6. Orientation program for new members is now completed.

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.
- Preparation for the maximum number of surge capacity includes:
 - Planning for surge capacity commenced the end of January 2020
 - Projected numbers are monitored everyday including health of the community and vaccination rates
 - Need to stage activity growth
 - Need to cater for emergency surgery including Cardiothoracic, Neuro and Pelvic Exenteration
 - Assistance from Private Hospitals
 - Risk Management strategies includes PPE and Team Based Care
 - Similar skill set for ICU / Theatre staff.
 - Re-deployment of staff from surgical wards
 - Use of Allied Health Staff
 - Risk Management - preparation for the worst
 - Staff health, safety and wellbeing.
- There were eighteen more emergency surgeries performed in the month of July 2021 when compared to the same month last year due to deferred cases becoming an emergency.
- Models of Care in the Community discussions are on-going.
- Care for our vulnerable communities includes rapid testing and vaccinations.
- Reasons for overstay of fourteen days in quarantine included patient can still be COVID+ and need to be discharged appropriately with input from the Public Health Unit.
- Proposed new management model for RPAV includes provision of pulse oximetres, working with GPs and other primary health providers.

Minutes

- Focus on staff vaccinations for health workers which is now a mandatory criteria to work in health.
- All our capability plans are shared with other Districts.
- A paper is being presented to the Executive today on “Lessens Learnt” response to COVID. Staff have new skills and doing remarkable things for now, in the short term and into the future.
- A presentation on the RPAH redevelopment will be provided at the next meeting.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – July 2021

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

9.1.2 Selected Performance Indicators – June 2021

The 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 for the period April to June 2021 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

Nil to report.

9.2.2 Macquarie International Private Hospital

Nil to Report

9.3 Capital Works Report

The Board received, read and noted the Capital Works report.

9.4 Clinical Governance and Risk Reports

(i) Quarterly Report

The Board received, read and noted the report for the period April – June 2021 in particular:

- The information relating to the Clinical Variation Framework. Good systems and clinical practice is both warranted and required for Medication Errors and Unrecognised Deteriorating Patients as listed in the Risk Register.
- Patient Complaints regarding communication issues have doubled since January 2021 to June 2021. The Board requested a further breakdown of these complaints.

(ii) Quality Awards

The Board received, read and noted this report. It is to be noted the AGM is being held on 4 December 2021.

(iii) SLHD Risk Register

The Board received, read and noted this report.

9.5 Audit and Risk Committee Report (period 14 June 2021 – 14 September 2021)

The Board noted the next report for the period 14 June 2021 – 14 September 2021 is due in October 2021.

9.6 Facility Reports – July 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 in particular the challenges faced by staff on the relocation of patients to the Concord Hospital Drug Health Unit.

(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.

(xi) SLHD Special Health Accommodation

The Board received, read and noted this report in particular, the outcome of the review of the top ten service risks due to the increase in the COVID community transmissions.

(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.

The Board discussed the escalation of important matters to the District Executive, all urgent issues are escalated, prioritised and addressed accordingly.

10. Matters for approval / resolution

Nil to report

Minutes

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 9 August 2021.

11.2 Education and Research Committee

The Board noted the meeting to be held today 20 September was cancelled.

11.3 Communications Committee

The Board noted the next meeting is to be held on 5 October 2021.

11.4 Audit and Risk Committee

The Board received, read and noted the minutes of the meeting held on 2 September 2021.

11.5 Health Care – Clinical Quality Council

The Board noted the meeting held on 25 August 2021 was cancelled.

11.6 Health Care – Clinical Council

The Board noted the meeting held on 25 August 2021 was cancelled.

11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 5 November 2021.

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

The Board noted the meeting to be held on the 2 September 2021 was cancelled.

11.9 Aboriginal Health Steering Committee (bi-monthly)

The Board noted the next meeting is to be held on 28 September 2021.

11.10 Organ Donation for Transplant – Quarterly Report (July 2021 – September 2021)

The Board noted the report for the period July 2021 – September 2021 is due in November 2021.

12. Other Committee reports / minutes

12.1 Sustainability Committee (bi-monthly)

The Board noted the meeting to be held on 20 August 2021 was cancelled.

Minutes

12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 14 July 2021.

12.3 Surgical Demand Committee (bi-monthly)

The Board noted the meeting is to be held on 18 August 2021 was cancelled.

12.4 Finance Leaders Forum

The Board noted the meeting to be held on 18 August 2021 was cancelled.

12.5 NSW Health / SLHD Performance Review Meeting

The Board noted these meetings are postponed due to the COVID response.

12.6 Organ Donation for Transplantation

The Board received, read and noted the minutes of the meeting held on 27 July 2021.

12.7 Major Procurement, Assets and Imaging Steering Committee

The Board noted the meeting held on 10 August 2021 was cancelled.

12.8 Yaralla Estate Community Advisory Committee (bi-monthly)

The Board noted the meeting to be held on 17 August 2021 was cancelled.

12.9 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 21 July 2021.

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

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

12.11 Security and Violence Prevention Committee

The Board received, read and noted the minutes of the meeting held on 10 August 2021.

13. Matters for noting

13.1 Committee membership for Board Members

The Board received, read and noted this report.

14. Other Business

14.1 COVID Outbreak Management Team Meetings

The Chief Executive provided a verbal report to the Board on the COVID Outbreak Management Team meetings for:

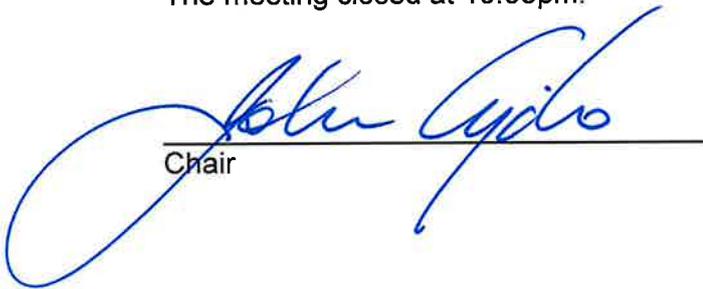
- Aboriginal Communities
- Businesses
- Residential Aged Care Facilities / Disability Homes
- Vulnerable Communities
- Social Housing

These meetings occur daily, seven days per week as needed with representation and input from the relevant groups.

15. Next Meeting

The next meeting will be held on Monday 18 October 2021 at 9.00am.

The meeting closed at 10.55pm.



Chair

18-10-21

Date

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

PERFORMANCE

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

The Ministry of Health's Health System Performance Report has been delayed due to issues with the Health Information Exchange, as such some data is unavailable at the time of this report.

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 SAERs overdue during the month of July 2021.

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.

Workforce

The District continues to focus on strategies to ensure our workforce has the appropriate skill mix and levels to meet demand.

The District is continuing to work with the NSW Health Workforce branch to ensure its workforce surge plans are in place for an escalation in the COVID-19 response. There is ongoing focus on specific workforce escalation plans that will ensure alignment to current and ongoing work within the SHEOC.

The District has been focusing on ensuring its hospitals are appropriately staffed to manage the increasing activity associated with COVID-19 in the Emergency Departments, COVID-19 wards and Intensive care units.

The District is continuing to focus on ensuring appropriate nursing, medical and administration staff to support the COVID-19 Vaccination Program in NSW and in particular the NSW Health Vaccination Centre at Sydney Olympic Park which is now vaccinating over 8,000 people per day, 7 days per week, the mobile vaccination clinics and the Special Health Accommodation which now has over 900 patients at any one time. New models of workforce have been developed to ensure that nursing and medical staff are released to support the hospitals as hospitalisations increase.

Activity

Significant pressure has been placed on all hospitals in the District with a significant increase in the presentation and admission of COVID-19 positive patients and patients on COVID-pathways during July 2021 associated with the recent COVID-19 outbreak. Strategies have been taken to increase hospital capacity by stopping all non-urgent elective surgery and reducing outpatient clinics across the District.

As a result, there was a decrease of 4.02% in the number of separations (13,328) for the month of July 2021 when compared to the same period last year and a 12.5% decrease in July 2019. This is consistent with the decrease in elective surgery and reduced inpatient activity associated with COVID-19. In July 2021, the District's occupancy rate decreased by 0.3% to 86.42% when compared to the 86.72% reported in July 2020. It decreased by 3.31% when compared to the 89.73% in July 2019.

There were 12,270 attendances to the District's Emergency Departments in July 2021, which is a 0.15% decrease from 12,288 when compared to the same month last year, and a 17.2% decrease when compared to 14,821 in July 2019. 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 6.07% decrease in ETP in the month of July 2021 to 63.88%, when compared to the same month in the previous year. Admitted ETP was below target (50%) for the month at 36.43%, which is a 11.10% decrease on the same period in the previous year.

Transfer of Care

The District is performing below the transfer of care (TOC) target (90%) for July 2021, with 88.23% of all patients transferred from ambulance to our emergency departments in 30 minutes or less. This has been due to the significant increase in the number of patient on a COVID-19 pathway presenting to the Emergency Department which has significant increased processing times due to PPE and Infection Prevention and Control measures required.

ED Triage

The District continues to perform well in relation to the triage targets and achieved triage Categories 1, 4 and 5 targets for the month of June. Triage Categories 2 and 3 performance is below the revised targets at 84.66% (target 95%) and 79.09% (target 85%) respectively.

Elective Surgery

There were 629 less elective surgeries performed in July 2021 when compared to the same period in the previous year, representing a decrease of 26.9%. This is in line with the reduction in all non-urgent elective surgical procedures as above.

For the month of July, 99.76% of Category A, 100% of Category B, and 99.83% of Category C elective surgery patients were admitted within the clinically appropriate timeframe for their surgery.

To supplement operating capacities within Royal Prince Alfred Hospital, Concord Repatriation General Hospital and Canterbury Hospital, collaborative care arrangements are continuing to be utilised with private facilities. Facilities currently engaged in Collaborative Care arrangements include Chris O'Brien Lifehouse, East Sydney Private, Hurstville Private, The Mater Private, North Shore Private, Sydney Day Surgery, Sydney Adventist Hospital, Strathfield Private, Chatswood Private, St George Private, Westmead Private, St Luke's Private, Waratah Private and Macquarie University Hospital.

A surgical recovery program is currently being coordinated by the SLHD Surgical Leadership group, in order to effectively surgical programs back to facilities, and decrease wait list pressures, following the COVID-19 period.

Emergency Surgery

There were 18 more emergency surgeries performed in the month of July 2021 when compared to the same month last year, representing a 1.47% increase.

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. Many of the patients are now being seen virtually.

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 32.07% variance for YTD June, excluding Dental.

Stream	Target	Actual	Variation	Variation %
Acute*	164,192	159,352	- 4,840	-2.95%
ED	24,016	23,309	- 707	-2.94%
NAP**	49,935	146,935	96,999	194.25%
SNAP***	12,718	11,763	- 955	-7.51%
MH Admit	17,966	17,580	- 386	-2.15%
MH NAP^	9,660	10,380	720	7.45%
Total	278,488	369,319	90,831	32.62%
Dental DWAU	61,290	68,867	7,577	12.36%
Dental NWAU#	7,696	8,647	951	12.36%
Total (NWAU)	286,183	377,966	91,782	32.07%

* 8 uncoded episodes

** inclusive of COVID clinics and the Special Health Accommodation

*** 35 ungrouped episodes

^ May data

NWAU=589/4691*DWAU

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of July 2021, 15.37% (1,960 separations) of all patients discharged by SLHD facilities were classified as privately insured.

There was a decrease of 236 (10.75%) patients who elected to use their private insurance compared to the same period last year and a decrease of 236 (10.75%) in total separations from previous month. For the month ended July 2021 conversions for facilities as compared to the same period last year were:

- RPAH – a decrease of 146 (13.53%) private patients.
- Concord – a decrease of 122 (12.44%) private patients.
- Canterbury Hospital – an increase of 41 (44.09%) private patients.

- IRO – a decrease from 28 to 16 private patients.
- Balmain Hospital – an increase of 3 (20%) private patients.

Single Room Usage

For the month of July 2021, 7.14% of patients were flagged as infection control across the District, with 19% of all available single rooms occupied by private patients and 32% of all private patients accommodated in single rooms.

SLHD Strategic Revenue Network

Key notes:

- SLHD Strategic Revenue Network meeting was held in May 2021. The rollout of the final tranche of the new financial classifications was discussed. Each facility provided an update on revenue performance. Revenue opportunities for each of the facilities was discussed.
- 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 137 registered users and total \$996K has been raised through the portal to date.

REDESIGN AND SERVICE IMPROVEMENT

Innovations

The Pitch

- Due to the current COVID restrictions, the next round of the Pitch has been placed on hold.

CHR

- The GPCanShare Project was approved to participate in the Centre for Healthcare Redesign's Graduate Certificate Program and the team attended the first 3-day workshop last month. However, the team has now been redeployed to Rpvirtual to assist with the COVID response. As a consequence, the project team has requested leave of absence from the University of Tasmania in the hope that they will resume the project and studies in early 2022.

Other Projects

- Hands Up Project (RPA Hand Clinic)
 - Due to the current COVID-19 restrictions, the Project Team are at maximum capacity. As such, the project has been placed on hold from 16 July 2021.
- RPAH Transfer of Care Project – 'Good to Go, Discharge by 10 and 2'
 - The COVID-19 response requires the complete attention of patient flow unit resources. The unit is currently undertaking recruitment toward a management restructure. Once this period has subsided and the restructure of the unit is finalised with new positions filled, the team will re-commence the implementation of agreed solutions.
 - A workshop for medical attendees is being planned to drive engagement with solutions given they all need strong medical buy in / culture change.
- Diabetes Model of Care Redesign
 - The diagnostic phase of the project has been completed.
 - The new SLHD Outpatient Diabetes Model of Care has been finalised and is to be shared with diabetes leads, GMs and DMS's on 31 August.

Board Report

- The current state of the SLHD Outpatient Diabetes in Pregnancy Model of Care is to be tabled and discussed with SLHD executive once the COVID-19 situation becomes less pressing.

Accelerating Implementation Methodology (AIM):

- Remaining date for the AIM course in 2021 are:
 - 15-16 November

HealthPathways

Content development

Outside of the Program's commitment to pop-up COVID-19 Vaccinations our focus has remained the on the development and maintenance of COVID-19 specific content for General Practice, with particular attention to vaccination and side effect management.

Currently, the following COVID-19 vaccine specific content is accessible to General Practice:

	Page views August 1-25 2021	Page views July 1-31 2021	Page views June 1 – 30 2021
COVID-19 Vaccination Information	192	205	110
COVID-19 Vaccination Procedure	211	110	60
Preparing for COVID-19 Vaccination	37 Pathway merged with Vaccination Procedure	50	20
COVID-19 Vaccine-induced Thrombosis with Thrombocytopenia Syndrome (TTS)	260		

A specific **Myocarditis and Pericarditis following mRNA COVID-19 vaccination** pathway is out for Cardiology consultation this week. Development work on most non-COVID-19 content has been placed on hold to support other SLHD COVID-19 focused activities. Our urgent content update schedule has been maintained by the team.

Usage of HealthPathways

Usage continues to track at a favourable level with steady consistent usage rates.

	*August 1-25 2021	July 2021	June 2021	*August 1-25 2020
Users	1,268 ↑ 9.87%	1,473	1,395	1,154
Sessions of use	7,640 ↑ 15.21%	8,843	9,175	6,631
Total Page Views	24,871 ↑ 14.84%	31,277	31,550	21,657

SLHD e-Referral Project

Service recruitment

The e-Referral Project Team are currently supporting the COVID-19 response.

Development work has commenced on forms for the Royal Prince Alfred Hospital implementation. Phase 1 of the e-Referral implementation will go live 13 October 2021, with phase 2 anticipated to occur late 2021.

e-Referral form design is now finalised for SLHD Maternity, and Royal Prince Alfred Hospital's Gynaecology and Fertility service, as part of the Engage Outpatients Program. Development work is scheduled to commence this month by the e-Referral vendor.

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
Engage Outpatients Program: Gynaecology – Royal Prince Alfred Hospital Pelvic Mesh – Royal Prince Alfred Hospital Maternity - SLHD	2021	Build
Royal Prince Alfred Hospital (13 services)	October 2021	Build
Royal Prince Alfred Hospital (5 services)	Late 2021	Design

Platform development

Active Directory integration work to recommence, with support from SLHD ICT.

Referrer update:

- A total of 1246 referrals have been received.
- 67% of referrers using HealthLink to refer to SLHD have referred more than once.

FINANCIAL PERFORMANCE – NET COST OF SERVICE BASIS

GENERAL FUND (GF)

The 2021/22 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 July 2021 based on the District's budgeted NCoS.

For the period ended 31 July 2021, GF Expenditure was \$53.108M (34.16%) unfavourable to budget. The unfavourable result is primarily due to the timing of the COVID-19 Incremental budget adjustment. The District has assessed the July 2021 COVID-19 Incremental cost as \$53.091M. COVID-19 Incremental expenses were primarily for Clinics and Screening, COVID-19 Wards and ICU, Pathology testing, Special Health Accommodation, PPE, Cleaning, Contract Tracing, SHEOC and Vaccination Program.

Excluding the impact of COVID-19, the District is \$0.016M unfavourable to July 2021 Expense budget. Expenditure in the month of July 2021 increased significantly (by \$33.851M or 19.37%) compared to July 2020. The average monthly expense rate increased from \$160.292M (excluding LSL adjustment in June 2020) for the 2019-20 Financial Year to \$188.249M (excluding LSL adjustment in June 2021) for the 2020-21 Financial Year and to \$208.572M YTD July 2021. Increase in FTE numbers and the impact of COVID-19 is contributing to these results.

GF Revenue (including Doubtful Debts) was \$17.738M (11.34%) favourable to budget for the month. The District continues to see unfavourable results in a number of Own Source Revenue categories including Patient Fees, Facility Fees, Prosthesis income, Car Parking and Pharmacy Sales as a result of the impact of COVID-19. Excluding the impact of Quarantined Hotel Passenger Fees on Own Source Revenue and Doubtful Debts, and the reduction in OSR due to the impact of COVID-19, the District is \$0.510M unfavourable to July 2021 GF Revenue budget.

The NCoS for July 2021 was \$35.370M unfavourable to budget. Excluding the impact of COVID-19 (Expenditure, Quarantine Hotel Passenger Fees and Doubtful Debts) SLHD is \$0.526M unfavourable to NCoS budget.

The District, based on MoH requirement to show full year COVID-19 impact, projects the NCoS to be unfavourable for the 2021/22 financial year by \$380M relating to unfavourable results for: Expense (\$600M) related to the management of the COVID-19 response and Doubtful Debts (\$20M) offset by a favourable result for Own Source Revenue (\$240M) due to the impact of COVID-19 Quarantined Hotel Passenger Fees.

Excluding the impact of COVID-19, the District forecasts break-even positions for Expense and Own Source Revenue and a \$6M unfavourability for Doubtful Debts.

The Chief Executive and the A/Executive Director of Finance are confident that the District would have an on budget NCoS result (excluding the impact of COVID-19 and Doubtful Debt) for the 2021/22 financial year if not for the COVID-19 challenges being faced. The District has continued to maintain expenditure controls and monitors performance on a daily basis despite the material increase in overall activity (prior to 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 July 2021 was \$53.108M (34.16%) unfavourable to budget. The result for the month was primarily attributable to unfavourable results for Goods and Services Expenses (\$33.401M), Employee Related Expenses (\$18.718M), VMOs (\$1.078M) and RMR (\$0.508M).

Revenue

- GF Total Revenue for the month of July 2021 was \$17.738M (11.34%) favourable to budget, reflecting the favourable results from User charges (\$23.314M), Grants and Contributions (\$0.262) and unfavourable results in Patient Fees (\$1.217M), Other Sources of Revenue (\$1.621M) and Doubtful Debts (\$2.923M).

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$0.054M unfavourable to budget for the period of July 2021. This result reflects favourable budget variance for Expenditure (\$0.466M) and unfavourable budget variance for Revenue (\$0.520M).

CONSOLIDATED RESULT

For the period ended 31 July 2021, the consolidated YTD NCoS result for the General Fund and SP&T was \$35.424M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$52.642M), Doubtful Debts (\$2.923M), Loss on Sale of Asset (\$0.075M) and favourable variances for Own Source Revenue (\$20.217M).

FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

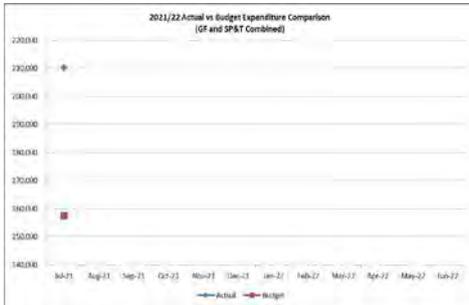
For the period ended 31 July 2021, SLHD recorded a Total Net Result of \$30.8596M which was \$35.376M (783%) unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for July 2021 was \$31.870M unfavourable to budget, reflecting unfavourable budget variances for Expenditure (\$52.135M) and offset with favourable to budget in Revenue (\$20.265M).

For the month of July 2021, Total Direct Revenue was \$20.265M favourable to budget, comprising favourable variance for the General Fund (\$20.737M) and unfavourable variance for SP&T Fund (\$0.472M). This result for the GF reflects unfavourable variance in Patient Fees and Other Income offset by favourable variances in User Charges and Grant Income.

Total Direct Expenditure for July 2021 was \$52.135M unfavourable to budget, comprising unfavourable variance for General Fund (\$52.693M) and favourable variance for the SP&T Fund (\$0.558M). The result for the General Fund reflects unfavourable variances in Salaries & Wages (\$12.946M), Overtime (\$3.182M), On-costs (\$2.590M), VMOs (\$1.078M), Direct Clinical Operating (\$14.894M), G&S Corporate (\$17.245M) and G&S Supporting Services & Utilities (\$1.262M).

MONTHLY BUDGET PERFORMANCE

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



LIQUIDITY

The cash balance at 31 July 2021 for the SLHD Operating bank account was \$32.104M and the Operating Cash book balance was \$31.962M.

CAPITAL WORKS – SMRS PROJECTS

As at 31 July 2021 the District's Full Year Capital works budget relating to SMRS Projects is \$12.975M comprising \$7.801M of MoH funded and \$5.174M of locally funded projects.

Actual expenditure as at the end of July 2021 was \$0.033M which is on budget.

OTHER CAPITAL PROJECTS

As at the end of July 2021, the District has not expended any amount on other capital projects.

CAPITAL WORKS

COVID-19 Projects

As a result of SLHD's COVID-19 response, a number of capital refurbishment projects have recently been undertaken to repurpose to existing facilities. An overview of these projects include:

- ICU Red and Blue RPA
- Wards 9W1 and 9W2 RPA
- Paediatrics Building 63 RPA
- Ward 1 North CRGH
- COVID-19 Swabbing Clinic Expansion RPA
- COVID-19 Vaccination Clinic Expansion RPA
- Waterview Vaccination Clinic Sydney Olympic Park

RPA

RPA Redevelopment

Key activities undertaken for the RPA Redevelopment in August 2021 are as follows:

- Continued development of the projects approach to the design competition, including liaison with DPIE and CoS.
- State Design Review Panel (SDRP) meeting held to present progress on the design of the preferred option.
- Finalisation of Value Management workshop Report
- Continued analysis of the data collected on the current state of campus traffic and assessment of traffic strategy options to inform planning.
- Engagement with NSW Ambulance to discuss Ambulance entry options

Parent and Baby Unit

Over the course of this reporting period, roof sheeting works, waterproofing for the Level 1 plantroom and external edging were completed. Service rough-ins for mechanical, hydraulic and electrical services were underway and internal framing was progressing well.

Building 63 RPU Hot Cells

Mechanical service works continued throughout August 2021 and cladding for the new external exhaust was completed. The tendering process for air monitoring controls was also underway. Due to restrictions in greater Melbourne Victoria, contractors have been advised they cannot access site until further notice.

Renal Dialysis PMBC Level 2

Over the course of this reporting period, tiling to the bathrooms and the RO loop installation was successfully completed. The installation of the ceiling has commenced and the fit-off for electrical services was nearing completion.

Concord

Concord Redevelopment

Key milestones achieved for the Concord Hospital redevelopment during June included:

- Atrium roofing complete
- Tiling and planter box installation complete
- Services witness testing commenced
- Continuation of internal fit out for Towers A, B and C
- Façade installation including glazing, Kingspan and terracotta underway

Building 20 – Research

The capital works program was successfully completed and has been handed over to the facility for occupation.

PLANNING

Vaccination Roll-Out

The Planning Unit continues to support the state-wide roll-out of the COVID-19 vaccinations as its prime and priority activity.

Canterbury – Stage 0 Planning

The Planning Unit has completed the development of the Canterbury Stage 0 Scoping Paper, outlining the process, timeframes and deliverables for this initial stage of facility planning. The key deliverables include two documents:

- Canterbury Capital Investment Proposal will align with the NSW Health Process of Facility Planning and the NSW Health 20 year Health Infrastructure Strategy. This document will outline, assess and prioritise five future infrastructure and non-infrastructure proposals for addressing the identified current and future need/demand for Canterbury to 2031 and 2036.
- Clinical Services Statement. This document will update the endorsed Clinical Services Plan assessment of service need and demand for Canterbury Hospital. This will include updated activity, forecasts and infrastructure requirements.

A consultant has been engaged by Health Infrastructure to work collaboratively with the District to support the new Phase 0 planning processes. She is involved in supporting the development of the future infrastructure forecasts.

Canterbury Hospital Dialysis Unit

The Planning Unit has collaborated with the Canterbury Hospital Executive and the Renal Medicine and Urology Clinical Stream to draft the plan for the Canterbury Hospital dialysis service.

Tech Central (Camperdown-Ultimo Collaboration Area)

- Planning continues in collaboration with the Greater Sydney Commission for a Tech Central brand, website, narrative, a set of case studies and a place collaboration tool (map). This is likely to be publicly launched in early October.
- Industry attraction, including deep tech labs, scale-up hubs and start-up developments remain a focus for Tech Central.
- Workforce attraction and development programs, in the form of internships, are also being developed.
- An intergovernmental workshop on digital connectedness in Tech Central was held. DPIE Smart Cities team and the NSW Telco Authority provided presentations on their strategic approach. It was agreed that these agencies would lead a Digital Connectedness Strategy for Tech Central.
- An SLHD presentation on Tech Central and CHERP has been completed at the CE's request for the NSW Health Precincts Committee.

The Camperdown-Ultimo Collaboration Alliance will focus on collaboration between the partners (including SLHD) on a series of projects including:

- Camperdown Biotechnology Hub. A project plan for the Camperdown sub-precinct Structure Plan is being developed by the Greater Sydney Commission, seeking interdepartmental co-funding for this plan, proposed to be led by the Inner West Council. This project plan will outline objectives, governance, and the role of landowning agencies in the Structure Plan. The Structure Plan will effectively provide a Master Plan for CHERP to ensure appropriate support for employment lands. The need for an Action Plan for the proposed Camperdown Biotechnology Hub has also been discussed.
- Transport connectedness. The drafted transport plan for Camperdown-Ultimo is being considered within the Transport portfolio.
- Precincts Calendar of Events. This calendar will leverage from the City of Sydney What's On team. The content will be provided by Alliance members.
- Tech Central Prospectus. The Tech central Prospectus, priding information for industry engagement is being drafted by the Alliance for consideration by Tech central governance.
- "Public realm" development. A working group on place making will examine opportunities in the precinct.

RPA Clinical Services Plan

Discussions continue between the District and the Ministry for Health on the proposed radiology requirements for RPA. This is the last remaining issue for resolution prior to the full endorsement of the RPA Clinical Services plan (CSP). This is expected to be resolved shortly.

RPA Ambulatory Care

The Planning Unit continues to develop the in-depth plan and forecast for RPA Ambulatory Care services, taking into account the impacts of COVID, virtual care and changing models of care.

Projections will span 2026 and 2031 and be developed individually for each clinical area, based on MoH forecasting tools. Due to COVID, consultations with non-inpatient clinic staff have been suspended.

Other Plans

The following plans are being supported to some extent by the Planning Unit, although much of this has been suspended due to COVID.

- SLHD Mental Health Strategic Plan.
- SLHD Workforce Strategic Plan.
- SLHD Education Strategic Plan.
- SLHD Digital Health Strategy.

SYDNEY RESEARCH

Sydney Research Team

We are pleased to announce that Ms Mariam Damen and Ms Asra Gholami will be joining the Sydney Research team as the new Executive Officer and Project Manager (Embedding Quality Research). With a background in medical science and experience in the office of the Royal Prince Alfred General Manager and Medical Training and Assessment Unit, Mariam Damen started in the role on Monday 23 August 2021 and will become a valued member of the core Sydney Research team. Asra Gholami will be seconded from the Sydney Children's Hospital Network (Westmead) Research Office and will commence in her new role on Monday 6 September 2021, where she will play a vital role in progressing the research governance reform initiative of the state-wide Embedding Quality Research Steering Committee.

While working from home, Sydney Research have regular catch-up meetings and undertake regular well-being checks across team members and with colleagues.

COVID-19 Operational Support

Sydney Research continues to support Sydney Local Health District (SLHD) in its response to COVID-19 and with the vaccination program. The team participates in the regular COVID-19 Steering Committee meetings and communicates the latest information to SLHD and Sydney Research stakeholders.

To date, the Sydney Research team has secured interest from 81 staff and family members associated with our partnering Medical Research Institutes. These individuals will support the District's COVID-19 response, vaccination centres, Special Health Accommodation (SHA), rpavirtual or general hospital services during this period of high demand as a result of the recent Delta strain outbreak in Greater Sydney and surrounds. These individuals have a diverse range of professional experience, including general practitioners, midwives, physiotherapists, pharmacists and those willing to provide communications and administrative support, as well as multi-cultural backgrounds and diverse language-speakers – including Chinese, Mandarin, Cantonese, French, German, Dutch, Vietnamese and Spanish.

Franklin Women

2021 Teresa Anderson Scholarship

Franklin Women announced a new scholarship titled after Dr Teresa Anderson AM on Monday 2 August 2021. The 2021 Teresa Anderson Scholarship aims to support health and medical researchers that are experiencing additional unexpected caring responsibilities as a result of the COVID-19 pandemic, and required to balance these additional responsibilities with full-time work or research. The title of this scholarship is in recognition of Dr Anderson's contributions to Franklin Women, the research

community, and towards supporting the community in the COVID-19 response and vaccination program. It is also an acknowledgement of the \$2,500 contribution made by SLHD towards the scholarship program in addition to contributions made by members of Franklin Women.

By providing up to \$1,000 in funding, the 2021 Teresa Anderson Scholarship will support leading or up-and-coming researchers by reducing the burdens associated with caring responsibilities, including through food services, grant/technical writer services, travel costs, virtual conference fees or professional coaching support to assist with navigating professional and personal stresses/barriers during this difficult period.

Applications for the 2021 Teresa Anderson Scholarship closed on Saturday 22 August 2021. There were 12 applications received, and the Franklin Women team will provide a summary of the recipients, amount requested and allocation of funds over the coming week.

Flexible Working 101

Ms Penny Vogelzang, A/Deputy Director, Sydney Research and Ms Akila Dharmendar, Clinical Trial Business Manager, SLHD Research participated in a Franklin Women seminar on Thursday 26 August 2021 titled 'Flexible Working 101: What It Really Means and How to Go About It'. The seminar was led by Ariane Virtue, co-founder of Flex We Are, focussing on flexible working, ways to achieve work goals at home and supporting individual wellbeing.

NSW Office for Health and Medical Research (OHMR) – Translational Research Grants Scheme
Sydney Research continues to support the successful projects in Rounds 1-5 of the Translational Research Grant Scheme (TRGS).

The SLHD internal deadline for TRGS Expressions of Interest (EOIs) closed midnight 16 August 2021. We have received 10 EOIs, which is a reduced number than previous years which ranged between 20-25 EOIs. We understand the reduced number is related to the burdens associated with the COVID-19 response and recent lockdowns that have significantly delayed initial consultations and planning for these projects. Other NSW Public Health Organisations involved in the scheme have had a similar response in their application process. Sydney Research raised these concerns with Dr Tony Penna, Executive Director, OHMR and the OHMR team, who have since announced a 4 week extension to allow for application refinement, review and relevant approvals.

The SLHD EOIs have been distributed to an Expert Review Panel, consisting of

- Prof Warwick Britton, Director of Research, SLHD
- Prof Michael Fulham, Clinical Director of Medical Imaging, SLHD
- A/Prof Georgina Clark, Director, ANZAC Research Institute

The Expert Review Panel will assess each application and provide feedback, identify areas for improvement and recommend the top five (5) applications for Chief Executive review. With the additional time and feedback of the Review Panel, Sydney Research will consult and work with the Chief Investigators to strengthen their applications prior to submission to the Chief Executive. The Chief Executive will have the final review and endorse five applications for submission to OHMR. The revised TRGS timeline can be seen below:

Dates	Stage
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Board Report

16 June 2021	EOI opens – information released via the NSW Office for Health and Medical Research, CE Memo, Sydney Research and SLHD Research.
Midnight, 16 August 2021	SLHD Internal Deadline
20 August 2021	All applications and marking rubric sent to the SLHD Internal Review Panel
5pm, 6 September 2021	Deadline for SLHD Internal Review Panel feedback to Ms Penny Vogelzang, SLHD TRGS Coordinator
7-17 September 2021	Opportunity for CI's to address feedback of Review Panel and refine applications
22 September – 4 October 2021	SLHD Chief Executive to review all feedback and endorse five applications
5 October 2021	Ms Vogelzang to arrange partner organisation endorsement for the selected SLHD EOIs
18 October 2021	Deadline for partner organisation approval
5pm, 22 October 2021	Deadline for SLHD EOIs are submitted to the NSW Office for Health and Medical Research
November 2021 - January 2022	EOI review period
31 January 2021	EOI outcomes notified , feedback provided, and invitation to submit a Full Application for those successful
15 March 2022	Deadline for Full Applications
31 May 2022	Successful applications announced

NSW Office of Health and Medical Research (OHMR) – Embedding Quality Research

NSW OHMR and Sydney Research are leading the development of a project focussed on investigating potential solutions towards a more effective and efficient research governance model. An Expert Working Group has been established, involving SLHD, NSW OHMR, and four senior Research Directors across different metropolitan, rural and regional Local Health Districts, to provide guidance in determining the strategic direction for the project. The Expert Working Group have met on a fortnightly basis since early June 2021, and have finalised a proposal outlining the objective, program of work and timeframe for the research governance project. The final proposal will be presented to the NSW Health Secretary over the next week.

To support the research governance project's progression, Sydney Research have established a new Project Manager (Embedding Quality Research) position in collaboration with and funded by the NSW OHMR. Following a competitive selection process Ms Asra Gholami will commence in this new role on Monday 6 September 2021, and will be led by Adj A/Prof Vicki Taylor, Executive Director, Sydney Research and Prof Terry Campbell, Director of Research, St Vincent's Hospital Network. Asra will undergo orientation and briefings with Vicki, Terry and James Cokayne, Principal Policy Officer, OHMR prior to the next Expert Working Group meeting on Thursday 9 September 2021. Due to the current situation, Asra will be working from home as she commences in the position, Sydney Research have developed an orientation pack and have scheduled a series of virtual meetings as an introduction to the role and the research governance project.

NSW Office of Health and Medical Research (OHMR) – Clinical Trial Management System (CTMS) Initiative

Adj A/Prof Taylor has been representing SLHD on the CTMS Project Steering Committee, chaired by Dr Antonio Penna, Executive Director, NSW OHMR. Following the last meeting on 16 June 2021, an

Expression of Interest to determine the implementation staged rollout and initial pilot of the CTMS was circulated to all participating organisations. OHMR indicated a preference for one metropolitan Local Health District and one rural/regional Local Health District to initially pilot the CTMS. After consulting with Dr Teresa Anderson AM, Chief Executive, SLHD, Prof Warwick Britton, Director of Research, SLHD and the SLHD Research team, Sydney Research indicated the preference for SLHD to implement the CTMS in the second half of 2022.

Sydney Research have since received the following update from Ms Shelley Burnett, Senior Project Officer, OHMR. The chosen vendor and proposed structure for the CTMS has been approved by the NSW Health Secretary. OHMR are expecting that the vendor contract and implementation order will be approved over the coming week, with a formal announcement to follow. It has been confirmed that Sydney Local Health District will be implementing the new CTMS in Q3 2022. OHMR have also confirmed that 12 change managers will be recruited to support the implementation, and large Local Health District will not be introducing the platform at the same time.

The CTMS Working Group involving Prof David Cook and Merela Ghazal from SLHD Research will reconvene later this year to discuss and finalise common terminology, documents and inclusions for the proposed CTMS structure. In consultation with Sydney Research and SLHD, OHMR are developing a communications and training strategy and NSW Health-wide communique on the CTMS implementation process.

Clinical Trials Alliance

Sydney Research has been involved in discussions to establish a collaboration between SLHD, NSW OHMR, the NHMRC Clinical Trials Centre, University of Sydney and Sydney Health Partners to strengthen the capacity, efficiency and impact of clinical trials in NSW. The primary objective of the Alliance is to establish processes and new infrastructure that will be universally accessible and secure NSW as a global destination for clinical trials

A monthly Think Tank series led by Prof Meg Jardine, Director, NHMRC Clinical Trial Centre has been arranged with Sydney Research, Dr Teresa Anderson AM, Dr Antonio Penna, Executive Director, OHMR, Prof Robyn Ward, Executive Dean and Pro-Vice Chancellor (Medicine and Health), University of Sydney, and Prof Don Nutbeam, Executive Director, Sydney Health Partners. The most recent meeting was held on Tuesday 28 July 2021, where it was agreed that a proposal outlining an initial strategy for the Alliance would be developed to seek the support of the NSW Health Secretary and University of Sydney. A Project Manager has been appointed by the NHMRC Clinical Trial Centre to support the development of this proposal prior to the next Think Tank meeting on Monday 27 September 2021.

Sydney Biomedical Accelerator Complex

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. Dr Teresa Anderson AM and Adj A/Prof Vicki Taylor are the SLHD Executive Leads on this project.

Sydney Research has been meeting with the University's Infrastructure and Strategic Ventures team to progress design planning for the new SBA Buildings B and C. A Steering Committee involving Dr Teresa Anderson AM, Prof Robyn Ward AM, and Prof Duncan Ivison has been scheduled for Friday 3 September 2021 to finalise design approach and next steps for the SBA Complex.

Medihood

Dr Duncan Macinnis, Director of Stakeholder Engagement (NSW and ACT), MTPConnect and member of the Sydney Research Council contacted Sydney Research to inform the District of the Medihood device that potentially could support our services during the Sydney outbreak involving the more infectious Delta-strain of COVID-19. Medihood is a personal ventilation hood and portable solution to the negative pressure room created to improve the care of COVID-19 patients in isolation, while also protecting hospital staff from infection. It is a transparent hood designed to contain expired aerosols, which are then drawn out by an extraction unit and filtered through a H13 HEPA filter.

After consulting with the Chief Executive, Sydney Research arranged a demonstration of the device and discussion on Tuesday 24 August 2021 involving the Medihood team, the Executive Director of Medical Services, Clinical Governance and Risk, and a number of Staff Specialists and Clinical Nurse Consultants in Infection Control, Infectious Diseases, Emergency Medicine and Intensive Care. An additional internal meeting was held on Wednesday 25 August 2021 to determine the clinical applicability, use and risks associated with the Medihood device within the context of an Intensive Care Unit or Emergency Department in SLHD. From this discussion, there were a number of concerns raised relating to the practicality, infection control and applicability of the device within the SLHD context. A brief summarising the internal clinical evaluation and recommendations of all SLHD staff involved has been submitted to the Chief Executive and A/Executive Director, Operations, SLHD.

Sydney Health Partners

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

SHP Implementation Strategy

- SHP are undergoing a restructure to streamline the existing clinical streams and themes into clinical academic groups. The process and expression of interest to establish a clinical academic group is still being finalised, with an announcement expected later this year.
- 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

- 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 a key contributor to this initiative with both Sydney Research and SLHD Research represented on the Advisory Panel.
- The Panel met on 5 July 2021 and an update was provided on the following initiatives led by SHP and the Panel
 - **SHP Clinical Trials Pilot** – Centralised Recruitment Project (CTP-CRP) to establish and evaluate the implementation of a Centralised Recruitment Service pilot at Royal North Shore Hospital. The Clinical Trials Recruitment Officer position to support this initiative was advertised and a successful candidate commenced in the role on 15 June 2021. The project will collect metrics around recruitment, and it is expected the project will help inform different strategies for improving recruitment outcomes.

- **Development of HREC Training Module** – A collaboration agreement between PRAXIS, SPHERE and SHP has been developed to develop a simple introductory training module for new HREC members and Governance Officers. An initial pilot of the training module is expected to occur later this year, with Prof David Cook, SLHD Clinical Trials Development, Support and Governance Lead participating in this pilot program representing SLHD.
- **Electronic Trial Management System** – In collaboration with the Clinical Trial Support Office at the University of Sydney, a resource has been developed and implemented in June 2021 to allow researchers to move to an Electronic Trial Management System for document storage throughout the clinical trial life cycle. Supporting guidelines have also been developed and a training presentation will be released in August 2021 to support research staff in the implementation of this resource.
- **National Clinical Trials Governance Framework** – Prof Warwick Britton provided an overview of the RPA pilot for the National Clinical Trial Governance Framework to the panel and highlighted key lessons learned that are applicable for other organisations soon to undergo the accreditation process.
- **Future Projects** – The Panel briefly discussed and brainstormed ideas for future projects/ initiatives that could be progressed under the Clinical Trials Advisory Panel. Once agreed, these projects will be pitched to the NSW OHMR as part of the final report due in August 2021.

SHP Research Translation Fellowship Program

- Using the remaining allocated funds from the MRFF Rapid Accelerated Research Translation scheme and with the support of the SHP Board involving Dr Teresa Anderson AM and Adj A/Prof Vicki Taylor, SHP have developed the Research Translation Fellowship program to provide protected time for clinicians, health professionals and researchers to upskill in research translation methods and implement health care projects.
- As part of the program, fellows will be completing a research translation project and while doing so, will be provided with a salary stipend (0.4-0.5FTE) and support for learning and professional development.
- An online information session on the program will be held on Wednesday 4 August 2021, with applications for this program due COB Monday 30 August 2021.
- Sydney Research have been supporting the submission of applications by Dr Merran Findlay and Dr Tim Wand to this scheme

SHP Clinical Academic Groups

- Groups of clinicians and translational researchers are now invited to apply to establish a Sydney Health Partners (SHP) Clinical Academic Group.
- Under a specific clinical discipline or population group, these Clinical Academic Groups aim to accelerate the transfer of research innovation into health care improvements, and replace the previous themes and streams component of the SHP Strategy.
- Financial support will be available for each CAG with funding up to \$50,000 per annum as well as substantial in-kind support from the SHP Secretariat.
- The deadline for applications is 4 October 2021.
- Sydney Research has circulated the opportunity and will assist with any applications submitted by SLHD staff.

Sydney Research Council

Due to the focussing of efforts for the NSW Health Vaccination program, the Sydney Research Council meeting scheduled for Tuesday 31 August 2021 has been deferred to Tuesday 28 September 2021.

The next meeting of the Council will have presentations by Prof Richard Scolyer and Prof Georgina Long, Co-Medical Directors, Melanoma Institute Australia – a new partner of Sydney Research - and Dr Kate McBride and Dr Daniel Steffans from the RPA Institute of Academic Surgery and Surgical Outcomes Research Centre (SOuRCe).

Other Activities

In addition to the above, Sydney Research have participated or continue to support the following key activities in SLHD and with interagency partners:

- ClinTrial Refer and a potential new SLHD-branded application
- SHP Board Meeting
- Concord Consumer Network meeting – presenting PFCC initiatives
- Investment NSW Roundtable with representatives from China on NSW research and innovation
- Business Sydney Webinar with Amy Brown, CEO, Investment NSW
- TRGS Round 5 EVIDENCE Study Working Group
- Tech Central Communications Strategy with Greater Sydney Commission, Health Infrastructure NSW and the University of Sydney
- OneGov Steering Committee
- Join Us Governance Committee
- ACTA Advisory Council
- ANZAC Research Institute Transition to SLHD planning meetings

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 823 subscribers
- The PFCC Research Working Group bi-monthly newsletter, 'Consumers in Research', has an audience of 162 subscribers.
- @SydneyResearch currently has 1,143 followers on Twitter

COVID-19 UPDATE

The District continues to perform well in relation to our staff vaccination program, 82% of the District's total staff having received their first COVID vaccination and 80% having received both vaccinations. A small number of staff have declined to be vaccinated, due to reasons such as pregnancy or attempting to become pregnant. All staff that have decline to receive the vaccination have been moved to low risk areas.

SLHD

- Central coordination of COVID-19 activities through the SLHD Operations Centre, central coordination of supply and ordering of PPE, equipment and other issues.
- Special Flying Squad Teams established to support community testing, Special Health Accommodation and other sites.
- Mobile Vaccination Clinics established to provide access to vulnerable communities to COVID-19 vaccination.

SLHD Facilities

- Expanded ICU capacity at RPA, Concord and Canterbury Hospitals in the event of surge in demand due to an outbreak.
- Expanded Renal Dialysis surge capacity to match projected need in the event of an outbreak developed.

- Expanded inpatient COVID-19 ward spaces made available and utilised to manage COVID-19 positive and close contacts at RPA, Concord and when required Canterbury Hospitals.
- Continued Staff and Visitor Screening Stations to check all people entering the health facilities at all sites.
- Expanded community based COVID-19 Screening Clinics established Eddy Ave, Redfern, Summer Hill, and Roselands, capable of seeing between 1-2,000 people per day. Working closely with private providers to ensure rapid establishment of COVID-19 testing sites to assist with outbreak management.
- Continued COVID-19 Screening Clinic processes and testing of these in areas of special need such as social housing areas like Waterloo, Riverland etc.
- Continued to ensure COVID-19 Clinic surge capacity
- Expanded facility based COVID-19 Screening Clinics established at RPA, Concord and Canterbury Hospitals capable of seeing between 400-1000 people per day.

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.
- Enhanced and expanded Contact Tracing through the SLHD Public Health Unit for locally acquired cases. Support to NSW Health and the State of Victoria in providing contact tracing to assist their outbreak management team.
- Assistance provided to NSW Health in providing Special Health Accommodation for incoming international passengers under the Public Health Order requiring medical supervision.

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.
- to be quarantined presenting with conditions requiring enhanced medical monitoring.
- Provision of specialist accommodation for aircrew who require to use CPAP.
- At the end of August 2021, the SHA had 907 patients of which 709 were positive cases.

Airport and Railway Operations

- 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.
- Continued the NSW Health Testing Program for Airport Workers at Sydney International Airport (Saliva Testing) and Daily testing.

SLHD Tiger Teams 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
- Continuation of Fit Testing for staff
- Commencement of Fit Testing for staff from high risk areas, note this is on top of existing Fit Checking that currently occurs.

SLHD COVID-19 Support Centre

- Establishment of the SLHD COVID-19 Support Centre to answer enquiries regarding from people seeking assistance with general COVID-19 enquiries.
- Enhancement of the SLHD COVID-19 Support Centre to assist with enquiries regarding NSW Health Testing Program (Saliva Testing).
- Enhancement of the SLHD COVID-19 Support Centre to provide assistance to GPs with results from patients undertaking COVID-19 testing.
- Provision of assistance with members of the general public who have difficulty booking into either the NSW Health Vaccination Centre of the RPA Vaccination Centre or require to change their appointment date due to illness, self-isolation or other factors.

Quarantine Facility Surveillance Testing Program

- Coordination of and support for the NSW Health Testing Program (Saliva Testing) for Quarantine Facilities (NSW Police managed quarantine hotels). Continued to work with HCA to manage NSW Health (Saliva) Testing Program at Quarantine Facilities. This requires workers in quarantine facilities to participate in daily saliva swabbing for COVID-19.
- Continued management of the SLHD COVID-19 Support Centre to provide phone support to people required to undertake saliva testing as part of the NSW Health Testing Program.
- Continued management of NSW Health Testing Program for quarantine and border workers at Sydney Airport.
- Established the Surveillance Testing Program at Sydney International Airport for all border workers.
- Opening and running for drive through saliva testing clinic for airport transport drivers to ensure they have the ability to quickly and efficiently participate with the NSW Health Testing Program.

COVID-19 Vaccination Hub and Vaccination Clinic

- Sydney LHD was 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. The District has now completed more than 1 million vaccinations and has the following vaccination capability:

- NSW Health Vaccination Centre – (1 Figtree Drive) now has the ability to vaccinate 12,500 people per day
- WaterView in Bicentennial Park – with the ability to vaccinate 4,000 per day.
- Canterbury Hospital Clinic – with the ability to vaccinate 500 per day
- RPA Vaccination Clinic – with the ability to vaccinate 4,500 per day
- Sydney Airport Clinic – with the ability to vaccinate 600 per day
- Mobile Vaccination Clinics x 3 with the ability to vaccinate between 400-750 per clinic per day.
- Continued management of Flying Squad model to provide COVID-19 vaccinations to RACF, Ports, Disability Homes and other areas, in addition to in-reach to selected speciality clinics at RPA and Concord Hospital.
- Continued management of Vaccination related Health Information issues including error reports, data integrity checks, reviewing automatic extracts Medicare Australia via the Australian Immunisation Register (AIR).
- Continued management and monitoring of Policed Managed Quarantine Hotels, Airport and Special Health Accommodation vaccination compliance.
- Continued management of Flying Squad model to provide COVID-19 vaccinations to RACF, Ports, Disability Homes and other areas, in addition to in-reach to selected speciality clinics at RPA and Concord Hospital. The District continued to provide mobile clinics with a focus on communities with significant disadvantage. This has included at Lakemba, Campsie, Greenacre, Riverwood, Redfern, Waterloo and Glebe.



Dr Teresa Anderson AM

Chief Executive

Date: 20.9.21