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## Sydney Local Health District

### Meeting One Hundred and Eighteen of the Board

Date: Monday 20 December 2021

Time: 8.00am - 10.00am

Venue: Via Zoom

Chair: The Hon. John Ajaka, Chair

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#### 1. Present and apologies

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

#### Apologies

Ms Kerry-Anne Hartman, Member

#### In attendance

Mr Jim Mitchell, Chair SLHD Audit and Risk Committee (8.00am – 8.45am)  
Dr Alicja Smiech, Chair, Medical Staff Executive Council  
Ms Nerida Bransby, Secretariat

#### 2. Welcome and introductions

The Chair acknowledged the traditional owners of the land.

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

A/Professor Christine Giles declared that her appointment to work on the Virtual Health Report is now complete. This item can be removed from the Conflicts of Interest Register.

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

# Minutes

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## 4. Confirmation of previous minutes

### 4.1 Minutes of the previous meeting held 15 November 2021

The minutes of the Board Meeting held on Monday 15 November 2021 were moved and seconded as a true and accurate record of the meeting.

The Chair signed the minutes.

### 4.2 CE Report – November 2021

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

Mr Jim Mitchell, Chair SLHD Audit and Risk Committee provided a verbal report including:

- The SLHD Audit and Risk Committee met eight times in the year, four meetings held for general business and four meetings to look at the financials.
- This Committee works with the NSW Audit Office, the SLHD Clinical Governance and Risk Team, SLHD Audit Team and the SLHD Finance Department.
- Internal Audit functions include Cyber Security and RPA Virtual Hospital.
- Emerging Risks – Cyber Security is a standing item on all agendas.
- Looking at Internal Audit Functions and Future Plans.
- Membership consists of three independent members and two Board members.
- Feedback to MoH re climate change.
- Audits done by seeing and hearing during COVID.
- Important discussions are had at meetings lasting three hours.
- Good relationship with NSW Audit Office.
- Grateful for Board Members membership on the Audit and Risk Committee.

The Board discussed:

- Supply change issues with system changes.
- Assistance provided by Internal Audit throughout the COVID response including screening and vaccination processes.
- Internal Audit maintain good audit plans.
- Supply Chains system issues changes for discussion at the meetings next year.
- Board assurance processes are robust.

Mr Mitchell thanked the Board for the opportunity to attend the meeting and wished everyone a Merry Christmas.

The Committee thanked Mr Mitchell for attending the meeting.

## 5. Matters arising from the previous minutes

### 5.1 Action sheet

The Board received and discussed the action list including:

- The Board considered the Risk Management Plan for the Quarantine Program. Due to the confidentiality of this plan, the Board agreed the plan should only relate to the Special Health Accommodation.
- The Board received the information for further breakdown of serious system issues versus common complaints. This agenda item can be removed from the register.
- The Board received the information for further breakdown of Patient Complaints relating to communication issues. This agenda item can be removed from the register.

## 5.2 Elective Surgery Recovery Plan

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

## 6. Patient Story

Dr Anderson provided a verbal report from a grateful family whose mother was a patient in the Aged Care Ward (8 West 1) at RPAH.

## 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:

- 8.1 Performance Review Meeting held on 15 December 2021 with the Board Chair and Chief Executive.
- 8.2 Performance Review Meeting held on 16 December 2021 with the Secretary, MoH, Board Chair and the Chief Executive.
- 8.3 Tours of the facilities are now complete and were very beneficial.
- 8.4 Congratulations to Balmain Hospital on their recent accreditation and receiving no recommendations.
- 8.5 The AGM went extremely well.
- 8.6 A meeting was held with the Council of Board Chairs.
- 8.7 Six new members have been appointed to the SLHD Board. Ms North and Dr Haines have been re-appointed.
- 8.8 Committee Structure Membership is to be discussed with the Board Chair and Chief Executive. Any requests for changes to committee membership is to be provided to the Chief Executive.

## 9. Chief Executive's report

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

- As requested COVID-19 information updates have been relocated to the beginning of the Chief Executive's Report and incorporating:
  - The District is overseeing eleven committees to manage the individual RACF outbreaks
  - Staff holidays are being reviewed
  - An "on-call" system is being put in place for staff to manage outbreaks
  - Sydney Olympic Park will upgrade to seven days per week in January 2022
  - Vaccinations program for five to eleven years will commence on 10 January 2022
  - Child and Family Centres will assist in the vaccination program for children
  - Sites are being modified for children to receive their vaccination and they will receive a "bravery" award
  - Elective Surgery Recovery Plans are being monitored weekly.
- According to the Ministry of Health Framework, the District remains at performance level zero, which is the highest level achievable.
- The District has managed to secure a site at Callan Park for the Mental Health step down beds and a new unit at Concord for thirty eight new forensic beds. This should impact the mental health readmission rates.
- Redesign and Service Improvements are progressing well.
- HealthPathways are progressing well.
- For the period ended 31 October 2021, GF Expenditure was \$82.526M (9.91%) unfavourable to budget. The District has assessed the YTD October 2021 COVID-19 Incremental cost as \$286.505M. The District's unfavourable result for YTD October 2021 was primarily due to COVID-19 incremental expense of \$81.782M and the delay in budget supplementation. The District has received the September 2021 COVID-19 Stimulus Budget of \$84.092M in October 2021. Excluding the impact of COVID-19, the District is \$745K unfavourable to YTD October 2021 Expense budget.
- Sydney Research is on-going and progressing very well.

### 9.1 Finance and Performance Reports

#### 9.1.1 SLHD Board reporting pack – October 2021

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

#### 9.1.2 Selected Performance Indicators – September 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 for the period July to September 2021 was not available.

## 9.1.5 HAC Committee Report

The Board received, read and noted this report including the work being conducted on the cohort of patients at Balmain for endocrine complications.

## 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 this report for the period July – September 2021 including:

- Consider a high dependency unit medical officer for overnight shifts.
- Complaints data including:
  - How did the District interpret the type and number of serious systems incidents and is there an action plan in place to address these themes
  - What were the communications issues that people were upset about
  - Admin data is limited for analysis and improvements.

The Board discussed and agreed to a six monthly breakdown report of these complaints.

### (ii) Infection Control

The Board received, read and noted this report, in particular, there are no areas of concern and no recommendations.

### (ii) SLHD Risk Register

The Board received, read and noted this report.

9.5 Audit and Risk Committee Report (period 15 September 2021 – 17 November 2021)

The Board received, read and noted this report for the period 15 September 2021 - 17 November 2021.

9.6 Facility Reports – October 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.

(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.

(xii) Tresillian

The Board received, read and noted the Tresillian report.

(xiii) Lifehouse

The Board received, read and noted the Lifehouse report.

(xiv) Public Health Unit

The Board received, read and noted this report.

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

The Board received, read and noted this report.

(xvi) Croydon / Marrickville / Redfern Community Health

The Board received, read and noted this report.

## 10. Matters for approval / resolution

10.1 Terms of Reference - Strategic Communication and Partnerships Committee

The Board received, read and endorsed the updated Terms of Reference.

10.2 Board Calendar of Reports for 2022

The Board received, read and endorsed the updated Calendar of Reports for 2022.

## 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 November 2021.

11.2 Education and Research Committee

The Board received, read and noted the minutes of the meeting held on 15 November 2021. A/Professor Giles, Chair of this committee advised:

- This Committee's key achievements and performance against the Strategic Plan has met all targets.
- Some performance indicators could be refined.
- Research being overseen and conducted has been outstanding.
- Education team are performing well despite COVID being a priority.

11.3 Communications Committee

The Board noted the next meeting will be held on 1 February 2022.

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## 11.4 Audit and Risk Committee

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

## 11.5 Health Care – Clinical Quality Council

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

## 11.6 Health Care – Clinical Council

The Board noted the meeting to be held on 24 November 2021 was cancelled. It is to be noted that this Committee held many out of session discussions and updates during COVID-19.

## 11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 4 February 2022. Dr Smiech advised the Board of an invitation sent to Dr Bethan Richards, Director of the MDOK Program to participate in this Committee. The invitation was accepted.

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

The Board noted the meeting to be held on 16 December 2021 was cancelled.

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

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

## 11.10 Organ Donation for Transplant – Quarterly Report (October 2021 – December 2021)

The Board noted the report for the period October 2021 – December 2021 is due in February 2022.

## 12. Other Committee reports / minutes

### 12.1 Sustainability Committee (bi-monthly)

The Board received, read and noted the minutes of the meeting held on 16 November 2021.

### 12.2 Medical and Dental Appointments Advisory Committee

The Board received, read and noted the minutes of the meeting held on 13 October 2021.

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

The Board noted the meeting to be held on 15 December 2021 was cancelled.



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## 12.4 Finance Leaders Forum

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

## 12.5 NSW Health / SLHD Performance Review Meeting

The Board noted the meeting was held on 10 December 2021.

## 12.6 Organ Donation for Transplantation

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

## 12.7 Major Procurement, Assets and Imaging Steering Committee

The Board received, read and noted minutes of the meeting held on 9 November 2021. Dr Anderson advised that she is a member of the State-wide Procurement Committee.

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

The Board received, read and noted the minutes of the meeting held on 16 November 2021.

## 12.9 Concord Hospital Redevelopment Executive Steering Committee

The Board received, read and noted the minutes of the meeting held on 20 October 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 2 December 2022.

## 12.11 Security and Violence Prevention Committee

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

## 13. Matters for noting

### 13.1 Pregnancy Family Conferencing Annual Report 2020 – 2021

The Committee received, read and noted this report including:

- New Minister for Family and Community Services and Disability.
- Number of Aboriginal Children in out of home care.
- Tracking of data for families and children.
- Good partnership with the Department of Communities and Justice.
- Pregnancy Family conferencing.

13.2 Annual Report - Allied Health Research and Education Partnership  
- Faculty of Medicine and Health - University of Sydney

The Committee received, read and noted this report. The Board commended the team for their work on the key achievements in 2020.

13.3 RPA Virtual

The Board received read and noted the Board visit presentation and the Evaluation Report for the period February 2020 – January 2021 including:

- In a position to lead research in this area.
- Large amount of research and should be made more explicit.
- Virtual Health and Research Steering committees are ongoing.
- The Research Showcase was held on 14 December 2021.
- Discussions between the Chief Executive and the Secretary are to occur re the Evaluation Report.

13.4 Letter of Appreciation from Lord Mayor of Sydney

The Board received, read and noted this correspondence.

13.5 Memo Priorities 2021/2022

The Board received, read and noted this correspondence.

## 14. Other Business

Nil to report

## 15. Next Meeting

The next meeting will be held on Monday 21 February 2022 at 9.00am virtually or in person.

The Board Chair congratulated the District on remaining on performance level zero for the duration of the pandemic and wished everyone a Merry Christmas.

The Chief Executive advised the District staff remain focused, thanked the Board for their support and wished them a Merry Christmas.

The meeting closed at 10.20am

  
Chair

21/12/22  
Date

# Board Report



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

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### **COVID-19 UPDATE – end of October**

#### **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.
- Daily escalation meeting with the Public Health Unit and Outbreak Management Teams were established to provide oversight and coordination for Social Housing, RACF & Disability Homes and Commercial Venues. There were four active RACF in red lockdown, six Disability Group homes and two venues of concern in October 2021.
- A celebration event planned in partnership with the SHEOC and Western Sydney Local Health District and SHEOC was held on 8 November 2021 at Qudos Bank Area for our NSW Healthcare Heroes who have worked tirelessly in our vaccination centres and hotel quarantine services. It was a great event and very much appreciated.

#### **SLHD Facilities**

During November, COVID presentations and hospitalisation have significantly decreased and are significantly less than what had been projected. Towards the end of November 2021, RPA, Concord and Canterbury Hospitals have progressively increased internal surgical capacity back to around 75 per cent in line with the MoH guidelines. Activity during this time included the following:

- Maintained 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.
- Maintained 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.
- Creation of Staff and Visitor Screening Stations to check all people entering the health facilities established at all sites.
- Continued Staff and Visitor Screening Stations to check all people entering the health facilities established 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 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.
- Provided assistance to NSW Health in providing Special Health Accommodation for incoming international passengers under the Public Health Order requiring medical supervision.

## Airport Operations

- Alongside the changes to the Public Health Order in relation to Hotel Quarantine for return travellers, the Airport Screening Team ceased operations at Sydney International Airport on Sunday 31 October 2021 after 20 months.
- The saliva testing at Sydney International Airport and the Police Managed Quarantine Hotels also ceased on 1 November 2021. The District completed over 1 million saliva surveillance tests across the Quarantine and vaccination program.
- The Airport Vaccination Clinic remains in operations within the Qantas Seamless Transfer Lounge to provide booster shots to airport and border workers.

## SLHD Tiger Teams

- 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
- Continued Fit Testing for staff from high risk areas, note this is on top of existing Fit Checking.

## SLHD COVID-19 Support Centre

- Continued the SLHD COVID-19 Support Centre to answer enquiries regarding from people seeking assistance with general COVID-19 enquiries.
- Continued enhancement of the SLHD COVID-19 Support Centre to assist with enquiries regarding NSW Health Testing Program (Saliva Testing).
- Continued 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 or the RPA Vaccination Centre or require to change their appointment date due to illness, self-isolation or other factors.
- Support to the Quarantine Facility Vaccination Program.

## Vaccination

- The District won the 'Putting the customer at the centre' category in the NSW Premier's Awards for establishing the first mass vaccination centre in NSW and vaccinating more than 300,000 people in the first two months of operations.
- The District managed vaccination centres have administered over 1.4 million vaccine doses since the vaccination program commenced in February 2021. The District has continued to support the NSW Health Vaccination Program through a range of fixed and mobile vaccination clinics including the following:
  - NSW Health Vaccination Centre – (1 Figtree Drive) with an ability to vaccinate 12,500 per day

- RPA Vaccination Clinic – with the ability to vaccinate 4,500 per day
- Sydney International Airport Clinic – with the ability to vaccinate 600 per day
- Redfern (Koori) Clinic – now opened in 119 Redfern Street 5 days per week.
- Ultimo Clinic – now open in Ultimo Community Centre 5 days per week.
- Continued the Mobile Vaccination Clinics.
- Continued the Outbreak Management vaccination teams to support and vaccinate people identified by the Outbreak Management Team leads.
- Continued the Social Housing Vaccination teams targeting residents of various social housing areas.
- Continued the Aboriginal Task Force which was established to provide assistance to Aboriginal families who have been affected by COVID-19
- Continued vaccination teams at the SLHD COVID Testing Clinics to offer vaccine to people presenting to be swabbed who have not been vaccinated.
- Contact made with all Secondary High Schools within SLHD offering bespoke vaccination clinics on site.
- 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.

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## Special Health Accommodation (SHA)

- Provision of accommodation for community transmission cases who are unable to safely self-isolate in the home environment.
- Provision of alternative accommodation facilities for those requiring to be quarantined presenting with conditions requiring enhanced medical monitoring.
- Special close contact accommodation established.
- Specialised accommodation for difficult patients developed and to handle people held under s62's.
- There were 667 admissions to SHA in the month of October 2021 of which 654 were COVID-19 positive. During the month of August 2021 there were 56,472 non-admitted service events within SHA. In October 2021, patient referrals and admissions reduced rapidly, with the total number of patients across all sites decreasing from 729 on 30 September 2021 to 188 patients on 29 October 2021. The decreased activity led to the hibernation of SHA operations at Meriton Suites North Ryde, with the final patient discharge on 29 October 2021. The site hibernation enabled SHA to consolidate staffing resources within the remaining two sites located at Mascot and Zetland from November onwards.
- As a result of the low number of referrals to SHA, a collaboration between SHA, SHEOC and HCA, the model of care was hibernated on 16 October 2021. SHA Operations collaborated with SLHD ICT and CAPE to ensure a smooth transition out of the Coward St property.
- The amendments to the Public Health Orders, including the rescinded quarantine period for vaccinated international travellers, required planning for implementation. This involved a review of admitted SHA patients that met the criteria for release and a coordinated discharge process on 1 November 2021.
- In October 2021, the SHA Nursing team were nominated as finalists for the Team of the Year for the NSW Ministry of Health Nursing and Midwifery awards. The winner will be announced in February 2022.
- As part of the SLHD COVID-19 transition planning, SHA commenced preliminary discussions with external stakeholders and deployed staff regarding the scaling down of operations as a result of low patient referrals and admissions. The District will continue to take a cautious and measured approach to ensure the ability to surge when required is maintained.
- The NSW Quarantine Program, of which the SHA and the District are a part, won the NSW Premiers Award for "Recovery and Resilience".

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## **PERFORMANCE**

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

### **Safety and Quality**

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

There were no Serious Adverse Events overdue during the month of October 2021.

There was a decrease in the number of Mental Health Readmissions within 28 days for the month of August 2021 to 16.5% in comparison to 18.0% for the same period last 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, reporting 4.0% for the month of September and 5.2% YTD September, which is below the State average of 4.9% for the month and 5.7% YTD September. Unplanned Emergency Representations (same ED within 48 hours) were 4.3% for the month and 4.2% YTD October 2021, which is below the State averages of 4.5% for both the month and YTD October 2021.

The District is above the target (1.0/10,000 bed days) for Staphylococcus Aureus Bloodstream Infections (SABSI), with 1.5 per 10,000 bed days for the month of September 2021. There was 0 Central Line Associated Bloodstream (CLAB) infections reported in September 2021. Ongoing education and training in infection control strategies and CLAB awareness discussions at ICU morbidity and mortality meetings continue. The District has invested significantly during COVID-19 on additional infection prevention and control measures which have also been supported by the Tiger teams.

The District is performing well in relation to 12 of the 14 HACS, under performing in relation to fall related injuries and not performing in relation to endocrine complications. The rate of fall related injuries in hospital was 5.9 per 10,000 episodes which is slightly above the target of 5.7 for the 12 month rolling period of September 2020 – August 2021. The same number of falls occurred during this period when compared to the previous 12 month rolling period. The rate of hospital acquired endocrine complications was 31.3 per 10,000 episodes, which is slightly above the target of 29.7 for the 12 month rolling period of September 2020 – August 2021. Hospital acquired endocrine complications decreased by 86 instances during the reporting period, when compared to the same period last year.

The District continues to work on improving its 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. October 2021 premium staff usage has decreased by 1.25 for Medical staff and by 1.26 for Nursing staff, however premium staff usage has increased by 0.19 for Allied Health staff when compared to the same period last year. This was associated with the increase in COVID-19 cases during this time.



The District has continued to focus 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 that was continuing during October 2021. There has been ongoing focus on the workforce challenges in ICU surge activity which has been required to manage the recent COVID-19 outbreak since June 2021.

The District has also been 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 7 days per week, the mobile vaccination clinics and the Special Health Accommodation which has had up to 1,200 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 hospital admissions have increased.

## Activity

Significant pressure has continued to be placed on all hospitals in the District with the increase in the presentation and admission of COVID-19 positive patients and patients on COVID pathways since June associated with the recent COVID-19 outbreak. Hospital capacity to deal with the outbreak has been increased through ceasing all non-urgent elective surgery and reducing outpatient clinics across the District.

As a result, there has been a decrease of 16.10% in the number of separations (11,730) for the month of October 2021 when compared to the same period last year. YTD October separations have decreased by 13.93% when compared to the same period last year. This is consistent with the decrease in elective surgery and reduced inpatient activity associated with the latest outbreak of COVID-19. In October 2021, the District's occupancy rate decreased by 6.70% to 80.97% when compared to the 87.68% reported in October 2020.

There were 13,227 attendances to the District's Emergency Departments in October 2021, which is a 1.89% decrease from 13,482 in October 2020. YTD October Emergency Department attendances have decreased by 0.79% to 50,325 when compared to the same period last year. For the month of October, case weighted attendances have decreased by 3.95% when compared to the same period last year. The District is continuing to investigate the impact 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 its ETP performance. There was a 4.93% decrease in ETP in the month of October 2021 to 63.45% when compared to the same period last year which is due to the increased demands associated with the increase in COVID-19 cases presenting to and being admitted to its hospitals. YTD October ETP decreased by 7.18% to 61.53% when compared to the same period last year. Admitted ETP was below target (50%) for the month of October at 34.61%, which is a 10.48% decrease on the same period in the previous year.

## Transfer of Care

The District performed below target (90%) for transfer of care (TOC) in October 2021, with 84.12% 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 achieved triage Categories 1, 4 and 5 targets for the month of October. Triage Categories 2 and 3 performance is below the revised targets at 83.56% (target 95%) and 80.33% (target 85%)

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respectively. Triage time has been significantly impacted by the increase in COVID-19 patients and COVID-19 pathway patients as discussed above.

## Elective Surgery

As indicated previously in this report, non-urgent elective surgery has been ceased to increase capacity to deal with the current COVID-19 Outbreak. As a result, there were 1,661 less elective surgeries performed in SLHD facilities in October 2021 when compared to the same period in the previous year, representing a decrease of 68.66% (excluding Collaborative Care surgery).

For the month of October, 100% of Category A, 84.97% of Category B, and 94.32% of Category C elective surgery patients were admitted within the clinically appropriate timeframe for their surgery. YTD October surgical patients not ready for care decreased 10.31% (131) when compared to the same period last year.

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 Taskforce has been established at RPA, Concord and Canterbury Hospitals to oversee the surgical recovery program. Membership of the taskforce in each facility includes the District and Facility Executive, Senior medical, nursing and allied health clinicians and clinical directors from surgical departments, operating theatres, anaesthetics, emergency departments, ICU and wards.

## Emergency Surgery

There were 40 less emergency surgeries performed in the month of October 2021 when compared to the same month last year, representing a 3.21% decrease. This is a significant improvement on last month.

## Community Care and Hospital in the Home

The District has continued to manage its activity through the support of Sydney District Nursing, which continues to manage over 1,000 patients per day in the community who would otherwise be seen in Hospital. YTD October 2021 Hospital in the Home overnight separations decreased 28.9% when compared to the year to date period last year. There has also been an increase in virtual health care provided through the RPA Virtual Hospital.

## 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 15.38% variance for September, excluding Dental and Sub-Acute.

Stream*	Target	Actual	Variation	Variation %
Acute**	42,323	35,774	-6,548	-15.47%
ED	5,929	5,166	-762	-12.86%
NAP***	11,825	29,557	17,733	149.96%
SNAP^				
MH Admit	4,372	4,420	48	1.10%



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MH NAP^^	2,841	2,717	-124	-4.36%
Total	67,289	77,635	10,346	15.38%
Dental DWAU	16,321	5,506	- 10,815	-66.26%
Dental NWAU#	2,049	691	-1,358	-66.26%
Total (NWAU)	69,338	78,327	8,988	12.96%

\* Emergency Department and Mental Health Admitted are in NWAU20

\*\* 46 uncoded episodes

\*\*\* inclusive of COVID clinics and the Special Health Accommodation

^ Unavailable awaiting MoH upgrade to NWAU21

# NWAU=589/4691\*DWAU

## Clinical Costing

The District Performance Unit has submitted the final costing for the District and Network Return (DNR) Round 25 financial year 2020/2021.

- The estimated price per NWAU21 is \$4,829 which is decrease of approximately 4.7% compare to FY19/20, with majority of the decrease in the Acute program (down 7.2% due to COVID expense reporting)
- The final submission was achieved with only 0.74% of encounters flagged as having potential quality issues, which represents an improvement from 9.19% from initial draft submission
- The Costing Team made a number of improvements in Round 25, including the implementation of an epidural patient level feeder, Pharmacy S100 high cost drug patient level feeder & COVID incremental expense allocation by PwC sub-packages
- The DNR audit program has commenced and consists of 4 audit tests, with a similar focus as Round 24 (process and controls, average cost, indirect cost and medical cost allocation)

## REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

### SLHD REVENUE COMMITTEE

#### Private Health Insurance Usage

For the month of October 2021, 16.35% (1,703 separations) of all patients discharged by SLHD facilities were classified as privately insured which is an improvement from last month (15.05% - 1,500 separations).

There was a decrease of 470 (21.63%) patients who elected to use their private insurance compared to the same period last year and an Increase of 203 (13.53%) in total separations from previous month.

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

- RPAH – a decrease of 298 (26.58%) private patients.
- Concord – a decrease of 118 (12.80%) private patients.
- Canterbury Hospital – a decrease of 28 (29.17%) private patients.
- IRO – a decrease from 16 to 0 private patients.
- Balmain Hospital – a decrease of 10 (55.56%) private patients.

#### Single Room Usage

For the month of October 2021, 8.49% of patients were flagged as infection control across the District.

For the month, 13% of all available single rooms were occupied by private patients and 31% of all private patients were accommodated in single rooms.

## SLHD Strategic Revenue Network

### Key notes:

- SLHD Strategic Revenue Network meeting was held in October 2021 where an update was provided in relation to the implementation of Ministry of Health Guideline – Medicare Billing for Privately Referred non-Inpatient Services in NSW Public Hospitals.
- 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 151 registered users and total \$1.37M has been raised through the portal to date.

## **REDESIGN AND SERVICE IMPROVEMENT**

### Innovations

#### The Pitch

- Due to the COVID restrictions, the next round of the Pitch has been placed on hold and is due to recommence in early 2022.

#### CHR

- The GPCanShare Project team remains deployed to RPA Virtual Hospital to assist with the COVID response. Depending on the timing of the team's release they may be able to resume project work in February 2022 in line with the postponed ACI Redesign course.

#### Other Projects

- Hands Up Project (RPA Hand Clinic)
  - Due to the current COVID-19 restrictions and resourcing constraints, the team are at maximum capacity. As such, the project has been placed on hold from 16 July 2021.
  - Plans for recommencement of the project will be discussed with Sponsors in the coming weeks.
- RPAH Transfer of Care Project – 'Good to Go, Discharge by 10 and 2'
  - The COVID-19 response has posed extra stress on the patient flow unit resources. Once this has subsided and the restructure of the unit is finalised with new positions filled, the team will commence 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
  - Interviews for the new SLHD Outpatient Diabetes Model of Care gap analysis are underway. This work is slightly delayed and expected to be completed in December 2021 (original deadline was the end of November 2021).
  - The SLHD Outpatient Diabetes in Pregnancy Model of Care is to be tabled and discussed with SLHD executive after the general outpatient Diabetes Model of Care has been implemented and finalised.

#### **Accelerating Implementation Methodology (AIM):**

- The scheduled AIM course on 15-16 November was cancelled due to COVID restrictions. There are no further courses planned for this year.
- Dates for 2022 are being finalised.

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## HealthPathways

### Content Development and Maintenance

Stage two of the handover of low to moderate COVID-19 positive cases in the Community proceeded as planned, with the update of the recently deployed COVID-19 Case management HealthPathway to now encompass management of under 16 year olds. The pathway remains aligned to the rpavirtual model of care, which is being supported by CESP HN through GP Liaison support positions. A new stand-alone COVID-19 Virtual care referral page has been published to enable quicker service finding for GPs. This page will eventually be converted to encompass additional Virtual services such as the Virtual Fracture clinic.

Re-alignment of the COVID-19 Support content also occurred with the removal of the COVID-19 Community and Financial support pathway which has been condensed into the more specific COVID-19 Isolation support pathway which Sydney are maintaining on the behalf of the ACT/NSW HealthPathways Community.

Overall usage of the platform remains high with targeted usage of the COVID-19 content.

	Page views November 1-28 2021	Page views October 2021	Page views September 2021	Page views August 2021
COVID-19 Vaccination Information	54	103	197	227
COVID-19 Vaccination Procedure	96	94	141	230
COVID-19 Vaccine-induced Thrombosis with Thrombocytopenia Syndrome (TTS)	7	45	196	326
Myocarditis and Pericarditis After mRNA COVID-19 Vaccines	103	154	131	
COVID-19 Case Management	1,232	1,249		
COVID-19 Initial Assessment & Management	201	2269	89	71
Post-COVID-19 Conditions	230	275	55	55
COVID-19 Virtual Care Requests	306			
COVID-19 Isolation Support	102			
COVID-19 Community & Financial Support	24	26	28	

### Usage of HealthPathways

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

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	*November 1-28 2021	October 2021	September 2021	*November 1-28 2020
Users	1,604 ↑ 50.46%	1,664	1,435	1,066
Sessions of use	10,557 ↑ 45.79%	10,705	9,808	7,241
Total Page Views	35,035 ↑ 49.25%	36,161	32,732	23,473

- Comparison data

## **SLHD e-Referral Project**

### **Service recruitment**

Work has recommenced on the development of the forms for Phase 2 of the Royal Prince Alfred Hospital implementation. Phase 2 services require customised referral forms, and the Project Team will continue to work with services to design these forms over the coming months. The implementation schedule for 2022 is under review, with all applicable forms to be updated early 2022 to support the requirement for named referrals.

Testing activities have commenced on the Engage.Outpatients Program. End to end testing will be completed, confirming system functionality and workflow between with HealthLink e-Referral and the referral management platform. These testing activities will be completed with eHealth and SLHD ICT. Training activities will be managed by SLHD ICT, with education material under development by eHealth. Go Live remains scheduled for February 2022.

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	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
Royal Prince Alfred Hospital Phase 1 (13 services)	October 2021	Live

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Engage Outpatients Program: Gynaecology, Pelvic Mesh and Maternity – Royal Prince Alfred Hospital	2022	Testing
Royal Prince Alfred Hospital (5 services)	2022	Design

## Platform development

Active Directory integration work is on hold, requiring support from SLHD ICT once resources are available.

Updates to the RMS Lite UAT website has occurred to allow Remote Desktop access. Production website update is scheduled for early December 2021.

### Referrer update:

- A total of 1900 referrals have been received.
- 72% 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 October 2021 based on the District's budgeted NCoS.

For the period ended 31 October 2021, GF Expenditure was \$82.526M (9.91%) unfavourable to budget. The District has assessed the YTD October 2021 COVID-19 Incremental cost as \$286.505M. The District's unfavourable result for YTD October 2021 was primarily due to COVID-19 Incremental expense of \$81.782M and the delay in budget supplementation for Outsourced Elective Surgery, Clinics and Screening, COVID-19 Wards, Pathology testing, Special Health Accommodation, PPE, Cleaning, Contract Tracing and Vaccination Program associated with the standard Treasury reconciliation process. The District has received the September 2021 COVID-19 Stimulus Budget of \$84.092M in October 2021. Excluding the impact of COVID-19, the District is \$745K unfavourable to YTD October 2021 Expense budget.

YTD October 2021 Expenditure increased significantly (by \$193.027M or 26.73%) compared to YTD October 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 \$228.807M YTD October 2021. Increase in FTE numbers and the impact of COVID-19 is contributing to these results.

GF Revenue (including Doubtful Debts) was \$2.376M (1.25%) favourable to budget for the month and \$40.602M (5.17%) favourable to YTD October 2021 budget. The District continues to see unfavourable results in a number of Own Source Revenue categories including Patient Fees, High Cost Drugs, Facility Fees and Prosthesis income as a result of the impact of COVID-19. Excluding the impact of Quarantine Hotel Passenger Fees on Own Source Revenue and Doubtful Debts, the District is \$20.172M unfavourable to October 2021 GF Revenue budget primarily due to the impact of COVID-19. The District recognised Quarantine Hotel Passenger Fees of \$67.038M YTD October 2021. MoH is yet to provide a Revenue budget for this, thereby resulting in a favourability. This revenue is separate to the District's Own Source Revenue target.

The NCoS for October 2021 was \$15.217M favourable to budget. For YTD October 2021, the District's NCoS was \$41.925M unfavourable to budget. Excluding the impact of COVID-19 (Expenditure, Quarantine Hotel Passenger Fees and Doubtful Debts) SLHD is \$23.208M unfavourable to NCoS

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budget. This unfavourability in NCoS is primarily due to the impact of COVID-19 on Own Source Revenue as mentioned above.

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

	YTD Actual \$000	YTD Budget \$000	Variance (Actual vs Budget) \$000	
Expense (incl COVID)	915,227	832,701	-82,526	Unfav
Pending COVID-19 budget supplementation	286,505	204,723	-81,782	Unfav
<b>GF Expense (excl COVID-19 impact)</b>	<b>628,722</b>	<b>627,978</b>	<b>-745</b>	<b>Unfav</b>
Own Source Revenue	-134,804	-87,935	46,869	Fav
Quarantine Hotel Passenger Fees	-67,038	0	67,038	Fav
<b>GF Revenue (excl the impact of Quarantine Hotel Passenger Fees)</b>	<b>-67,766</b>	<b>-87,935</b>	<b>-20,169</b>	<b>Unfav</b>
Doubtful Debts (incl Quarantine Hotel Passenger Fees)	5,918	257	-5,661	Unfav
Loss on Sale of Asset	606	0	-606	Unfav
Doubtful Debts (Quarantine Hotel Passenger Fees)	3,973	0	-3,973	Unfav
<b>Doubtful Debts &amp; Loss on Sale of Asset (excl the impact of Quarantine Hotel Passenger Fees)</b>	<b>2,551</b>	<b>257</b>	<b>-2,294</b>	<b>Unfav</b>
<b>NCoS (excl the impact of Quarantine Hotel Passenger Fees)</b>	<b>563,507</b>	<b>540,299</b>	<b>-23,208</b>	<b>Unfav</b>

MoH provides COVID-19 incremental budget one month in arrears

Unfavourable to budget due to the impact of COVID-19 on OSR including Patient Fees, Facility Fees and Prothesis incomes

Unfavourable to budget primarily due to the impact of COVID-19

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 \$277M relating to unfavourable results for: Expense (\$315M) related to the management of the COVID-19 response and Doubtful Debts (\$20M) offset by a favourable result for Own Source Revenue (\$58M) due to the impact of COVID-19 Quarantine Hotel Passenger Fees.

Excluding the impact of COVID-19, the District forecasts a break-even position for Expense and unfavourability of \$5.8M in Doubtful Debts. Excluding Quarantine Hotel Passenger Fees, the District forecasts unfavourability of \$30M in Own Source Revenue due to the impact of COVID-19.

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 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 October 2021 was \$12.841M (5.38%) favourable to budget. The result for the month was primarily attributable to favourable results for Goods and



Services Expenses (\$5.503M), Employee Related Expenses (\$6.733M) and RMR (\$0.648M) offset by unfavourable results for VMOs (\$0.357M).

- YTD October 2021, GF Total Expenditure was \$82.526M unfavourable to budget, primarily reflecting unfavourable results for Overtime (\$16.39M), Annual Leave Provision (\$5.128M), Superannuation (\$8.688M), VMO Payments (\$1.374M), RMR (\$4.859M) and Goods & Services (\$46.166M) offset by favourable results for Salaries & Wages (\$0.461M). Excluding the impact of COVID-19, the District is \$0.745M unfavourable to YTD October expense 2021 budget.

## Revenue

- GF Total Revenue for the month of October 2021 was \$2.376M (1.25%) favourable to budget, reflecting the favourable results from User charges (\$4.319M) and Doubtful Debts (\$3.565M) offset by unfavourable results in Patient Fees (\$2.672M), Other Sources of Revenue (\$1.35M) and Grants and Contributions (\$1.039).
- YTD October 2021 GF Revenue was \$40.602M (5.17%) favourable to budget. This result reflects favourable variance in Quarantine Hotel Passenger Fees (\$67.038M), High Cost Drugs (\$0.326M) and Pharmacy Sales (\$0.078M) offset by unfavourable variances in Facility Fees (\$1.894M), Prosthesis Income (\$1.53M), Car Park Fees (\$0.178M), Patient Fees (\$8.391M), Grants and Contributions (\$1.116M) and Doubtful Debts \$5.661M. The unfavourability in Patient Fees, Facility Fees, Prosthesis Income and Pharmacy Sales is predominantly due to the impact of COVID-19. Excluding the impact of Quarantine Hotel Passenger Fees on Own Source Revenue and Doubtful Debts, the District is \$20.172M unfavourable to October 2021 GF Revenue budget primarily due to the impact of COVID-19.

## SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$3.93M unfavourable to budget for the period of October 2021. This result reflects unfavourable budget variance for Expenditure (\$0.738M) and Revenue (\$3.192M).

## CONSOLIDATED RESULT

For the period ended 31 October 2021, the consolidated YTD NCoS result for the General Fund and SP&T was \$45.854M unfavourable to budget. The result comprises unfavourable variances for Expenditure (\$83.264M), Doubtful Debts (\$5.661M), Loss on Sale of Asset (\$0.606M) and favourable variances for Own Source Revenue (\$43.677M).

## FINANCIAL PERFORMANCE – BASED ON NEW MOH REPORTING FORMAT

For the period ended 31 October 2021, SLHD recorded a Total Net Result of \$74.696M which was \$45.773M unfavourable to budget. The Net Direct Operating Result (GF and SP&T) for YTD October 2021 was \$34.434M unfavourable to budget, reflecting an unfavourable budget variance for Expenditure (\$78.193M) offset by favourable variance for Revenue (\$43.758M).

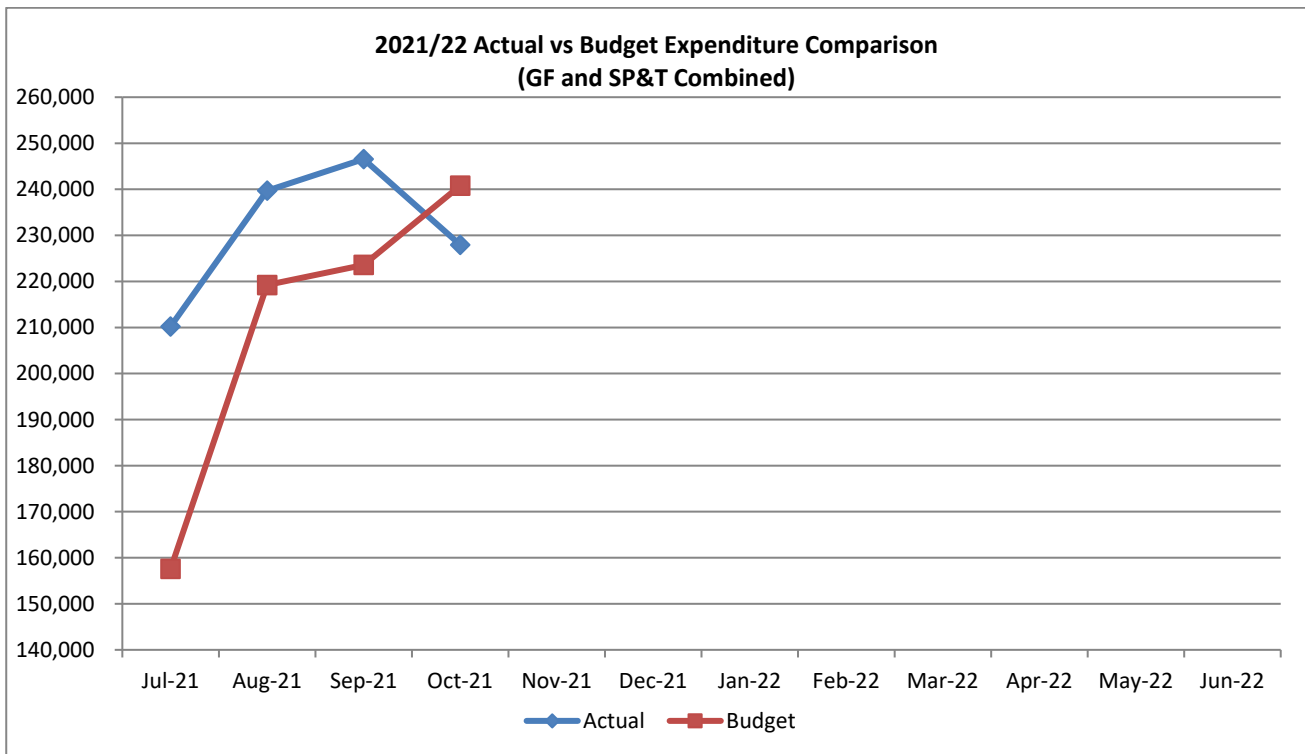
For the YTD October 2021, Total Direct Revenue was \$43.758M favourable to budget, comprising a favourable variance for the General Fund (\$46.869M) and unfavourable variance for SP&T Fund (\$3.111M). This result for the GF reflects favourable variances in User Charges offset by unfavourable variances in Patient Fees, Other Income and Grant Income.

YTD October 2021 Total Direct Expenditure was \$78.193M unfavourable to budget, reflecting an unfavourable variance for General Fund (\$77.620M) and SP&T Fund (\$0.572M). The result for the General Fund reflects unfavourable variances in Overtime (\$16.390M), On-costs (\$13.688M), VMOs (\$1.374M), Grants (\$0.464M), Direct Clinical Operating (\$16.560M), G&S Corporate (\$25.252M) and G&S Supporting Services & Utilities (\$4.355M) offset by favourable variances in Salaries & Wages (\$0.461M).

## MONTHLY BUDGET PERFORMANCE

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

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## LIQUIDITY

The cash balance at 31 October 2021 for the SLHD Operating bank account was \$20.081M and the Operating Cash book balance was \$19.935M.

## CAPITAL WORKS – SMRS PROJECTS

As at 31 October 2021 the District's Full Year Capital works budget relating to SMRS Projects is \$14.439M comprising \$7.801M of MoH funded and \$6.638M of locally funded projects. In October 2021 a locally funded project (CRGH Cardiac Catherisation Laboratory - \$0.989M) was approved by MoH.

Actual expenditure as at the end of October 21 was \$0.461M which is on budget.

Additionally in the current pandemic circumstances, the actual expenditure for MoH funded Minor works & Equipment for COVID-19 was \$0.997M at the end of October 2021.

## OTHER CAPITAL PROJECTS

As at the end of October 2021, the District has expended an amount of \$0.273M relating mainly to RPAH Paediatrics Stage 3, RPAH Microsurgery Lab Redesign and CRGH Research Centre. The total expenditure of \$0.273M was sourced from the General Fund.

## CAPITAL WORKS

### RPA Redevelopment

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

- Finalisation of Gateway Review process
- Design Competition briefings and site inspections
- Commencement of Clinical Design Development consultation
- Paediatric services and Molecular Imaging options development
- User Groups continue



## **Parent and Baby Unit**

Over the course of this reporting period, civil works to the main entrance civil works and skylight installation have been successfully completed. Wall sheeting to the patient ensembles and bedrooms as well as louvre installation to the level 1 plantroom has also commenced.

## **Renal Dialysis PMBC Level 2**

The capital works program for the PMBC Renal Stage 2 project was successfully completed in November. The unit has been commissioned and handed over for occupation.

## **RPU Hot Cells Building 63**

Capital works activities that occurred during this reporting period include the completion of pneumatic tube installation and led shielding. Mechanical service works and cladding for the external exhaust pipes also continued throughout the month.

## **Concord**

### **Redevelopment**

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

- Levels 1 and 2, link bridges, loading dock and basement are now all live and operational
- Work all internal and external areas including facade and civil works nearing completion
- Defect inspections ongoing

## **CSSD Sterilising**

Over the course of this reporting period, Stage 2 framing works and fire detection services rough-in were completed. Fire rated wall sheeting commenced planning for stage 3 framing works was underway.

## **PLANNING**

### **Canterbury – Stage 0 Planning**

- The Planning Unit has continued working with the Canterbury Executive and Community-Based Health Managers in consulting and documenting to hold or plan a round of consultations including:
  - Meetings with Clinical Stream Directors/Clinical Streams
  - Workshop with Community-Based managers
- The extensive range of demand management strategies has now been documented.
- A District Workshop has been held on Virtual Care in Canterbury discussing new models of care and new modalities of care.
- The Planning Unit has facilitated and written up two primary care provider and community workshops in collaboration with the Central and Eastern Sydney Primary Health Network to inform the options for improving care in the community.
- Consultations with the state-wide entities has commenced, with Mental Health, NSW Health Pathology having been completed and most others scheduled, including Agency for Clinical Innovation, e-Health, Ministry of Health and NSW HealthShare.

### **Tech Central (Camperdown-Ultimo Collaboration Area)**

- A major launch of the Tech central website, narrative, place collaboration tool (map) occurred in late November. SLHD contributed significantly to the website and narrative. Concurrent with this, the Transport for NSW transport Strategy was released
- In addition, the Quantum Terminal (at Central station) was opened. This will provide collaboration space for researchers, developers, engineers and entrepreneurs in the quantum tech space- a collaboration of the major universities

- The company, Stone and Chalk has now been formally announced as the manager of the newly built scale-up hub in Pitt Street, due to open mid next year, providing affordable spaces for these companies.
- Subsidies for scale-up companies will also be provided.
- A workshop was held for the Greater Sydney Commission to provide an update on the RPA redevelopment.
- The Planning Unit has worked with Sydney Research to provide the SLHD contribution to the state-wide Industry Prospectus.
- SLHD is also working with the Camperdown-Ultimo Collaboration Alliance (the Alliance) to develop a prospectus for Tech Central.
- Major workshops have been held to begin the process of developing a Sustainability Strategy and a Digital Connectivity Strategy for Tech Central.

### **Long COVID Model of Care**

- The Planning Unit has documented the new Long COVID model of care for the District collaboration group chaired by Professor Warwick Britton.

### **Other Plans**

The following plans are being supported to some extent by the Planning Unit

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

## **SYDNEY RESEARCH**

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

The Sydney Research teams continues to support Sydney Local Health District (SLHD) in its response to COVID-19 and with the vaccination program as members of the SLHD COVID-19 Steering Committee and in ensuring that our research, clinical, academic and industry partners are informed of the latest guidance, restrictions and data.

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

Sydney Research continues to support the active successful projects from Rounds 3-5 of the Translational Research Grant Scheme. Progress reports and financial acquittals from all rounds have been endorsed by the Chief Executive, SLHD and submitted to the NSW Office for Health and Medical Research (OHMR). Ms Penny Vogelzang has been supporting Dr Mark Dennis and the EVIDENCE study team in preparation for their next state-wide Steering Committee with Executive representatives on behalf of the 13 study sites. This meeting will be held on Friday 3 December 2021.

### **NSW OHMR – Embedding Quality Research**

#### *Research Governance*

NSW OHMR and Sydney Research are leading a project investigating potential solutions towards a more effective and efficient research governance model. Ms Asra Gholami, Project Manager (Embedding Quality Research), Sydney Research has developed a draft work plan covering the three phases of the project (Understanding the Problem, Formulating Potential Solutions, and Reforming the Process), undertaken an literature review and presented initial findings to the NSW Health Secretary and the state-wide Embedding Quality Research Steering Committee.

An anonymous survey was developed by Ms Gholami and the Expert Working Group, which was circulated to researchers and Research Governance Offices (RGO) across NSW Local Health Services and Specialty Health Networks. This survey will be crucial as part of the first phase of the project in understanding the critical issues and barriers that currently exist with research governance. Ms Gholami

received responses from 384 researchers and 55 RGO staff, which will be analysed by Ms Gholami and the Expert Working Group and outcomes identified in an accompanying report. Once finalised and endorsed by the NSW Health Secretary, the outcomes will be presented to the NSW Health Senior Executive Forum in February 2022.

### *Intellectual Property and Commercialisation Support*

Sydney Research have been in discussions with the Anne O'Neill, Director of Enterprise and International Partnerships and the OHMR team on a new initiative to provide structured business development support within NSW Local Health Districts to researchers with projects of commercial potential. Given the potential commercial exploitation of research and associated intellectual property matters, it has become evident that LHDs need increased support for innovation and commercialisation beyond what is currently provided both locally and through OHMR.

In tandem with a new NSW Health Intellectual Property and Commercialisation Framework that will be released over the coming month, OHMR have suggested a 12-month program to engage a service provider who will be embedded within the LHDs to work with research projects to develop business plans. The pilot program will seek to target high-quality research projects that are directly relevant to clinical, health service and population health practice in NSW. The program will be at no cost to the LHD's and will be sourced from the OHMR Commercialisation budget. If the pilot program is successful, OHMR will seek to implement the Program on a rolling basis. The initiative was endorsed by the EQR Steering Committee on 21 October 2021.

A request for tender to support the delivery of this project is currently being advertised and will close by 13 December 2021. Adj A/Prof Taylor has been invited to participate on the evaluation panel.

### **Clinical Trials Alliance**

Sydney Research has been involved in discussions to establish a collaboration between SLHD, NSW OHMR, the 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. A Project Manager has been appointed by the NHMRC Clinical Trial Centre to support the development of this proposal, which will be presented in January 2022 and discussed at the subsequent Think Tank.

### **Sydney Biomedical Accelerator Complex**

Together with Health Infrastructure NSW and the University of Sydney, Sydney Research continues to lead the planning for the Sydney Biomedical Accelerator (SBA) Complex, a new world-class biomedical innovation complex to be located within the RPA and University of Sydney campuses. Dr Teresa Anderson AM and Adj A/Prof Vicki Taylor remain the SLHD Executive Leads on this project.

An internal deadline of March 2022 has been set for a revised Strategic Business Case which has been requested by the Secretary, NSW Health and SLHD Chief Executive. The Business Case will comply with the requirements set for a Gate 1 Assurance Review reinforcing that the SBA is aligned with local service needs, system-wide objectives and Government policy using a collaborative approach.

Sydney Research have been working closely with Steve Hall, Senior Project Director, Health Infrastructure NSW to engage the appropriate consultants to facilitate planning. To date the following consultants have been engaged:

- Mr Sam Sangster, Managing Director, KLOK Advisory will develop an industry engagement and market sounding approach for the SBA.
- Mr John Renshaw, OCM as the Probity Advisor for the SBA Project
- Mr Isaac Bromley, Ms Jaye Lu and Ms Ella Papendrea, Ernst and Young will be the Project Manager and facilitate the state Business Case development and market sounding.

## **Sydney Health Partners**

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

### *Encouraging More Clinical Trials in Australia*

- The SHP Clinical Trials Advisory Panel (CTAP) has been established to progress this SHP 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, which will next meet in January 2022 to discuss the progression of the centralised recruitment service that was implemented at the Institute of Bone and Joint Research, Royal North Shore Hospital to support and reduce the administrative burden associated with participant recruitment for clinical trials.
- SHP have also partnered with the University of Sydney to develop Electronic Trial Management Folders and associated Guidelines, which will be made publicly available on the SHP website later this year.

## **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 up skill in research translation methods and implement health care projects.
- The fellowships were awarded through a highly competitive process which saw SHP receive 41 applications from across its member organisations, including 10 applications from SLHD researchers.
- Sydney Health Partners has awarded five Research Translation Fellowships as part of its strategy to build research translation capacity and capability in the health workforce. Three of the five successful applicants are SLHD employees:
  - Dr Jillian Eyles - Research Fellow, Institute of Bone and Joint Research, Kolling Institute, University of Sydney
  - Dr Merran Findlay - Executive Research Lead in Cancer Nutrition, Sydney Local Health District
  - Dr Robyn Sierla - Lymphoedema Therapist, Sydney Local Health District

### *SHP Research Development Committee*

- Adj A/Prof Vicki Taylor and Prof Warwick Britton have been invited to become members of the SHP Research Development Committee
- The Committee is chaired by Dr Carol Armour, and is a sub-committee of the SHP Board, established to provide support and advice to SHP with a focus on the priorities of the Innovation and Research Enabling priorities. It will also consider the health and research priorities of SHP's partner organisations.
- The first meeting was held on 24 November 2021 to discuss the Terms of Reference, Clinical Academic Group recommendations, and Implementation Science Grant recommendations.

## **Sydney Research Council**

We are pleased to have extended an invitation to Ms Lucy Clynes, General Manager, Research Australia has been extended to join the monthly Sydney Research Council (SRC). This week, the final SRC for the year was convened, with presentations from Prof Michael Fulham, Clinical Director, Medical Imaging, Sydney Local Health District and Mr Matt Proft, Director Tech Central, Greater Sydney Commission. Dr Teresa Anderson thanked all council members for an incredible year full of collaboration and collective contribution to the research sector. The SRC will re-convene in February 2022.

## Awards and Grants

Sydney Research have participated or continue to support the following researchers within SLHD and across interagency partners who have been successful in attaining the following grants and awards:

### 2022 NHMRC Synergy and Ideas Grant

- Prof Paul Haber and A/Prof Kirsten Morley, SLHD, secured a Synergy Grant for their project titled "Linking clinical and basic science discovery to find new treatments for alcohol use disorder"
- Prof Warwick Britton, SLHD and Centenary Institute, secured a Ideas Grant for his project titled "Defining the impact of chronic lung disease on COVID-19 and developing effective therapies"
- Prof Steve Vucic, SLHD and University of Sydney, secured an Ideas Grant for his project titled "Mechanisms underlying cortical hyperexcitability in amyotrophic lateral sclerosis"
- Prof Philip Hansbro, Centenary Institute, secured a Synergy Grant for the project titled "Defining the role and therapeutic manipulation of the gut-lung axis in respiratory disease"
- Dr Justin Wong, Centenary Institute, secured an Ideas Grant for his project titled "Alternative splicing: A novel target to improve outcomes in acute myeloid leukaemia"
- Dr Sean Humphrey, Charles Perkins Centre, secured an Ideas Grant for his project titled "Mapping the Beneficial Effects of Exercise in humans using Personalised Phosphoproteomics"
- A/Prof Alison Hayes, Charles Perkins Centre, secured an Ideas Grant for her project titled "Novel modelling of childhood obesity to improve decision making and close the gap"
- Prof Graham Neely, Charles Perkins Centre, secured a Ideas Grant for his project titled "Human pain genes as a window into pain mechanisms and modern pain management"
- A/Prof Craig Phillips, Woolcock Institute of Medical Research, secured a Ideas Grant for his project titled "Understanding Brain Cleaning in Obstructive Sleep Apnoea"
- Dr James Burchfield, Charles Perkins Centre, secured a Ideas Grant for his project titled "Treating Cardiometabolic Disease by Targeting Mitochondrial Defects"

### 2021 Heart Foundation Research Awards

- 2021 Future Leader Fellowship – A/Prof Steven Wise for his project titled: Bioengineering New Synthetic Conduits for Arterial Revascularisation.
- 2021 Future Leader Fellowship - Dr Lining Ju for her project titled: Platelet mechanobiology inspired anti-thrombotic strategies and point-of-care biomedical engineering.
- 2021 Postdoctoral Fellowship - Dr Mark Dennis for his project titled: Extracorporeal Membrane Oxygenation (ECMO) for Cardiac Failure and Cardiac arrest - patient selection, outcomes and appropriate resource usage.
- 2021 Vanguard Grant - Dr John O'Sullivan for his project titled: Replenishing Nicotinamide Adenine Dinucleotide to Rescue Heart Failure with Preserved Ejection Fraction.

### 2021 Clarivate's Highly Cited Researcher

- Prof Georgina Long AO, RPA Institute for Academic Surgery and Melanoma Institute Australia.
- Prof Chris Maher, Sydney Musculoskeletal Health
- Professor Richard Scolyer AO, Royal Prince Alfred Hospital and Melanoma Institute Australia
- Prof Glenda Halliday, Brain and Mind Centre
- Prof Edward Holmes, Marie Bashir Institute for Infectious Diseases and Biosecurity



- Prof Ian Hickie AM, Brain and Mind Centre

#### *2021 Research Magazine - Top 250 Researchers*

- Professor Georgina Long AO, Co-Medical Director, Melanoma Institute Australia for being awarded top researcher in the field of Oncology.
- Professor Paul Bannon, Head of Department, Cardiothoracic Surgery, Royal Prince Alfred Hospital and Co-Chair of the Royal Prince Alfred Institute for Academic Surgery for being awarded top researcher in the field of Cardiology.
- RPA Institute for Academic Surgery, with the University of Sydney recognised as a national leader in surgical research.

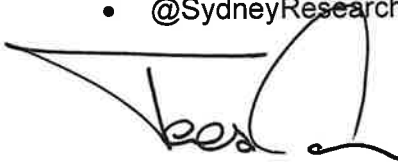
#### **Other Activities**

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

- Centenary Institute Board Meeting
- ANZAC Research Institute Transition Working Group
- Sydney Musculoskeletal Health Launch
- Launch of Tech Central and the Quantum Terminal
- SLHD Research Consumer Reference Group
- Business Sydney CBD Reference Group
- Tech Central Communications Strategy with Greater Sydney Commission, Health Infrastructure NSW and the University of Sydney

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 820 subscribers
- The PFCC Research Working Group bi-monthly newsletter, 'Consumers in Research', has an audience of 140 subscribers.
- @SydneyResearch currently has 1,207 followers on Twitter



Dr Teresa Anderson AM

**Chief Executive**

Date: 20.12.21