

Royal Prince Alfred Hospital



Strategic Plan

2013 - 2018



Health
Sydney
Local Health District

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Sydney... it's ***your*** local health district



Foreword

Royal Prince Alfred Hospital (RPA) is proud of its healthcare service excellence, world leading research, high quality education and leadership in clinical care. This Strategic Plan (2013-2018) provides the necessary framework to support the ongoing development of these key attributes of RPA's health services.

RPA was established in 1882 and is a principal referral hospital and a provider of specialist healthcare. It is one of Australia's most respected hospitals, with a distinguished history of serving the health needs of local, state-wide, national and international communities. Since 1882, RPA has combined its direction and objectives under the following initial, but enduring, purposes:

- The reception and treatment of persons who are unable to procure the necessary medical and surgical treatment at their own expense;
- The reception and treatment of persons who may be able by themselves, their friends or employees, to pay such sum per diem as the hospital may appoint, and who are unable otherwise to obtain adequate medical or surgical treatment;
- The reception and treatment of cases of accident at any time of the day or night;
- The provision of a school for clinical instruction in medicine, surgery, etc., for students attending the University of Sydney; and
- Provision for the systematic instruction and practical training of nurses.

RPA's long tradition **To Achieve Healthcare Excellence for All** is consistent with the Sydney Local Health District and with the directions of NSW Health articulated in *Healthy People – Now and in the Future*:

- To keep people healthy
- To deliver high quality health services
- To provide the health care people need
- To manage health services well

The key purpose of the NSW public sector health system and RPA are to help people stay healthy and to provide access to timely, high quality and patient-centred health care. Achieving this requires clear priorities, supportive leadership and staff working together, underpinned by the "CORE values" of:

- Collaboration – Improving and sustaining performance depends on everyone in the system working as a team
- Openness – Transparent performance improvement processes are essential to make sure the facts are known and acknowledged, even if at times this may be uncomfortable
- Respect – The role of everyone engaged in improving performance is valued
- Empowerment – There must be trust on all sides and at all levels with responsible delegation of authority and accountability

Further, RPA aims to work in collaboration with NSW Health, to achieve the following:

- Keeping people healthy and out of hospital;
- Providing world class clinical services with timely access and effective infrastructure;
- Returning quality services to mental health, dental health and Aboriginal health; and
- Managing health services well and promoting local decision making.

This plan is based on seven domains which reflect our key concerns in delivering health service excellence. These are:

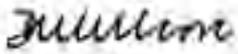
- **Our Patients, Consumers, Carers**
- **Our Staff**
- **Our Community**
- **Our Services**
- **Our Education**
- **Our Research**
- **Our Organisation**

For each of these domains, goals, feasible strategies and achievable timeframes have been identified (see appendix 4).

Importantly, this plan was developed through an open consultation with RPA's staff and community. Inclusive consultation was designed to ensure that the health service's strategy was relevant, robust and consistent with community needs, issues and with staff concerns. RPA is committed to open and inclusive community and clinician engagement in RPA's policy, planning and service development.

I would like to convey the gratitude on behalf of the RPA Executive to the many staff and community members who shared their time, views and expertise to provide input into the development of this plan.

The RPA executive is proud to deliver its first Strategic Plan under the Sydney Local Health District. We are confident that the adoption and implementation of this plan will ensure that RPA continues to be placed at the forefront of health service delivery in this country.



Deborah Willcox
General Manager
Royal Prince Alfred Hospital

Executive Summary

RPA was established in 1882 and has a long tradition of excellence in healthcare services. RPA is at the forefront of healthcare delivery, world leading research, high quality education and leadership in healthcare.

RPA is governed by and works in partnership with the SLHD to achieve the District vision *“To Achieve Excellence in Healthcare for All”*. We strive to deliver concepts of equity, patient-centeredness, health improvement, timeliness and efficiency. This plan integrates the “CORE values” articulated by the Ministry of Health.

This plan emphasises the primary focus on patients, staff and community and the need for excellence in services, education, research and organisational support. It identifies key strategies to deliver excellence in each of the seven domain areas of the plan: our patients, consumers and carers, our community, our services, our staff, our research and our education.

RPA is a principal referral group A1 hospital with strong affiliations to the University of Sydney, providing tertiary and quaternary referral and district acute services at primarily a role delineation level six. Vital importance is placed on the research, education and state-of-the-art technologies undertaken in the hospital.

Population growth, ageing and increasing numbers of births are key issues that will significantly impact the healthcare demands at RPA and throughout the SLHD over the next decade. In addition RPA provides healthcare to a large population of people who require tertiary and quaternary services who reside outside the SLHD including people living overseas, interstate and from rural districts.

Local healthcare services are governed by RPA's Clinical Council, a forum in which senior clinical staff and hospital management can engage to enhance the efficiency and effectiveness of patient care and clinical services. This plan was developed in collaboration with staff and the community to ensure that the plan is relevant, robust and consistent with their needs.

In the next five years RPA will see the development of the Chris O'Brien Lifehouse at RPA, the Charles Perkins Centre and the North West Precinct. RPA is working in collaboration with these entities to provide integrated and comprehensive healthcare.



Our Hospital Vision

Our District Vision

“To achieve excellence in healthcare for all”

Our Hospital Mission

Ensuring the community has equitable access to high quality patient centred care that is:

- Timely, evidence-based, culturally appropriate and efficient
- Provided by highly skilled staff who are committed, accountable and valued
- Supported by leading edge research, education and technologies

Supporting the healthcare of populations in other LHDs, States and Territories across Australia and other countries through research, education and the provision of tertiary and quaternary referral services.

Our Hospital Values

Collaboration – Improving and sustaining performance depends on everyone in the system working as a team.

Openness – Transparent performance monitoring and reporting is essential to make sure the facts are known and acknowledged, even if at times this may be uncomfortable.

Respect – The role of everyone engaged in improving performance is valued.

Empowerment – There must be trust on all sides and at all levels for people to improve performance in a sustainable way.

Introduction

RPA is a principal referral group A1 hospital with strong affiliations to the University of Sydney. It provides tertiary and quaternary referral and district acute services at mainly role delineation level six, to the SLHD and its local inner west catchment, other metropolitan residents, rural, interstate and overseas patients.

RPA has a pre-eminent position in the NSW and the Australian health system resulting from its tradition, since 1882, of providing high quality, integrated clinical services, teaching and research. RPA provides the broadest range of clinical services on one site in NSW. RPA's ability to deliver high volume district and tertiary services in a cost effective way are aided by RPA's location in the centre of Sydney and close proximity to the University of Sydney. A key to RPA's high quality clinical care is the translation of its research directly into positive patient care outcomes.

RPA has a substantial and widely recognised teaching and research role with world leading and world class research groups, including biomedical research, substantial strengths in clinical research, public and population health research and health services research. In close proximity to RPA there are a number of internationally renowned medical/health research centres which are strongly interrelated with the hospital and at which many of its senior researchers conduct their laboratory work, or more intensive research. Major research centres include:

- Baird Institute
- Brain and Mind Research Institute
- Heart Research Institute
- Centenary Institute of Cancer Medicine and Cell Biology
- George Institute for Global Health
- Woolcock Institute of Medical Research

The hospital currently has between 920 and 1013 beds, with extra capacity available in the winter months. Additional mental health beds which will be governed by the SLHD will soon be opened at the northern end of the campus, termed the North West Precinct.

Aside from the services of Institute of Rheumatology and Orthopaedics and Mental Health, the redevelopment of the RPA campus, has led to the consolidation of inpatient services in the main building as follows:

- **Level 3:** operating theatres, critical care, neonatal care and delivery;
- **Level 4:** medical imaging;
- **Level 5:** emergency department, discharge lounge, maternity and medical imaging;
- **Level 6:** cardiology, renal, MAU, cardiothoracic, vascular, paediatrics, cardiac catheterisation;
- **Level 7:** medical oncology, head and neck, gynaecology, urology, radiation oncology, melanoma, dermatology, orthopaedics, rheumatology, drug health, haematology and ambulatory care;
- **Level 8:** geriatrics, neurology, neurosurgery, ENT, ophthalmology, maternity and ambulatory care.
- **Level 9:** colorectal, upper GI, gastroenterology, transplant services and ambulatory care;
- **Level 10:** plastics, breast surgery, immunology and orthopaedics;
- **Level 11:** respiratory, sleep services and ambulatory care.

This consolidation of services was undertaken to ensure ease of consultation between services and to better integrate the service model and care provided to our patients.

Some of the tertiary and quaternary services located at RPA include, liver and kidney transplantation, open heart surgery, the National Medical Cyclotron, neo-natal intensive care, mothers and babies and regional trauma services. Appendix 2 shows the role delineation levels across all services at RPA.

The Process of Planning

The SLHD Board requested that staff and the community be fully consulted and engaged in strategic planning, related to developing the District Strategic Plan and the facility strategic plans. The aim of the consultation was to test the comprehensiveness, robustness, appropriateness and stakeholder relevance of these core components.

In developing the *SLHD Strategic Plan (2012-2017)*, the SLHD hosted four staff forums held in each of the district hospitals and two in community health settings. Four forums for community members were held at Burwood, Concord, Petersham and Canterbury/Hurlstone Park. The key domains were the basis of the consultation (i.e. Our Patients, Our Staff, Our Community, Our Services, Our Research, our Education and Our Organisation).

Each forum resulted in a report which was sent to those attending. Staff forum outcomes were amalgamated into a staff response and community forums into a community response. An on-line survey was distributed to all staff, providing an additional opportunity for comment. The results of the consultations were discussed by the SLHD senior executive and the SLHD Board.

In addition to the SLHD planning process, RPA has held a specific executive forum focusing on local aims and objectives. The resulting draft strategic plan was circulated to all heads of departments and nursing unit managers for feedback. Comments were collated, reviewed and incorporated. The RPA Clinical Council has in turn reviewed and endorsed the RPA Strategic Plan for 2012-2017.

The Population

RPA is governed by SLHD and is located in the centre and inner west of Sydney. SLHD comprises the local government areas of the City of Sydney (part), Leichhardt, Marrickville, Canterbury, Canada Bay, Ashfield, Burwood and Strathfield. SLHD is responsible for providing care to more than 530,000 people. It covers 126 square kilometres and has a population density of 4,210 residents per square kilometre (ABS 2006).



By 2021, the local population is expected to reach 642,000 people. Significant planned urban developments include: the new Green Square Development in Zetland and Beaconsfield in the City of Sydney; urban consolidation along the Parramatta Road corridor; and new developments in Rhodes, Breakfast Point, the former Carlton United Brewery site, Harold Park and Redfern Waterloo.

The population is ageing, with the number of residents aged over 70 projected to increase by 29 per cent over the next decade.

Almost half of the population speaks a language other than English at home. There are also a significant numbers of refugees, asylum seekers and special humanitarian entrants. For these individuals the major languages spoken include Chinese languages, Arabic, Greek, Korean, Italian and Vietnamese.

The population is characterised by socio-economic diversity, with pockets of both extreme advantage and extreme disadvantage. The LGAs with the highest proportion of the population being Centrelink customers include Canterbury, Marrickville and Ashfield. Mean taxable income is lowest in the Canterbury LGA, which has a higher index of disadvantage than the rest of the state.

RPA provides healthcare to a large population of people who reside outside the District, including other metropolitan districts, interstate, rural and people living overseas. The data provided in the table below is based on the acute overnight bed-days. For specific tertiary and quaternary referral services there are very significant populations of patients from outside of the RPA catchment area.

RPA/IRO Hospital Supply (Inflows)	
SLHD	56.4%
South Western Sydney LHD	7.4%
South Eastern Sydney LHD	6.2%
Greater West + Far West	4.9%
Northern Sydney LHD	4.3%
Western Sydney LHD	3.5%
Overseas	3.3%
Illawarra	2.4%
Southern NSW	2.0%
Hunter	1.7%
Central Coast	1.6%
North Coast	1.5%
Other States	1.3%
Other	1.6%

Healthcare Services

RPA's Clinical Council provides a forum in which senior clinical staff and hospital management can engage to enhance the efficiency and effectiveness of patient care and clinical services through:

- Planning and networking of clinical services;
- Implementing improvements in the quality and safety of health services through effective clinical governance;
- Workforce planning, in particular succession planning for senior clinical staff;
- Endorsing strategic clinical decisions and policies of whole of hospital importance;
- Review and management of KPIs to ensure RPA is meeting benchmark indicators for a range of clinical areas.

RPA has the benefit of having a strong and effective clinical stream management structure which has been in place for many years. Clinical directors provide strategic leadership across SLHD and RPA. They work closely with the senior management of SLHD and RPA to ensure that services are appropriate and are meeting the needs of their catchment populations. The following clinical streams have been developed, each with a SLHD clinical director and a clinical manager.

- Aged Care, Rehabilitation, General Medicine, Chronic and Ambulatory Care and General Practice.
- Cancer Services and Medical Imaging Services.
- Cardiovascular Services and Neurosciences, Bone and Joint, Plastics and Trauma Surgical Services.
- Critical Care Services and Gastroenterology and Liver Services.
- Women's Health, Neonatology and Paediatric Services.
- Oral Health Services.

Within these streams the following RPA services are:

Medical Services

Cardiology	Infectious Disease
Dermatology	Neurology
Drug and Alcohol	Oncology
Emergency Medicine	Paediatrics
Endocrinology	Psychiatry
Gastroenterology	Radiation Oncology
Geriatric Medicine	Renal Medicine
Haematology	Respiratory Medicine
Immunology	Rheumatology

Surgical Services

Breast and Surgical Oncology	Neurosurgery
Cardiothoracic Surgery	Ophthalmology
Colorectal Surgery	Orthopaedics
ENT	Paediatric Surgery
Gynaecology	Plastics & Reconstructive Surgery
Gynae-oncology	Renal Transplant
Head and Neck Surgery	Upper GIT
Liver Transplant Unit	Urology
Melanoma	Vascular Surgery

Allied Health Services

Nutrition and Dietetics	Podiatry
Occupational Therapy	Social Work
Orthotics	Speech Pathology
Physiotherapy	

In addition to the key services listed above, RPA also provides a wide range of other services including:

- Critical care services including an Emergency Department, Intensive Care Unit/High Dependency Unit and Neonatal Intensive Care;
- Anaesthetic Services;
- RPA is a Major Trauma Centre;
- State wide pathology services located on site;
- Medical Imaging including interventional radiology, PET-CT and MRI;
- Womens and Babies services; and
- Yaralla House at the Dame Eadith Walker Estate which is a residential care facility for people with HIV Dementia with the overall management provided by RPA.

The RPA workforce comprises 1,610 nurses, 537 doctors and 402 allied and complementary health staff.



Current Healthcare Activity

The below table outlines RPA's current healthcare activity:

RPA (excluding DO, IRO, Mental Health)	2009-10	2010-11	2011-12
Admissions	68,925	69,754	72,800
Separations	68,961	69,681	72,039
Same Day Separations	30,198	30,068	31,403
Same Day as Per Cent of Total Separations	43.8%	43.2%	43.6%
Occupied Bed Days	261,317	273,830	278,923
Available Bed Days	264,625	264,625	264,625
Average Available Beds	725	725	725
Transfers In	47,595	49,281	52,021
Transfers Out	47,598	49,294	52,021
Babies Born	5,179	5,268	5,373
Daily Average Beds	716	750	743
Daily Average Occupancy Rate	93%	93%	95%
Length of Stay	3.64	3.75	3.61

Forecasted Healthcare Activity for 2021

The below table outlines RPA forecasted activity for 2021:

Projected Hospital Inpatient Activity					
RPA + IRO	2009-2010	2016-17	Per cent change	2021-22	Per cent change
Day Only	30,570	35,719	17%	39,220	10%
Overnight Seps	39,647	41,757	5%	44,387	6%
Overnight Beddays	224,649	238,591	6%	254,538	7%
Overnight ALOS	5.67	5.71	1%	5.73	0%
Notional Overnight Beds @85%	724	769	6%	820	7%

Models of Care and Strategic Planning

RPA is dedicated to provide health care services that reflect the needs of the community. The most prominent challenges for the next five years include population growth, ageing population and increasing births. It is essential for RPA to manage their resources in the most effective manner, which has led to a focus on hospital avoidance and minimisation strategies where possible. Two models of care which demonstrate this philosophy are detailed below.

Hospital in The Home

- Is a newly developed (June 2012) ambulatory care service that provides treatment for people as an outpatient service. HiTH cares for patients who have been referred from the emergency department, consultants' rooms, GPs or on discharge from RPA. At this stage HiTH is a Monday to Friday service that cares for individuals with cellulitis, pneumonia, pulmonary embolus, thrombosis, atrial fibrillation and pyelonephritis. The aim of this service is to decrease admissions, emergency presentations and average length of stay (ALOS) for suitable patients.

Enhanced Recovery After Surgery

- Is a multimodal care pathway assigned to achieve speedier recovery and optimise patient care. It replaces traditional practice with evidence-based practice. Its features include patient education, nutritional optimisation, pain management and fluid balance. The aim of this model of care is to decrease ALOS for appropriately identified patients.

Volunteers

RPA currently has over 125 dedicated and loyal volunteers ranging in age from 19 to 90. The volunteers generously give their time, knowledge and life experiences to support our health services. They make a real and valuable difference to the lives of patients, their families and staff, providing that extra special service and care to our patients. Volunteer activities include meeting and greeting in the hospital foyer, offering clerical assistance in departments and various clinic help desks including intensive care units and the emergency department, a delirium prevention program for aged and frail inpatients, fundraising stalls, companionship, library trolley, assembling renal dialysis patient packs, delivering flowers, and much more. Volunteers are an integral part of the hospital's operations and allow us to offer the best services to our patients and their families. RPA is committed to working with volunteers and the community to enrich the volunteering experience.

Community Participation

RPA has a strong commitment to consumer and community participation to ensure consumers, patients and communities have access to health services appropriate to their needs. The facility actively supports consumer and community participation at all levels, in planning, policy development, health service management, clinical research and guideline development. The RPA Community Advisory Committee is made up of consumers and community representatives that provide feedback to the executive on ways to improve hospital services. RPA will continue to work in collaboration with the community to advise the hospital of opportunities for improvements and to assist in developing information and resources for patients and families.

Future Developments

Chris O'Brien Lifehouse at RPA

The Chris O'Brien Lifehouse at RPA (Lifehouse) aims to provide integrated, comprehensive cancer care in a purpose-built facility in collaboration with RPA. The project is an innovative private-public partnership for the provision of cancer and support services. The central proposal is that a component of the private not-for-profit

service will be funded through entering into a purchaser-provider arrangement with SLHD for the provision of comprehensive cancer services to public patients. The nine storey Lifehouse building, co-located with RPA on the site of the former RPA Page Chest Pavilion, is due for completion in late 2013. The capital funds for the Lifehouse project have been provided by a mix of Commonwealth and state government grants and private philanthropy.

Key principles that have been agreed to guide the development of the transition of cancer services from RPA to Lifehouse are as follows:

1. Public patients should not be disadvantaged. They should receive the same access to and level of care that they would have received if the services were being delivered by RPA. In particular, waiting times for procedures/surgery will be identical for public and private patients.
2. Lifehouse will need to meet the activity targets set for RPA for those cancers that Lifehouse is treating.
3. The service model changes required as a result of the transition of inpatient services to Lifehouse should not cause a significant disruption to the current models of care at RPA.
4. Lifehouse will not have the capacity to provide for all patients with cancer and thus not all cancer types or beds will be transferred: some will continue to be managed in RPA. This is also required for quality reasons, to retain expertise within RPA and to maintain integrated models of care in both cancer and non-cancer treatment provision.

Lifehouse is expected to treat ambulatory and outpatient patients from late 2013 and inpatients from mid 2015.

Lifehouse will provide world-leading holistic cancer treatment, research and education, building on the integrated model of cancer clinical care currently provided by RPA. It will provide a full range of services including diagnostic, surgery, radiation therapy, chemotherapy, as well as support, wellness and complementary healthcare services.

Lifehouse will accommodate

- 96 inpatient beds
- 18 Intensive Care Unit beds
- 10 operating theatres

Stage 1 of the capital development of Lifehouse will include ambulatory care clinics, (including medical and radiation oncology), three day surgery operating theatres, facilities for imaging, wellness and support services and capacity for research.

Stage 2 of the project will include the fit-out of the inpatient floors and the opening of inpatient beds, intensive care services and the seven remaining operating theatres.

Ongoing meetings have been held between SLHD, RPA and the Lifehouse Board to articulate the arrangements related to the development of the Lifehouse and the development of a Service Delivery Agreement.

As a direct consequence of certain cancer services being transferred to Lifehouse, RPA will have additional physical space, providing an opportunity to expand our services. It is anticipated that RPA will submit business proposals closer to the date to expand or develop health services based on the needs of the hospital and community.

Charles Perkins Centre

Planning is also underway for the world class Charles Perkins Centre in collaboration with the University of Sydney. The CDC will undertake ground breaking research towards the prevention and amelioration of obesity, diabetes and cardiovascular disease.

The Centre will provide a state-of-the-art research and education hub to support academics and students from all disciplines working in obesity, diabetes and cardiovascular diseases. This facility will foster multidisciplinary research across biomedical sciences, bioinformatic and computational biology as well as clinical research and behavioural science.

North-west Precinct

Planning is well underway for the development of the North-west Precinct which will be a new purpose-built acute public psychiatric facility at RPA to replace the previous Missenden Unit. The North-west Precinct will be governed by SLHD, however will work in close collaboration with RPA to achieve optimal outcomes for mental health patients within our district.

Key Hospital Issues

There are a number of key priorities which RPA addresses in this plan. These include:

- The implementation of the Aboriginal Workforce Framework – requiring 2.6 per cent of District staff to be of Aboriginal background by 2015;
- The effective establishment of the Chris O'Brien Lifehouse at RPA;
- The development of bed and service capacity to meet growing demand e.g. the full development of the North-west Precinct (Mental Health and Community Health).
- The Charles Perkins Centre;
- Imaging and technological developments;
- The development of cutting edge information management and technology;
- Preparing for and effectively implementing Activity Based Funding; and
- Ensuring efficient business processes.

The following categories have been identified as key issues for our plan:

For Our Patients, Consumers and Carers

- Ensuring that ongoing systems, support, staff and quality assurance measures promote high quality, evidence-based patient care.

For Our Community

- Engaging in a purposeful and strategic way with community organisations, partners and relevant stakeholder groups to ensure high-quality care, excellent communication and health improvement.
- Developing a strategy for improving discharge information, communication and planning.
- Developing the profile of, and strategy for, community-based and health promotion services.
- Developing additional Hospital-in-The-Home, ambulatory care targeted services for marginalised groups and new models of outreach and community health services in close collaboration with the Inner West Sydney Medicare Local.



For Our Services

Service Developments

- Ensuring that the proposed Healthcare Services Plan addresses the following as priority service issues:
 - Developing sustainable strategies for the purchase, upgrading and maintenance of imaging, critical care, operative and other equipment and technology.
 - Ensuring the ongoing development of the tertiary and quaternary services through effective engagement with relevant state and Commonwealth funding bodies.
 - Working in collaboration with SLHD in the development of additional mental health beds in the North West Precinct, implementing the review of community mental health services, improving mental health nursing services in emergency department, and strategically improving discharge support services for patients who are chronically ill.
 - Maintaining and developing the viability of “CORE” hospital services - emergency departments, intensive care, theatres, diagnostics and moving toward the provision of 24 hour services, seven days a week.
 - Revising the diagnostic service capability in line with changing healthcare practice and emerging research requirements. This includes increased MRI capability, interventional imaging, and decision support software for imaging tests.
 - Working in collaboration with SLHD to upgrade the diagnostic services at RPA to provide access to 24 hour radiology, imaging and laboratory services in accordance with their delineated role.
 - Revising maternity beds and service needs in accord with changing demands.
 - Developing paediatric services including improving paediatric governance, further integrating the paediatric unit, developing child and family services including sustained home visiting and implementing the recommendations of NSW Kids in RPA.
 - Expanding the Fast Track/Enhanced Recovery Surgery across all surgical specialities.
 - Further upgrading and consolidating aged care and chronic care services.
 - Ensuring that the development of Lifehouse meets the needs of public cancer patients, does not impact negatively on the model of care at RPA and does not undermine the provision of clinical services at RPA.

Infrastructure Developments

- Increasing the bed and service capacity as indicated by the forecasted demand. This requires increased short stay, acute, sub-acute (including aged care, complex care and rehabilitation), mental health, renal and cancer services so that hospital capacity meets community demand.
- Working in collaboration with SLHD to develop and plan for required capital infrastructure including, for example:
 - The North West Precinct, Lifehouse, upgrading King George V building, increasing the available car parking, and providing patient accommodation.
 - Ambulatory care.
 - Equipment and technology developments at RPA.

Information Management and Technology Developments

- Further developing information technology, especially interconnectivity, improving flexibility, enhanced data management and medical and administrative information systems. The roll-out of the electronic medical record will be a major requirement in achieving this.
- Developing the connectivity of the eMR with partners including general practice, other LHDs and other authorised organisations.
- Improving the capacity to collect and extract data for performance monitoring to meet national and state reporting requirements.
- Reviewing and upgrading “Bedside IT” and developing access mobility to access from patient homes, smart phones, tablets etc. Developing patient portals in the eMR to improve patient and clinician communication.

For Our Staff

- Ensuring strategies are in place to address workforce recruitment, education, development, staff support and workplace culture.
- Ensuring that staff have the skills and necessary support to undertake their role in order to cope with and manage change.

For Our Research and For Our Education

Research

RPA has a long and proud history of support and involvement in research and research translation. The integration of high quality health delivery, education and research has long been a feature of healthcare at RPA. RPA directly undertakes, hosts, sponsors or supports significant biomedical research, clinical trials, clinical research, public health, primary care and health services research (the research 'pillars').

Within the boundaries of RPA, medical research institutes have developed as highly successful centres of excellence in research with clear themes, innovation, research infrastructure, community support and a culture of research excellence. Institutes located within SLHD and with strong interrelationships with RPA include the Brain and Mind Research Institute, the Centenary Institute of Cancer Medicine and Cell Biology, The George Institute for Global Health, The Heart Research Institute and the Woolcock Institute of Medical Research. These are independent or semi-independent, incorporated organisations also affiliated with the University of Sydney. There are a number of other centres of health research excellence at RPA, including, the Surgical Outcomes Research Centre, the Centre for the Baird Institute, the Sydney Cancer Centre, the Sydney Melanoma Unit, the Centre for Integrated Research and Understanding of Sleep.

Within RPA, a large number of our highly eminent, leading-edge researchers, some of whom have dedicated laboratory space in RPA and who receive substantial competitive peer-reviewed funding grants, are not affiliated with an institute. The hospital also supports a very large numbers of clinical trials and significant clinical and health services research projects and studies. A large number of RPA researchers have been in receipt of prestigious scientific, medical and healthcare awards. The RPA research is world leading in some biomedical and clinical areas and has a strong record of scientific publications.

As a result of the strong research presence, research at RPA is typically highly collaborative. The translation of research findings to patient care is facilitated by the proximity and close links of the six research institutes, the University of Sydney and RPA.

Research is a key priority for RPA over the next five years. In order to provide the most current and innovative models of care to all patients research must be prioritised. Research at RPA must continue to evolve in order for RPA to remain an esteemed medical and healthcare research centre.

Education

RPA is proud of its comprehensive, innovative and strategic approach to the provision of education and training. Ensuring a highly competent workforce is especially important in the modern healthcare context of population ageing, increasing chronic disease, an increasing appreciation of equity and the social determinants of health, concerns about patient safety and quality of care and increasing consumer and community expectations of health care. This diverse context is made even more challenging by escalating technological developments, changing models of care and the need to translate research and evidence into healthcare practice. RPA requires an adaptable health workforce with the requisite skills, knowledge and attitudes for contemporary patient-centred, interdisciplinary, collaborative care. RPA in partnership with the Centre for Education and Workforce Development is committed to allocating adequate resources and educational framework for staff development and training. Supporting an educational culture amongst all staff members paves the way for a highly competent and professional workforce to achieve optimal patient outcomes.

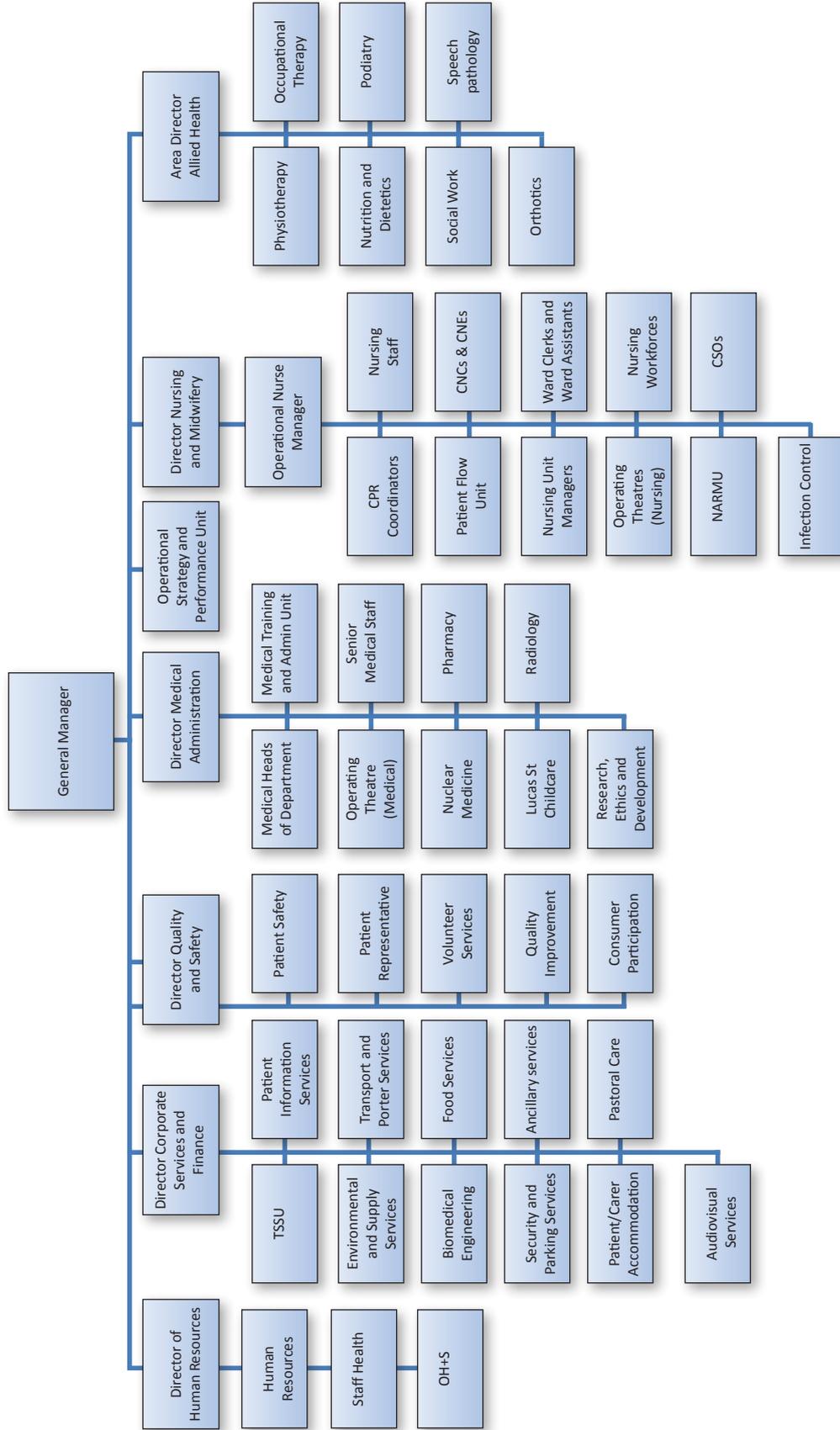
For Our Organisation

- Re-organising financial, performance monitoring and planning capabilities to ensure the smooth transition to activity based funding.
- Providing transparent and efficient financial, performance monitoring and business planning capabilities to improve service efficiency.
- Ensuring efficient and transparent human resource systems and processes.
- Ensuring that services maintain the revenue base derived from providing services to privately insured patients.
- Ensuring communication with the public and communities about healthcare services, achievements and excellence.

The RPA Strategic Framework

Appendix 4 provides an overview of the domains, goals, strategies and actions of this plan.

Appendix 1: RPA Organisational Chart



Appendix 2: Role Delineation Levels for RPA 2011

Service	RPA/IRO	Service	RPA/ IRO
Cardiology	6	Rheumatology	6
Gastroenterology	6	General Surgery	6
Emergency Medicine	6	Burns	3
Intensive Care	6	Thoracic / Cardiothoracic Surgery	6
Haematology – Clinical	6	Day Surgery	4
Medical Oncology	6	Ear, Nose and Throat	6
Pathology	6	Gynaecology	6
Pharmacy	6	Neurosurgery	6
Diagnostic Imaging	6	Ophthalmology	6
Nuclear Medicine	6	Orthopaedics	6
Coronary Care	6	Plastic Surgery	6
Operating Suites	6	Urology	6
General Medicine	6	Palliative Care	6
Dermatology	6	Renal Medicine	6
Endocrinology	6	Respiratory Medicine	6
HIV/AIDS	6	Drug and Alcohol	6
Immunology	6	Geriatrics	6
Infectious Diseases	6	Adult Mental Health (Inpatient)	6
Anaesthetics	6	Genetics	6
Neurology	6	Health Promotion	6
Radiation Oncology	6	Oral Health	5
Rehabilitation	3	Sexual Health	5
Sexual Assault	4	Women's Health	4
Aboriginal Health	5	Multicultural Health	4
Community Health – General	5	Family and Child Health	4
Community Nursing	5	Adolescent Health	3
Adult Mental Health (Community)	5	Older Adult Mental Health (Community)	2
Child/Adolescent Mental Health (I/P)	3	Older Adult Mental Health (I/P)	1
Multicultural Health	4	Child Protection (PANOC)	3
Paediatrics	3	Paediatric Surgery	3
Neonatology	5	Obstetrics	6

Appendix 3: RPA + IRO Hospital Projected Bed Needs to 2022

RPA+IRO Hospital									
	2009			2017			2022		
	Separations	Beddays	Beds @85%	Separations	Beddays	Beds @ 85%	Separations	Beddays	Beds @85%
Acute Activity									
Overnight	39,009	224,817	725	41,747	238,478	769	44,378	254,426	820
Day Only	30,550	30,554	98	35,719	35,719	115	39,220	39,220	126
Total Acute Need			823			884			946
Sub-Acute and Non-Acute Activity									
Overnight	17	187		20	208		23	229	
Day Only	0	0		0	0		0	0	
Total Sub/Non Acute	17	187	1	20	208	1	23	229	1
Total Bed Need			824			885			947(+123)



Appendix 4: RPA Strategic Plan Goals, Strategies and Actions

Goal	Strategy	Action(s)
<p>For Our Patients, Consumers and Carers</p> <ul style="list-style-type: none"> • To have equitable access to safe, high quality, patient - centred care. • To be well informed and encouraged to participate in their own care. • To have equitable access to targeted prevention programs. • To be treated with dignity, compassion and respect. 	<ul style="list-style-type: none"> • Review care planning process for patients to assess their appropriateness. • Improve systems designed to support the timely exchange of relevant information related to patient care. • Regularly survey patients and conduct patient/carer interviews to assess their satisfaction with services and to take action to address concerns. • Work with local private health practitioners, including general practitioners, allied health practitioners and community pharmacists, to enhance patient referral pathways between RPA and SLHD services and provide them with up-to-date clinical and service information. • Complete the implementation of the Essentials of Care Program. • Monitor and manage waiting times for clinical services. • Participate in the SLHD surgical program and support other LHDs in providing surgery within the clinically appropriate time frame. • Provide quaternary and tertiary referral services to patients from other LHDs where required. • Participate with other LHDs to expand telemedicine and outreach clinics to rural, remote areas and international strategies (current work in Tonga and South East Pacific). 	<p>Annual selected medical record audit shows compliance.</p> <p>Annual audit of timeliness of medical record exchange undertaken.</p> <p>Patient satisfaction surveys undertaken annually.</p> <p>Continue to participate in NSW Patient Survey.</p> <p>Participate in meetings and education programs held with local private health practitioners in conjunction with Medicare Local.</p> <p>Essentials of Care program reviewed and evaluated.</p> <p>Waiting times reviewed monthly and measures put in place to address problems.</p> <p>Surgical program KPIs met.</p> <p>Support rural-tertiary planning through planning (State-wide Services).</p> <p>Support rural-tertiary planning through planning (State-wide Services).</p>

	Goal	Strategy	Action(s)
<p>For Our Staff</p> <ul style="list-style-type: none"> To treat our patients with dignity, compassion and respect. To be highly skilled, committed, accountable and valued. To be recognised by the community and their peers as leading edge, highly skilled and as innovative in their field. To work in safe, respectful, healthy and productive workplaces. To share their expertise with others. 	<ul style="list-style-type: none"> Embed a values framework across all aspects of RPA activity. Participate in a comprehensive Workforce Strategic Plan. Strengthen the opportunities provided to staff and students for mentoring, training and development. Improve the opportunities to recognise, provide positive feedback and promote the achievements of staff. Strengthen systems, including grievance systems, to address bullying and harassment. Ensure managers and staff are appropriately engaged in performance development. Consult staff and conduct staff surveys to assess workplace culture and satisfaction and develop and implement actions to address identified areas of concern. Surveys to include issues such as: <ul style="list-style-type: none"> Workplace bullying reduction; Culture of inclusion and involvement; Acceptance of change management; and Clinical engagement /empowerment. Participate in a range of health promotion activities and policies for employees, including the NSW Health Smoke-free Workplace Policy, Breastfeeding Policy, Live Life Well @ Health-Healthier Food and Drink Choices, Staff and Visitors in NSW Health Facilities Policy, and promotion of active transport for staff. 	<ul style="list-style-type: none"> Ensure the CORE Values are outlined in all plans, policies and, guidelines and are embedded in practice when dealing with patients, other staff, the public and the community. Participate in Workforce Plan development. Participate in Education Strategic Plan development. Recognise staff members through peer nominated Employee of the Month and Employee of the Year. Embed all staff training programs with CORE values. Identify and reward workplace champions Improve grievance and discipline processes. Audit of percentage of staff involved in performance development. Periodic review of performance development at RPA. Conduct staff surveys annually. Action plans to address issues developed. Participate in healthy public policy plans and strategies. 	

	Goal	Strategy	Action(s)
		<ul style="list-style-type: none"> • Increase the visibility of security services within the health service, especially after hours 	<p>Review security visibility and devise localised strategies to ensure effectiveness.</p>
For Our Community	<p>Goal</p> <ul style="list-style-type: none"> • To be engaged and work in close partnership with SLHD, the Central Sydney Medicare Local, NGOs, Councils and others to address the social determinants of health. • To support and promote personal and community health, empowerment, responsibility and a health promoting environment. • To access the healthcare they need through an integrated network of primary and community health services across public and private health services. • To be engaged with and networked closely with SLHD, NGOs and related healthcare and service partners to provide health services. 	<p>Strategy</p> <ul style="list-style-type: none"> • Implement at RPA the SLHD's Community Participation Framework and structures to ensure there is effective engagement with the local community. • Participate in implementation of a communications plan to support effective communication with key internal and external stakeholders and the local community. This should include strategies for innovative IT and media for communication between patients, staff, departments, community organisations and partners. Such strategies include social marketing, apps, SKYPE, translated material etc. • Departments within RPA to publish a monthly newsletter to keep staff informed on the activities of RPA • Explore television options and engagement in commercial television to showcase services at RPA, example hybrid theatre and pelvic exenterations. • Participate in the development of a long-term strategy to achieve added national and international status for our flagship hospitals in their areas of expertise and clinical excellence. 	<p>Action(s)</p> <p>Implement effective community participation strategies.</p> <p>Participate in Communications Plan development</p> <p>Participate in innovative IT strategies as outlined in Communications Activity Plan</p> <p>Participate in interactive district website developments.</p> <p>Publish monthly and disseminated to staff, example PS&QU newsletter, NaMAC (Nursing and Midwifery Council) newsletter.</p> <p>Review options for marketing RPA through the media.</p> <p>Participate in strategy development in consultation with key clinicians and providers.</p>

	Goal	Strategy	Action(s)
		<ul style="list-style-type: none"> Participate in the work of Population and Community Health Services in devising programs that support and improve the health of the community. Assist in Memorandum of Understanding with the Inner West Sydney Medicare Local to identify opportunities for improving the health of the local community, improving communication between sectors, promoting well integrated and coordinated care, supporting clinicians and service providers and identifying health needs. Participate with community organisations and groups at the organisational and service delivery levels. 	<p>Participate in Plan for Population Health development.</p> <p>Participate in Health Promotion Plan development.</p> <p>Assist in Memorandum of Understanding development.</p> <p>Invite Inner West Sydney Medicare Local representatives to attend RPA Clinical Council.</p> <p>Participate in Annual NGO Forum.</p>
For Our Services	<ul style="list-style-type: none"> To be culturally sensitive and available to all regardless of culture, income or complexity. To incorporate a population health focus to improve the health and wellbeing of the population. To be innovative, sustainable and evidence-based. To be efficient, high quality, safe and appropriate. 	<p>Strategy</p> <ul style="list-style-type: none"> RPA to participate in a Healthcare Services Plan developed by SLHD. RPA to participate in a Community Health Plan developed by SLHD. RPA to participate in a Health Promotion Plan developed by SLHD. Regularly review the clinical services provided by RPA to ensure that they are timely and accessible. Participate in the establishment of an effective system of monitoring, reviewing and reporting on performance of services in line with the LHD's KPIs. 	<p>Action(s)</p> <p>Participate in Healthcare Services Plan development.</p> <p>Participate in Community Health Plan development.</p> <p>Participate in Health Promotion Plan development.</p> <p>Undertake clinical service reviews regularly and implement findings.</p> <p>Ensure all service managers have performance contracts with actionable KPIs.</p>

Goal	Strategy	Action(s)
<ul style="list-style-type: none"> To provide an appropriate mix of prevention, early intervention, treatment, outreach and palliation. To be clinically networked across the District and have clearly delineated roles. To be networked with general practice and healthcare and related service partners. To be accommodated in high quality, well-equipped facilities with leading edge technology. To have excellent information management and technology services. To be accredited and recognised for excellence. To be well-maintained, clean and safe. 	<ul style="list-style-type: none"> Participate in the partnership with the Redfern Aboriginal Medical Service and Aboriginal Health Team in implementing the National Strategic Framework for Aboriginal and Torres Strait Islander Health, the NSW Aboriginal Health Strategic Plan, the SSWAHS Aboriginal Health Plan, the Aboriginal Workforce Strategic Framework, the Aboriginal Oral Health Program, the New Directions Program for Aboriginal Families, the Aboriginal Chronic Care Program and other related policies, plans and projects. The implementation of these strategies will be undertaken in accordance with the Sydney Metropolitan Health Partnership Agreement. Complete the roll-out of the Electronic Medical Record, GE, PACS and RIS at RPA in line with SLHD. Contribute to the implementation, review and revision of the Disability Action Plan. Strengthen discharge planning to better involve patients/carers with links to GPs and relevant community agencies. Continue to encourage and support diversity in the workplace at RPA. 	<p>Participate in Aboriginal Health Business Plan devised to integrate all plans.</p> <p>Support the linkage of GPs to the eMR and enable point of care access.</p> <p>Participate in the development of a Cerner Electronic Medication Management System.</p> <p>Participate in the roll-out of the Chronic Care Program.</p> <p>Contribute and support the Disability Planning process.</p> <p>Participate in an annual discharge planning forum to link health, community and primary care services.</p> <p>Support bilingualism and diversity in the workplace at RPA.</p>

Goal	Strategy	Action(s)
	<ul style="list-style-type: none"> • Participate in the construction of the Missenden Mental Health Facility at RPA and complete the North-west Precinct at RPA in order to accommodate Community Health Services (a self-funded project). • Participate in the upgrade of the PET-CT at RPA (self-funded). • Establish an interventional cardiovascular suite at RPA (self funded). • Participate in the establishment of a three Tesla MRI at RPA (requires funding). • Participate in sustainable strategies for the purchase, upgrading and maintenance of imaging, critical care, operative and other equipment and technology. • Continue to work with the Chris O'Brien Lifehouse at RPA to develop and construct the integrated cancer care centre (combination, State, Commonwealth funding and self funding). 	<p>Participate in the North-west Sector Project Support business case and PET-CT upgrade IV Cardiovascular Suite established.</p> <p>Participate in Imaging Strategic Plan development. Support Business Case development.</p> <p>MRI established.</p> <p>Participate in the Imaging Steering Committee. Participate in the Procurement Steering Committee.</p> <p>Participate and support Lifehouse Model of Care.</p>



	Goal	Strategy	Action(s)
For Our Education	<ul style="list-style-type: none"> • To support the training and development of future generations of staff. • To encourage a culture of evidence-based practice and innovation. • To support mentoring, clinical supervision and nurturing of staff. • To ensure multi-modal educational options for staff (on-line, face-to-face, mentoring). • To create study and career pathways for all levels of the workforce. • To facilitate education that is interdisciplinary and focused on teamwork. 	<ul style="list-style-type: none"> • Participate in an Education Strategic Plan for SLHD in collaboration with staff, the Centre for Education and Workforce Development, universities and the Central Sydney Medicare Local. • Participate in RPA's role as a provider of education and training to clinicians and managers through its partnership between the Centre for Education and Workforce Development, universities, Health Education and Training Institute, specialist Medical colleges and the Central Sydney Medicare Local. • Participate in the identification and support for health service managers of the future and participate in SLHD's post graduate health services management and research training in partnership with the University of Tasmania. Further develop the Institute of Innovation and Health Service Management based at the Rozelle campus. • Support, wherever practicable, study activities that articulate to nationally recognised qualifications. • Participate in the expansion of the RPA's clinical placement capacity. • Participate in the examination of options for developing cultural competency education as a component of all relevant education at RPA and as a specialised course targeting clinicians. <p>Participate in the development of educational metrics which are linked to performance review.</p> <ul style="list-style-type: none"> • Participate in the review of measures to better integrate mandatory training and ensure it is balanced with clinical development opportunities. • Ensure regular training in CIAP and CERNER is provided. 	<p>Participate in Education Strategic Plan completion.</p> <p>Implement Education Strategic Plan.</p> <p>Participate in the high quality health service management training programs.</p> <p>Support wherever practicable degree, certificate or qualifications for educational programs.</p> <p>Participate in the establishment of a Sydney LHD integrated regional task force to work on expanding clinical placement capacity.</p> <p>Review education programs for cross-cultural competency.</p> <p>Participate in educational metrics development.</p> <p>Participate in mandatory training requirements review.</p> <p>Support involvement of RPA staff in training programs.</p>

Goal	Strategy	Action(s)
<p>For Our Research</p> <ul style="list-style-type: none"> • To be innovative, leading edge and internationally recognised. • To collaborate with universities, research institutes and clinical groups. • To be translated into healthcare practice. • To be supported by peer review grants from government, industry and other sources. 	<ul style="list-style-type: none"> • Participate in the development and implementation of a Research Strategic Plan in collaboration with clinicians, researchers, the research institutes and universities. • Participate in the review of research governance, including ethics processes, at RPA to ensure that it meets the NSW Health Policy for Research Governance. • Promote a research-positive culture at RPA. • Include research in appropriate job descriptions. • Include research in relevant performance appraisals. • Profile and champion research activities. • Ensure research-friendly business processes. • Increase the commitment to high-quality clinical trials. • Encourage clinicians and researchers to collaborate. • Promote a focus on clinical and population research as well as basic research. • Establish the RPA Research Committee. • Participate in strengthening RPA's role in collaboration with SLHD as a leader in medical and health research through its partnership with University of Sydney and the medical research institutes located in SLHD with the aim of developing a research "hub" of international standing able to compete effectively for national and international research grants. • Support the development of the University of Sydney's major research centre, The Charles Perkins Centre for Obesity, Diabetes and Cardiovascular Disease. 	<ul style="list-style-type: none"> • Participate in Research Strategic Plan completion and implementation. • Participate in Research Governance review. • Participate in the implementation of the Research Strategic Plan. • RPA Research Committee to report to RPA Clinical Council. • Participate in the implementation of the Research Strategic Plan. • Collaborate with the University to develop the Clinical Research Facility.

For Our Organisation	Goal	Strategy	Action(s)
<ul style="list-style-type: none"> • To make the most effective use of resources and ensure financial sustainability. • To provide good governance, effective risk management, strong performance monitoring and excellent planning. • To be adaptive and responsive to our community and staff needs. • To ensure the CORE values framework is embedded across all functions of the organisation. • To be an organisation that is widely regarded as an employer of choice. • To be recognised as a major part of the local economy in its role as an employer and in service delivery. 	<ul style="list-style-type: none"> • Participate in the development of SLHD Asset Strategic Plan. • Participate in the development and implement a strategy for readying RPA for the implementation of Activity Based Funding. • RPA to be consistent with the LHDs performance and culture management framework. • Establish excellent, accessible and interactive websites for RPA's facilities and services. • Work with HealthShare to improve the efficiency of equipment procurement and maintenance. 	<ul style="list-style-type: none"> Participate in plan completion. Participate in strategy development and implementation. RPA Casemix committee formed. Participate in the annual review of performance for all senior staff. Websites developed. Participate in the SLHD Procurement Committee. 	



Acronyms

ALOS = Average Length of Stay

CPC = Charles Perkins Centre

CEWD = Centre for Education and Workforce Development

DO = Day Only

ERAS = Enhanced Recovery After Surgery

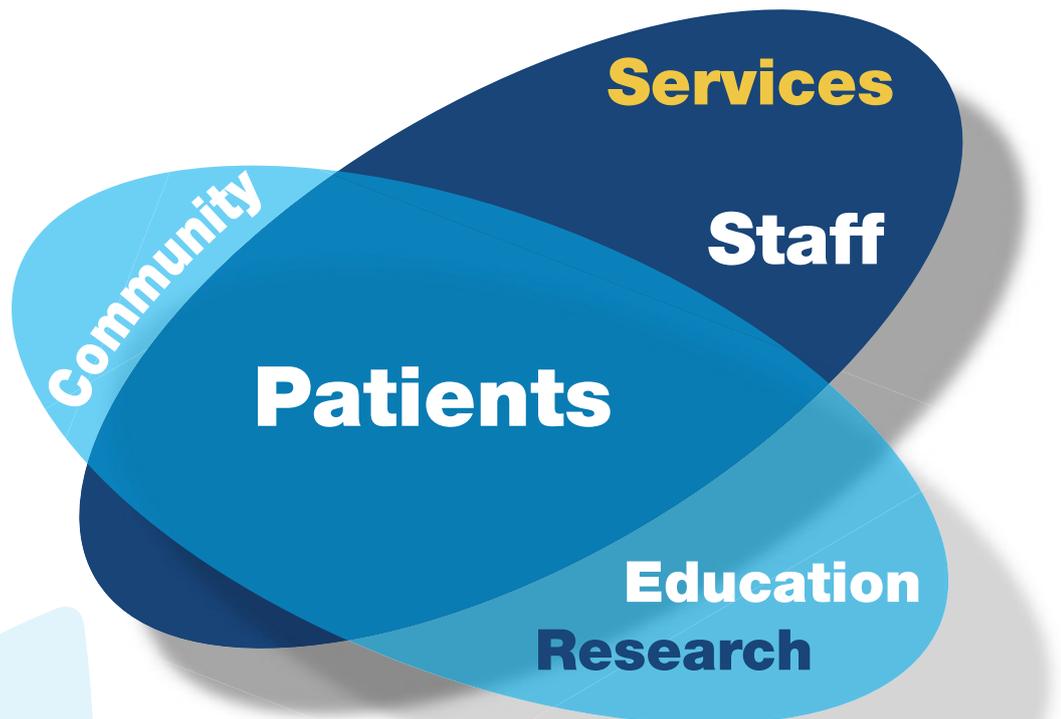
HiTH = Hospital in The Home

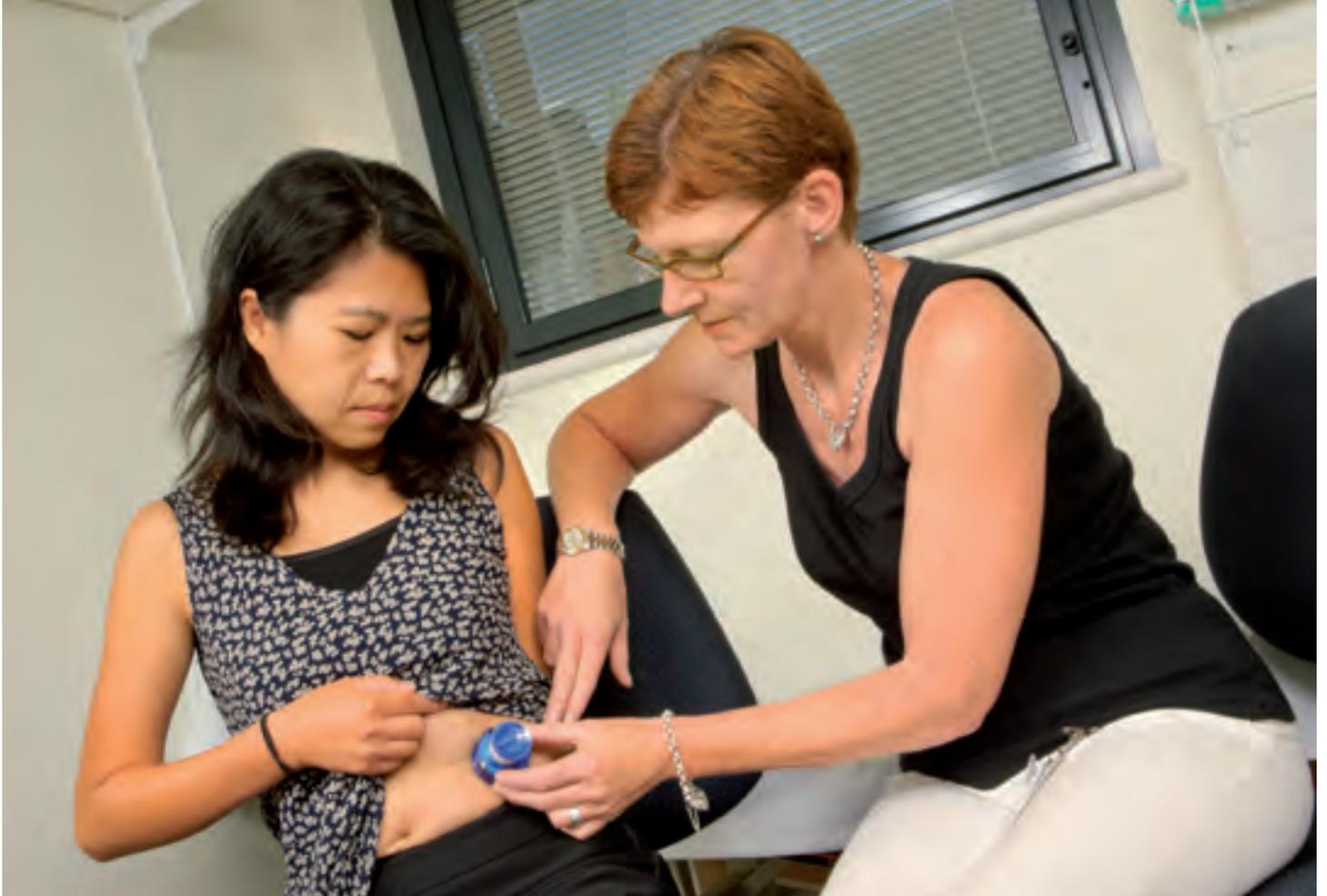
IRO = Institute of Rheumatology and Orthopaedics

LGA = Local Government Areas

RPA = Royal Prince Alfred Hospital

SLHD = Sydney Local Health District





Royal Prince Alfred Hospital **Strategic Plan**



Health
Sydney
Local Health District