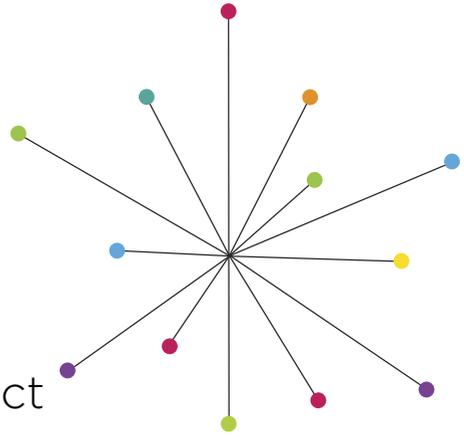




Health  
Sydney  
Local Health District

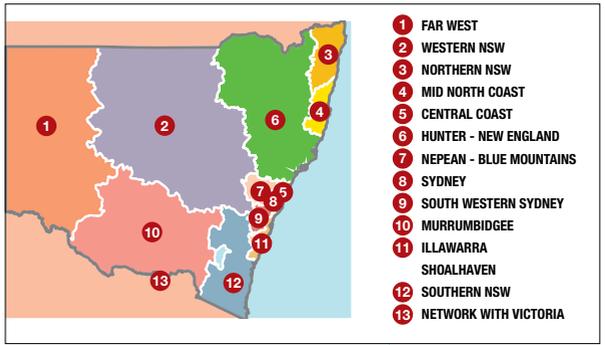


# Sydney Local Health District **Strategic Plan**

**2012-2017**  
(revised 2014)



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



Supporting rural areas through clinical outreach, telehealth, training and tertiary referral

Supporting other LHDs through clinical leadership, research, education and tertiary referral



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# Foreword

Sydney Local Health District (SLHD or the District) is proud of its healthcare service excellence, world leading research, high quality education and leadership in clinical care. This Strategic Plan (2012-017) provides the overarching framework to support the ongoing development of these key District attributes.

Our vision, to achieve **excellence in healthcare for all** is consistent with the directions of NSW Health. The key purpose of the NSW public sector health system and Sydney Local Health District is to help people to stay healthy, to provide access to world class, timely, integrated patient and family centred healthcare and to effectively manage health services. Achieving this requires clear priority setting, supportive and innovative leadership and highly skilled 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.

Aligned with the new NSW State Plan and consistent with the NSW State Health Plan; Towards 2021, Sydney Local Health District will play a key role in:

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

The Sydney Local Health District Strategic Plan is based on seven core domains. These are:

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

For each of these domains goals, strategies and achievable timeframes have been identified.

Importantly, this Strategic Plan has been developed through an open and inclusive staff and community consultation, designed to ensure that the District's strategy remains innovative, relevant, robust and consistent with community and staff concerns. *Almost* 450 people were directly involved in the consultation process (see Appendix 2). The District is committed to open and inclusive community and clinician engagement in all aspects of policy, planning and service development.

We would like to convey the gratitude of the Sydney Local Health District Board and the District Executive to the many staff and community members who shared their time, views and expertise to provide input into this Plan.

The Board and Executive of the Sydney Local Health District are proud to deliver the refreshed version of our Strategic Plan for the District. We are confident that its adoption and implementation will ensure that the District continues to be placed at the forefront of health service delivery in this country.



**Dr Teresa Anderson**  
Chief Executive  
Sydney Local Health District



**The Hon. Ron Phillips**  
Chair  
Sydney Local Health District

# Executive Summary

Sydney Local Health District (SLHD) has a well-established reputation for excellence in the provision of healthcare services and for managerial and fiscal responsibility. Established on the 1st January, 2011, the District continues to build on the positive reputation of its organisational predecessors, Central Sydney Area Health Service and Sydney South West Area Health Service. The District has strong and well recognised leadership roles in research, education and in the provision of high quality tertiary and quaternary clinical services. Prevention, health promotion and high quality community-based healthcare are integral to the District's role. Sydney Local Health District also has an important responsibility to support other Districts, particularly rural areas through providing access to its tertiary and quaternary services and through education and training, clinical leadership and clinical outreach.

The SLHD vision, outlined in this Strategic Plan, is ***'To achieve excellence in healthcare for all'***. Its accompanying mission embeds concepts of equity, patient and family-centredness, integration, health improvement, timeliness and efficiency. It recognises that evidence-based service delivery requires highly skilled and valued staff supported by research, education and state-of-the-art technologies. The Plan's goals support a focus on patients, staff, community and the need for excellence in services, education, research and organisational support. The plan's strategies identify how these aspirations will be realised in service delivery. Integral to this Strategic Plan is the "CORE values" articulated by the Ministry of Health. These important values, collaboration, openness, respect and empowerment inform every aspect of the District's business. The Strategic Plan is the overarching plan for the District.

Significant population growth, increasing chronicity, ageing and increasing births will place additional healthcare demands on the District's services over the next decade and will require enhancements to the current services. Cultural and socioeconomic diversity will continue to pose challenges for equitable service delivery in respect of both access and outcomes.

A strong and collaborative engagement with local communities, community organisations, primary care and other health providers is vital to the District's mission. Through its partnership relationship with the Redfern Aboriginal Medical Service and the local Aboriginal community, SLHD will strengthen both its mainstream health services and targeted programs to address the health needs of Aboriginal people. A responsibility to empower Aboriginal communities in addressing health inequity remains a priority.

Sydney Local Health District is recognised as hosting world leading biomedical, clinical, health services and public health research. It has an important role as a provider of education to clinicians and managers. The District has many leading clinicians, researchers, research institutes and research partners contributing to the translation of research into innovative, evidence-based practice and state-of-the-art models of care, and educating and mentoring the coming generation of clinicians and researchers. All clinical streams across the District have specialised areas of activity that provide opportunities to translate research and to further forge national or international leadership in health improvement, clinical care and research. The research and education enterprise is enhanced by Sydney Local Health District's unique relationship with The University of Sydney, 13 affiliated Medical Research Institutes and Centres, the new collaborative enterprises Sydney Research, Sydney Health Partners and, through its colocation and strong involvement with the University of Sydney's Charles Perkins Centre. Sydney Local Health District intends to further expand its leadership role through an assertive commitment to world leading research and education.

The District will ensure that patient and family-centredness, excellence, integration and cost-effectiveness are embedded in all clinical care and that outcomes are of the highest quality. Supporting and empowering our valued staff is critical to our vision of ensuring world class patient and family centred healthcare. A prime focus is on recognising and supporting the core services in the modern teaching hospital - emergency, intensive care, diagnostic services

and operating theatres. Beyond that, clinical networking, service integration and the clear delineation of services across sites is integral to ensuring quality care. Services will continue to be networked with general practice, community organisations and with our service partners. The District will plan for a balance between prevention, early intervention, treatment and palliation. The clinical services will be supported by effective information and communication systems that link care settings (across acute, subacute and primary care settings), are responsive to clinical needs and enable the extraction of meaningful clinical and service development data.

Service developments and additional infrastructure capacity will be required to keep pace with the increasing demand and to ensure that the District retains its leading role in the development of state-of-the-art technologies, models of care, clinical treatments and public health improvement. Sydney Local Health District will work with NSW Health to establish the required capital and asset infrastructure to meet the increasing demand. The District recognises that innovative public-private relationships in service delivery may be required to meet the emerging local, tertiary and quaternary demand.

*The Chris O'Brien Lifehouse* (or Lifehouse) is an example of an innovative not-for-profit-public relationship designed to build on the excellent integrated cancer services provided at RPA and to provide additional capital infrastructure; however, it is essential that this new development effectively and equitably meets the cancer service needs of the public and the public health system.

In order to strengthen the quaternary level services, required for the state and in some cases national population, the District will ensure high level communication between the Board and the NSW and the Commonwealth governments to achieve appropriate funding streams for these services. The provision of state of the art care requires sustainable strategies for the purchase of imaging, critical care, operative and other equipment as well as the recruitment of highly trained staff.

To facilitate health service excellence, the organisational and business processes of the District will be well managed, efficient and responsive; this includes the corporate, financial, governance, risk management, performance, monitoring and planning functions of the District.

## Our District Vision

*"To achieve excellence in healthcare for all"*

## Our District Mission

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

- Timely, evidence-based, integrated, 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 District 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.

# 1. Introduction

## Background

Sydney Local Health District delivers quaternary, tertiary, acute, primary care and health improvement services, many of which are recognised internationally and nationally. The clinical services within SLHD are supported and enhanced by innovative, internationally recognised research undertaken by its clinicians and researchers in collaboration with universities and medical research institutes. Much of the focus of its research endeavour is on the translation of research into clinical practice. Many of SLHD's clinicians are leaders in their fields with international and national reputations, who contribute to the development of best practice in healthcare service delivery at both a system-wide level and a local level. Services are networked to ensure that all patients across SLHD attain access to best practice patient and family centred care which is linked into primary care and prevention services.

Hospitals and clinical services within SLHD have a long history of providing tertiary and quaternary healthcare services to patients from other parts of NSW, including the provision of telemedicine and outreach clinics to rural areas. For example, for overnight admissions to wards in 2013 -14, almost 40% of activity was for patients from other Sydney metropolitan Districts, NSW patients residing outside Sydney or for interstate and overseas patients.

For particular tertiary and quaternary services, the admission profile further reflects a state-wide catchment.

Sydney Local Health District is continuing to build on a long history of effective clinician and staff engagement and involvement in the planning, delivery and management of its health services. This has been achieved through the development of both formal and informal structures that support consultation and engagement. Similarly, the engagement of community organisations and groups, partners and consumers in planning and development is supported by relevant District structures, processes and strategies.

## The Process of Planning

Since 2011, the Sydney Local Health District Board has continued to consult and engage the staff and community in developing the District's strategic approach. This has included a range of face-to-face forums, on-line surveys and discussions. The outcomes of consultations have been carefully reviewed and have informed our ongoing strategy.



## 2. The Population of Sydney Local Health District

Sydney Local Health District (SLHD) is located in the centre and inner west of Sydney. It comprises the Local Government Areas (LGAs) of the City of Sydney (part), Leichhardt, Marrickville, Canterbury, Canada Bay, Ashfield, Burwood and Strathfield. The SLHD is responsible for providing care to more than 600,000 local residents. It covers 126 square kilometres and has a population density of 4,620 residents per square kilometre (ABS 2011).

By 2021, the local SLHD population is projected to reach 681,337 people and by 2031, 772,448 people. The 33% growth rate in SLHD from 2011 to 2031, outstrips that of NSW which is projected to grow by 27%. 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; new developments in Rhodes, Breakfast Point, Canterbury, the former Carlton United Brewery site, Redfern Waterloo, the Central to Eveleigh Corridor and The Bays urban transformation at Rozelle. Indeed, four out of six of the metropolitan Sydney UrbanGrowth projects are in SLHD.

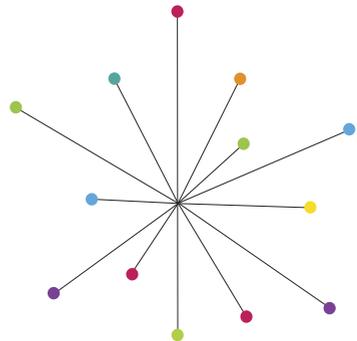


The District population is ageing, with the current number of residents aged over 70 projected to increase by 34% by 2021 and by 81% to 2031. There is a large population of elderly people living in residential aged care facilities. Each year, over 9,200 babies are born to mothers residing in SLHD, with 6,900 deliveries occurring in the two maternity units in SLHD (2013/14).

Almost half of the SLHD population speak a language other than English at Home (LOTE), including significant numbers of refugees, asylum seekers and special humanitarian entrants. Almost 8% of the SLHD population speaks little or no English. The major languages spoken include Chinese languages, Arabic, Greek, Korean, Italian and Vietnamese.

A very significant Aboriginal population resides in the SLHD especially located in the Redfern/Waterloo area, in the City of Sydney and in Marrickville. Aboriginal people are widely recognised as having poorer health and poorer access to appropriate health services.

Sydney Local Health District is characterised by socio-economic diversity, with pockets of both extreme advantage and extreme disadvantage. The LGAs with the highest proportion of the population receiving social welfare assistance 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. SLHD is characterised by a large population of people who are homeless.



### 3. Sydney Local Health District - Healthcare Services

Sydney Local Health District includes principal referral hospitals at Royal Prince Alfred (RPA) and Concord Repatriation General Hospital (Concord Hospital or CRGH) and hospitals at Balmain and Canterbury. Sydney LHD also includes the tertiary oral health facility, the Sydney Dental Hospital. The District has a comprehensive range of community-based health services. Services are linked with primary care providers, including the local primary healthcare network (Central and Eastern Sydney PHN, formerly Inner West Medicare Local).

The District 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 and work closely with the senior management to ensure that services are of the highest quality, appropriate and are effectively meeting the needs of their catchment populations. Fifteen Clinical Streams have been developed each with a Clinical Director and with full-time or shared Clinical Managers.

- Aged Care, Rehabilitation, General Medicine, Endocrine, Andrology, Chronic and Ambulatory Care and General Practice
- Cancer
- Medical Imaging
- Cardiovascular
- Neurosciences, Bone and Joint, Plastics and Trauma Surgery
- Critical Care
- Gastroenterology and Liver
- Women's Health, Neonatology and Paediatric
- Oral Health
- Population Health
- Drug Health
- Mental Health
- Laboratory Services
- Community Health

The SLHD workforce comprises over 11,000 staff. Of these, 5,000 are nurses, 1,500 medical staff, 1,200 allied health and support and 500 oral health staff.

### Current Healthcare Activity

Sydney Local Health District healthcare facilities include:

- Royal Prince Alfred Hospital (RPA): a principal referral hospital
- Concord Repatriation General Hospital (Concord Hospital or CRGH): a principal referral hospital
- Concord Centre for Mental Health: a tertiary mental health facility
- The Professor Marie Bashir Centre for Mental Health; a tertiary mental health facility at RPA
- Canterbury Hospital: a major metropolitan hospital
- Balmain Hospital: a sub-acute hospital with a General Practice casualty
- Sydney Dental Hospital: providing primary, secondary and tertiary dental care
- Tresillian Family Care Centre: a Schedule 3 family care hospital
- Community health services located at a range of sites across the District

In 2013/14, hospitals within Sydney Local Health District provided

- 149,976 Emergency Department occasions of service
- over 152,629 inpatient separations
- over 571,407 occupied bed days
- a little over 2 million outpatient services
- 41,810 surgical operations in theatres and
- 9,763 other surgical cases outside of theatres

6,890 babies were delivered across RPA and Canterbury Hospitals

Community health services provided a little over 200,000 occasions of service in 2013/14.

Overall, 73% of hospital episodes (day and overnight) for SLHD residents are provided at SLHD hospitals and 40% of the separations in SLHD hospitals are for people residing outside SLHD, reflecting the high level of self-sufficiency for the local health services and the importance of the SLHD referral services for people across NSW.

## 4. Forecasted Healthcare Activity for 2021

By 2021, NSW Health forecast tools indicates that there will be:

- A 33 per cent increase in day only separations
- A 23 per cent increase in overnight separations
- A 20 per cent increase in overnight bed days
- Overnight average length of stay will decrease from 5.91 to 5.72 days

The growing elderly population is forecasted to lead to a 46 per cent increase in overnight separations and a 37 per cent increase in overnight bed days for those aged over 85 years. A 38 per cent increase in overnight separations and a 31 per cent increase in overnight bed days is forecast for those aged between 70 and 84 years.

Growing chronicity is also forecasted to impact on the demand for sub-acute public hospital inpatient care by 2021 resulting in a:

- 62 per cent increase in day only sub-acute separations
- 37 per cent increase in overnight sub-acute separations
- 55 per cent increase in overnight sub-acute bed days
- Overnight sub-acute average length of stay increasing from 14.68 to 16.55 days

- 36 per cent increase in sub-acute overnight separations and 71 per cent increase in overnight sub-acute bed days for those aged 85+ years
- 36 per cent increase in sub-acute overnight separations and 49 per cent increase in overnight sub-acute bed days for those aged 70-84 years

New cases of cancer in SLHD are expected to increase from 2,393 in 2011 to 2,913 in 2021. This translates to demand for an additional 10 chemotherapy chairs and an additional radiotherapy machine; however, this takes no account of any increased demand from patients living outside of the District.

Projections for renal dialysis forecast that, by 2021, with 327 extra patients there would be:

- 167 extra patients on home dialysis
- 25 additional satellite dialysis chairs
- 2 additional in-centre chairs

The resulting projected demand in SLHD is for health care facility growth equivalent to a requirement for a whole new tertiary hospital in the next decade. The District is committed to a raft of strategies designed, wherever possible, to reduce the reliance on hospital beds and to shift the focus to integrated community-based care.



## 5. National and International Leadership

Sydney Local Health District has a substantial and widely recognised teaching and research role with world leading and world class research groups in biomedical research, substantial strengths in clinical research, public and population health research and health services research.

The District is widely recognised as a leader in developing innovative models of care, with highly skilled staff and mature clinical services. Services at RPA and Concord Hospital are predominately delineated at the highest level, and there are a large number of services which are provided on a state-wide basis, with some, such as the Australian Liver Transplant Centre at RPA and the State Burns Unit at Concord Hospital, having international roles. These services are networked with the local hospital services across the District.

In 2013 Sydney Research was established as a central point of coordination to deliver on its members' aspirations for the District's health and education precinct to be Australia's leading centre for translational research - converting discoveries into better health for the people of Sydney district, Australia and the World. Sydney Research is a collaborative venture of Sydney Local Health District, The University of Sydney, the above medical/health research centres and other partners. The initiative brings together leading researchers and clinicians from across the Research "Hub" and its networks within a cooperative group to optimise innovation, research opportunities and healthcare outcomes.

In 2015, Sydney Health Partners was formed. This is an important alliance between Sydney Local Health District, The University of Sydney, Western Sydney Local Health District and Northern Sydney Local Health District to further the world leading research as an Advanced Health and Research Translation Centre.

In addition, three major and unique developments on, and adjacent to, the campus of RPA will further enhance the ability of the District to provide best-practice clinical care. These developments are the Chris O'Brien Lifehouse, the Charles Perkins Centre and the new RPA tertiary mental health facility, the Professor Marie Bashir Centre.

The Chris O'Brien Lifehouse, one of two nationally developed integrated cancer care centres, provides world leading holistic cancer treatment, research and education building on the integrated model of cancer clinical care provided by RPA. Lifehouse provides some cancer services including diagnostic, surgery, radiation therapy, chemotherapy, as well as support, wellness and complementary healthcare services.

The University of Sydney Charles Perkins Centre and Charles Perkins Centre RPA Clinic is a new and unique partnership between the District and The University of Sydney. The Clinic aims to undertake ground breaking treatment and research for the prevention and amelioration of obesity, diabetes and cardiovascular disease and related areas.

**There are a number of internationally renowned medical/health research institutes and centres located at, or in close proximity to the District. These include:**

- Centre for Education and Research in Ageing
- Asbestos Diseases Research Institute
- Brain and Mind Centre
- Charles Perkins Centre
- Heart Research Institute
- NHMRC Clinical Trials Centre
- SOuRCe
- ANZAC Research Institute Foundation
- Baird Institute
- Centenary Institute of Cancer Medicine and Cell Biology
- RPA Institute for Academic Surgery
- The George Institute for Global Health
- Woolcock Institute of Medical Research

## 6. Key District Priorities

There are a number of key priorities which the District addresses in this Strategic Plan. These include:

- The implementation of the Aboriginal Workforce Framework – requiring 2.6% of District staff to be of Aboriginal background by 2015
- The implementation of the District Healthcare Services Plan; the related Asset Strategic Plan; the Research Strategic Plan; the Education Strategic Plan; the Workforce Strategic Plan; the Communications Plan; the Community Participation Framework; the Community, Ambulatory and Out-Of-Hospital Care Plan and other enabling plans (see Appendix 1)
- Planning and implementing patient and family centred care, including fully integrated care
- The effective operation of the Chris O'Brien Lifehouse
- The development of bed and service capacity to meet growing demand including additional tertiary, acute and sub-acute capacity, the full development of the RPA Missenden Mental Health Unit, increased imaging and technological developments, additional ambulatory care

- Developing formal research governance structures and processes to support research precinct developments and the pursuit of the strategic goals with our research and education partners
- The development of cutting edge Information and Communications Technology
- Preparing for and effectively implementing Activity Based Funding
- Ensuring efficient business processes

Challenges identified in the Plan include:

### For Our Patients, Consumers and Carers

- Ensuring that plans, ongoing systems, support, staff and quality assurance measures promote high quality, evidence-based, integrated, patient and family centred care



## For Our Community

- Engaging in a purposeful and strategic way with community organisations, partners and relevant stakeholder groups to ensure integrated, high quality care, excellent communication and health improvement
- Developing strategies for streamlining care, improving discharge, communication and care planning across the District
- Developing the profile and strategic base for community-based services
- Developing and implementing a strategic approach to prevention and health promotion in accordance with local, state and national objectives
- 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 GPs, private allied health providers and the Central and South Eastern Primary Health Network.
- Developing HealthPathways in collaboration with the Central and South Eastern Primary Health Network
- Ensuring the population's health, health promotion, health infrastructure and health service issues are considered in urban development and renewal projects occurring within the SLHD
- Establishing an SLHD Health Observatory and an SLHD Equity Unit within the SLHD Population Health Service



## For Our Services

Priorities in the SLHD Healthcare Services Plan include the following:

- Addressing Aboriginal health inequity and access issues in collaboration with Redfern AMS
- Ensuring the District's bed and service capacity efficiently meets the demand related to population growth, ageing and increasing chronicity
- Developing sustainable strategies for the purchase, upgrading and maintenance of imaging, critical care, operative and other equipment and technology
- Developing the tertiary and quaternary services of SLHD through effective engagement with the State and Commonwealth funding bodies
- Planning for the full operation of the mental health service in the North West precinct (RPA) and at Concord, including perinatal psychiatry beds, a specialist Eating Disorders Unit, outreach and community services, implementing the review of community mental health services, improving mental health assessment services in collaboration with the emergency department at RPA, and strategically improving discharge and support services for the many mental health patients who are physically and/or chronically ill



- Maintaining and developing the viability of “core” hospital and community health services. This includes Emergency Departments, Intensive Care, theatres, diagnostics and moving toward the provision of 24/7 services across the District
- Ensuring a vital and networked role for each health facility
- Revising the diagnostic service capability in line with changing healthcare practice and emerging research requirements. This includes, for example, increased MRI capability, interventional imaging, and decision support software for imaging tests
- Upgrading the diagnostic services on-site at all acute hospitals to provide access to 24 hour radiology, imaging and laboratory services in accordance with their delineated role
- Revising maternity bed and service needs for RPA and Canterbury in accordance with growing demand
- Developing Paediatric services including improving paediatric governance, further integrating the paediatric units at RPA and the Canterbury Hospital, expanding paediatric surgery, developing child and family services including sustained home visiting, implementing the recommendations of NSW Kids and Families and working intersectorally to improve the health of children in SLHD
- Expanding the Fast Track/Enhanced Recovery After Surgery across all surgical specialities
- Further upgrading and consolidating aged care and chronic care services including outreach services to Residential Aged Care Facilities (RACFs)
- Improving and expanding Community Health services, early intervention, health promotion and prevention strategies
- Ensuring that the development of the Chris O’Brien 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 in the District 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 at 85% occupancy levels
- Developing and planning for required capital infrastructure including, for example:
- Increasing the Ambulatory Care services, improving acute bed and service capacity, increasing the imaging capability, fully commissioning the North West Precinct (RPA); developing research infrastructure, increasing car parking availability; and, providing patient accommodation
- Increasing the acute and sub-acute bed capacity at Concord; upgrading the aged care, cancer care, emergency department, theatres, diagnostic and ambulatory services
- Upgrading the acute, sub-acute, ambulatory, aged care and dialysis services at Canterbury Hospital
- Gradually upgrading the infrastructure at Sydney Dental Hospital
- Ensuring Community Health facilities meet the requirements of the expanding population of the District
- Upgrading the equipment and technology across the District



# Information and Communication Technology Developments

- Implementing the SLHD Information, Communications and Technology Strategic Plan
- Further developing information and communication technology, especially interconnectivity, improving flexibility, enhanced data management and medical and administrative information systems. The roll out of the electronic medical record is a major priority
- Developing the connectivity of the eMR with partners including general practice, research partners, other LHDs and other authorised organisations
- Improving the capacity to collect and extract data for research, clinical service delivery and performance monitoring to meet national and state reporting requirements
- Reviewing and upgrading “Bedside IT” and developing access mobility from patient homes, smart phones, tablets etc. Developing patient portals in the eMR to improve patient/clinician communication, health promotion and the care of people in the community
- Using data to inform decision-making about management, health services delivery and population health

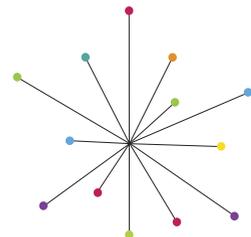


## For Our Staff

- 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 and to cope with/manage change

## For Our Research and For Our Education

- Planning for the strategic development of research and education across the District in collaboration with our partners and in accordance with the respective strategic plans





## For Our Organisation

- Ensuring 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 SLHD communities about healthcare services, achievements and excellence



## 7. The Strategic Framework

The following table (Table 1) provides an overview of the domains, goals and strategies of this Strategic Plan.

**Table 1:** Sydney Local Health District Strategic Plan Goals and Strategies

Domain	Goal	Strategy
<b>Our Patients, Families, Consumers and Carers</b>	<ul style="list-style-type: none"> <li>To have equitable access to safe, compassionate, high quality patient and family-centred care</li> </ul>	Develop a renewed emphasis on Patient and Family Centred Care, quality of life and evidence of positive outcomes from interventions in collaboration with the Australian Quality and Safety Commission. This will focus on enabling the most positive outcomes from healthcare interventions and promoting quality of life considerations in close consultation with the community and the patient population
		Engage patients' families in decision making in care provision, ward rounds, progress plans and policies
	<ul style="list-style-type: none"> <li>To be well informed and encouraged to participate in their own care</li> </ul>	Improve GP access to the eMR. Ensure the timely and accurate provision of discharge summaries and pre-admission information to general practitioners
		Ensure the SLHD clinical governance quality and safety standards are the very highest through implementation of a full range of strategies such as hand hygiene, medication safety, correct patient identification, clinical handover, prevention of pressure injuries, recognition of clinical deterioration and falls prevention
	<ul style="list-style-type: none"> <li>To have equitable access to targeted prevention programs</li> </ul>	Use information technology and social media to provide high quality information that recognises varied levels of health literacy and the need to use everyday language
		Review care planning process for patients to assess their appropriateness
	<ul style="list-style-type: none"> <li>To be treated with dignity, compassion and respect</li> </ul>	Improve the systems designed to support the timely exchange of relevant information related to patient care
		Regularly survey patients and conduct patient/carers interviews to assess their satisfaction with services and to take action to address concerns. Qualitative and quantitative methods should inform these reviews
	<ul style="list-style-type: none"> <li>To promote a stronger access and equity focus in the district ensuring at all levels of the organisation, that individuals and populations with the greatest needs are targeted for relevant services/strategies</li> </ul>	Provide translated patient education information which outlines healthcare rights and responsibilities and provides information on the Australian healthcare system
		Work with local private health practitioners through the Central and Eastern Sydney PHN including general practitioners, allied health practitioners and community pharmacists, to enhance patient referral pathways between SLHD services and provide up-to-date clinical and service information
		Monitor and manage waiting times for clinical services
		Implement the SLHD surgical program and support other LHDs in providing surgery within the clinically appropriate timeframe
		Provide quaternary and tertiary referral services to patients from other LHDs where required
		Work with other LHDs to expand telemedicine and outreach clinics to rural and remote areas

Domain	Goal	Strategy
Our Staff	<ul style="list-style-type: none"> <li>To treat our patients with dignity, compassion and respect</li> </ul>	Embed equity and the CORE values framework through a positive culture framework across all aspects of SLHD activity
		Develop and implement a comprehensive Workforce Strategic Plan
		Ensure all staff know and understand the NSW Health Code of Conduct
	<ul style="list-style-type: none"> <li>To be highly skilled, committed, accountable and valued</li> </ul>	Strengthen the opportunities provided to staff and students for mentoring, coaching, training and development
		Improve employee engagement through improved opportunities to recognise, provide positive feedback and promote the achievements of staff
	<ul style="list-style-type: none"> <li>To be recognised by the community and their peers as leading edge, highly skilled and as innovative in their field</li> </ul>	Strengthen and maintain systems, including grievance processes, to address bullying and harassment
		Improve staff performance and staff management practices through the implementation of the SLHD Employee Performance and Culture Framework
		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: Workplace bullying reduction Culture of inclusion and involvement Acceptance of change management Clinical engagement Expectation management Accountability Consequences of behaviour Empowerment Mentoring and coaching
	<ul style="list-style-type: none"> <li>To work in safe, respectful, healthy and productive workplaces</li> </ul>	Implement the Healthy Worker Initiative Program - 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 the promotion of active transport for staff
		Actively work towards achieving 2.6 per cent of the workforce being of Aboriginal and Torres Strait Islander background
	<ul style="list-style-type: none"> <li>To share their expertise with others</li> </ul>	Plan and manage the impact of intergenerational differences in the workplace. This includes for example recognising the number of carers in the workforce, the ageing of segments of the workforce, the future supply of some staffing categories and the future demand for healthcare
		Reduce excess accrued annual leave
		Implement workforce sustainability initiatives
		Increase staff adaptability and resilience to service changes

Domain	Goal	Strategy
<b>Our Community</b>	<ul style="list-style-type: none"> <li>To be engaged and work in close partnership with SLHD, the primary health network, NGOs, Councils and others to address the social determinants of health</li> </ul>	Review and enhance the SLHD's Community Participation Framework and structures to ensure there is effective engagement with the local community
		Update the 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 media, apps, SKYPE, translated material etc.
		Publish a bi-monthly newsletter to keep staff and the community informed about the activities of the SLHD
	<ul style="list-style-type: none"> <li>To support and promote personal and community health, empowerment, responsibility and a health promoting environment</li> </ul>	Develop a long-term strategy to achieve added national and international status for our flagship hospitals in their areas of expertise and clinical excellence
		Strengthen the work of Population and Community Health Services in devising strategies, programs and intersectional actions that support and improve the health of the community
		Invest in Community Health and develop the profile of Community Health
		Develop plans and strategies with the Central and Eastern Sydney PHN to improve the health of the local community, improve communication between sectors, promote well integrated and coordinated care, support clinicians and service providers and identify health needs
	<ul style="list-style-type: none"> <li>To access healthcare through an integrated network of primary and community health services across public and private health services</li> </ul>	Implement the partnership agreement signed with Redfern Aboriginal Medical Service to ensure conjoint policy implementation, planning, partnered health improvement approaches and complementary service developments
		Engage with non-government organisations and community groups at the organisational and service delivery levels to identify needs, promote positive health, develop quality integrated and coordinated care and exchange information
		Engage with the eight local councils and relevant other organisations in relation to healthy urban development and plans for health improvement and social development
	<ul style="list-style-type: none"> <li>To be engaged with and networked closely with SLHD, NGOs and related healthcare and service partners to provide health services</li> </ul>	Fund non-government organisations (NGOs) through the NSW Health NGO Program to provide services to the community that complement those provided by the District
		Work with other local health districts and professional bodies to ensure that standards of care, clinical practices and services are improved
		Develop the organisational capacity to enhance staff skills in engaging and partnering with community organisations, target groups, consumers and community members
		Develop HealthPathways in collaboration with the local primary health network.

Domain	Goal	Strategy
		<p>Develop a SLHD vision and plan to address the full range of issues associated with Integrated Care. This includes: establishing a focus on ambulatory care and community-based services; analysing the need for services in the community; addressing the changing environment in respect of NGO and community service funding and provision; readying the District for the introduction of the National Disability Insurance Scheme; and, establishing joint programs and services with the primary health network and relevant non-government agencies</p>
		<p>Establish a SLHD Health Equity Unit, responsible for assessing equity within the SLHD services and for enhancing strategic partnerships and engagements with the community sector</p>
		<p>Develop a Health Observatory within the Population Health Unit to provide information about the social determinants of health to the District and to our partners and to inform policy, services and intersectoral collaboration</p>



Domain	Goal	Strategy
<b>Our Services</b>	<ul style="list-style-type: none"> <li>To be culturally sensitive and available to all regardless of culture, income or complexity</li> </ul>	Implement the District Healthcare Services Plan
		Implement, within available resources, the priority strategies for Clinical Streams as identified in Annexure 1
		Develop and implement an SLHD Health Advancement Plan to establish a broad agenda for action on prevention and early intervention
	<ul style="list-style-type: none"> <li>To incorporate a population health focus to improve the health and wellbeing of the population</li> </ul>	Develop and implement the SLHD Health Promotion Strategic Plan
		Implement the SLHD Community Health Plan
		Regularly review the clinical services provided by SLHD to ensure that they are timely and accessible
		Establish an effective system of monitoring, reviewing and reporting on performance of services in line with the LHD's KPIs
		Strengthen and build on 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
	<ul style="list-style-type: none"> <li>To be innovative, sustainable and evidence-based</li> </ul>	Complete the roll out of the Electronic Medical Record (eMR) across SLHD
		Implement the SLHD Disability Action Plan
		Develop and implement a SLHD Carers Strategic Plan
		Strengthen Discharge Planning to better involve patients/carers with links to GPs and relevant community agencies
		Work with agencies on urban renewal and development projects and define the needs and community service requirements of the growing populations in SLHD in Green Square, Rhodes, Redfern-Waterloo, The Bays, Central to Eveleigh, Parramatta Road renewal and other growth areas of SLHD
	<ul style="list-style-type: none"> <li>To be efficient, high quality, safe and appropriate</li> </ul>	Establish the SLHD Health Language Service to improve access to Interpreters, including telephone interpreting, use of social media and on-line interpreting and translation tools and to increase staff skills in their use
		Establish the Concord Cancer Centre including radiation oncology services
	<ul style="list-style-type: none"> <li>To provide an appropriate mix of prevention, early intervention, treatment, outreach and palliation</li> </ul>	Work with NSW Health to streamline capital works processes particularly where SLHD can self-fund projects
		Ensure sustainable strategies for the purchase, upgrading and maintenance of imaging, critical care, operative and other equipment and technology
		Work with the Chris O'Brien Lifehouse to ensure the highest quality cancer care continues to be provided to public cancer patients. Assist Lifehouse in the commissioning and commencement of inpatient services
		Review the 20 bed Palliative Care facility at Concord
		<ul style="list-style-type: none"> <li>To be clinically networked across the District and have clearly delineated roles</li> </ul>
<ul style="list-style-type: none"> <li>To be networked with general practice and related service partners</li> </ul>		
<ul style="list-style-type: none"> <li>To be accommodated in high quality, well-equipped facilities with leading edge technology</li> </ul>		

Domain	Goal	Strategy
	<ul style="list-style-type: none"> <li>To have excellent information management and technology services</li> </ul>	Review the Professor Marie Bashir Centre at RPA
		Upgrade the IRO building at RPA
		Develop Masterplans for priority health precincts across SLHD in accordance with the SLHD Healthcare Services Plan
	<ul style="list-style-type: none"> <li>To be accredited and recognised for excellence</li> </ul>	Develop and implement the SLHD Strategic Plan for Medical Imaging
		Analyse hospital services across the District in respect of the clinical costs, inputs and outcomes. Engage with clinicians and service providers to systematically address clinical variation
	<ul style="list-style-type: none"> <li>To be well maintained, clean and safe</li> </ul>	Develop a Child Health and Wellbeing Plan in collaboration with partner government agencies, in particular the NSW Department of Family and Community Services
		Develop Ambulatory Care, Hospital-in the Home, Early Recovery after Surgery and other services and strategies designed to minimise hospital stay and maximise earlier discharge and community care. Develop an SLHD plan for Ambulatory Care
		Develop plans for services that have previously been provided across SLHD and SWSLHD. This includes Mental Health, Drug Health and Oral Health
		Develop plans for priority service developments, realignments and upgrading. This includes plans for Surgery, Renal Services, Diabetes, Maternity, Aged Care and Rehabilitation
Develop strategic plans and strategies targeting priority populations. This includes Aboriginal and Torres Strait Islander populations, Culturally and Linguistically Diverse (CALD) populations (including Refugees) and people who are homeless		

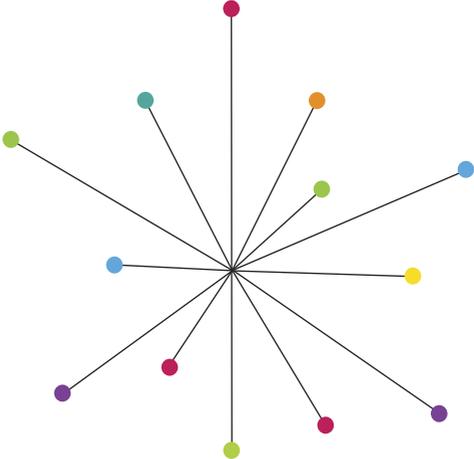


Domain	Goal	Strategy
<b>Our Education</b>	<ul style="list-style-type: none"> <li>To support the training and development of future generations of staff</li> </ul>	Refresh and implement the Education and Training Strategic Plan to reflect the revised structure and re-branding of CEWD
		Develop educational programs based around core strategic themes related to management and leadership engagement, innovation, governance, clinical skills, research, educational provision and enhancing technical skills
	<ul style="list-style-type: none"> <li>To encourage a culture of evidence-based practice and innovation</li> </ul>	Strengthen SLHD'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 and Education Training Institute (HETI), specialist Medical colleges and the local primary health network
		Strengthen the identification and support for health service managers of the future and strengthen 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
	<ul style="list-style-type: none"> <li>To support mentoring, clinical supervision and nurturing of staff</li> </ul>	Support, wherever practicable, study activities that articulate to nationally recognised qualifications
		Expand the SLHD clinical placement capacity
	<ul style="list-style-type: none"> <li>To ensure multi-modal educational options for staff (on-line, face-to-face, mentoring)</li> </ul>	Examine options for developing cultural competency education as a component of all relevant education in SLHD and as a specialised course targeting clinicians
		Develop educational metrics which are linked to performance review
		Regularly review mandatory training in collaboration with HETI
		Where feasible invite non-government organisations (NGOs) to participate in relevant health training programs e.g. conjoint leadership programs
	<ul style="list-style-type: none"> <li>To create study and career pathways for all levels of the workforce</li> </ul>	Review options for providing staff education, development and understanding of community and NGO services. This could include consideration of "work swaps"
		Publish a regular column on the LHD education and teaching activities in the SLHD Newsletter to promote education
	<ul style="list-style-type: none"> <li>To facilitate education that is interdisciplinary and focused on teamwork</li> </ul>	Integrate where relevant, education and training of SLHD with that provided in Sydney Medical Research Institutes
		Further support 'teaching on the run' for medical and clinical students by identifying training and supporting supervisors and mentors
		Ensure that educational programs reflect the strategic imperative of growing research, innovation and centres of clinical and academic excellence
		Review the availability of educational facilities at all health outlets in SLHD. Ensure that a range of modern educational facilities, services and technologies are readily available

Domain	Goal	Strategy
<b>Our Research</b>	<ul style="list-style-type: none"> <li>To be innovative, leading edge and internationally recognised</li> <li>To collaborate with universities, research institutes and clinical groups</li> <li>To be translated into healthcare practice</li> <li>To be supported by peer review grants from government, non-government,</li> <li>To collaborate with industry and other partners</li> </ul>	Implement the SLHD Research Strategic Plan in collaboration with clinicians, researchers, medical research institutes and universities
		Review research governance, including ethics processes, within SLHD to ensure that it meets the NSW Health Policy for Research Governance
		Promote a strong research-positive culture in SLHD
		Ensure the Districts' business processes are supportive to researchers including financial processes, human resource processes, ethics etc.
		Work with the University of Sydney, the Medical Research Institutes and other relevant parties to further develop 'Sydney Research' as a central point of coordination to provide research leadership, effectively use resources, strengthen the profile and standing of research and compete for national and international research grants
		Support the development of the University of Sydney's major research centre, the Charles Perkins Centre. Work to collaboratively manage the Charles Perkins Centre RPA Clinic
		Collaborate with the University of Sydney in its endeavour to further advance its four Health and Medical Research strategic priority areas for research: Obesity, Diabetes and Cardiovascular disease, Cancer, Mental Health and Neuroscience, Infectious diseases
		Regularly feedback the progress and achievements in the implementation of the Research Strategic Plan to clinicians and researchers using a variety of online and face-to-face media
		Increase the commitment to high quality clinical trials
		Encourage clinicians and researchers to collaborate to actively ensure the translation of research and evidence into clinical practice
		Assess public-private partnership potential in relation to developing capital assets, bio technology etc.
		Assess means of using CERNER as a data collection/ research tool, this requires further developing STARS, ensuring support in IM&TD and exploring the opportunities available from the CERNER research module
		Monitor the outcomes from the Research Business Unit to ensure value for this resource
		Promote a focus on clinical and population research as well as basic research
		Strengthen the Community Health research role and agenda
		Strengthen the role of Nursing and Allied Health in research
		Support the collaborative involvement of consumers in research
Maximise the benefits arising from new research collaborations. This includes enhancing research in collaboration with our Sydney Research partners with the development of: <ul style="list-style-type: none"> <li>-The University of Sydney Charles Perkins Centre</li> <li>-The Chris O'Brien Lifehouse</li> <li>-The SLHD and University of Sydney Professor Marie Bashir Centre</li> </ul>		

Domain	Goal	Strategy
		<p>Through Sydney Research and Sydney Health Partners develop an Advanced Health Research Centre in collaboration with the University of Sydney, the Medical Research Institutes, WSLHD, NSLHD and other key health, education and research partners</p> <p>Establish the RPA Institute of Academic Surgery with the goal of developing world class academic surgery and translating this into surgical practice and patient care</p> <p>Hold an Innovations and Research Symposium on an annual basis to showcase the SLHD research, the research of our partners in Sydney Research and to encourage the translation of research into healthcare practice</p>



Domain	Goal	Strategy
<b>Our Organisation</b>	<ul style="list-style-type: none"> <li>To make the most effective use of resources and ensure financial sustainability</li> </ul>	Develop a SLHD Asset Strategic Plan Continue to ready the District for the implementation of Activity Based Funding in non-inpatient services, research and education Implement the LHD's employee performance and culture framework, with a focus on the need for change based on YourSay results and other feedback from the staff
	<ul style="list-style-type: none"> <li>To provide good governance, effective risk management, strong performance monitoring and excellent planning</li> </ul>	Continue to ensure excellent, accessible and interactive websites for the LHD, its facilities and services Establish access to interactive referral databases as a replacement for paper service directories and promote community and NGO services as well as health services Improve staff recruitment and selection processes in collaboration with HealthShare
	<ul style="list-style-type: none"> <li>To be adaptive and responsive to our community and staff needs</li> </ul>	Work with HealthShare to improve the efficiency of equipment procurement and maintenance. Develop a Procurement Strategic Plan in collaboration with the Ministry of Health and Healthshare Evaluate the clinical stream structure to ensure it is well placed to provide strategic and operational advice and services
	<ul style="list-style-type: none"> <li>To ensure the CORE values framework is embedded across all functions of the organisation</li> </ul>	
	<ul style="list-style-type: none"> <li>To be an organisation that is widely regarded as an employer of choice</li> </ul>	
	<ul style="list-style-type: none"> <li>To be recognised as a major part of the local economy in its role as an employer and in service delivery</li> </ul>	

## Aged Health Care, Rehabilitation, General Medicine, Endocrinology, Andrology, Chronic and Ambulatory Care and General Practice

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- Upgrade aged care facilities across SLHD in accordance with the District's Healthcare Services Plan. This includes inpatient and day hospital facilities at Concord, RPA, Canterbury and Balmain
- Continue the roll-out of Hospital-in-the-Home across SLHD
- Complete the re-organisation of the Diabetes service at RPA
- SLHD Chronic Care Program: Re-fashion to improve coverage, consistency, communication and meet MOH targets and expectations. Implement solutions from clinical redesign. Engage all stakeholders
- Work with the Charles Perkins Centre to develop chronic care models
- Consolidate, develop and extend outreach services for geriatric medicine, bone health and diabetes, to Aboriginal Medical Services, rural and remote LHDs and local Residential Aged Care Facilities using a combination of face-to-face and telehealth services
- Prepare for the Introduction of ABF in subacute care, inpatient and community
- Review clinical activities in view of the changing Commonwealth and State reforms and changed funding arrangements

## Cancer Services

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- Support the efficient transition of services to the Chris O'Brien Lifehouse and ensuring the successful integration of cancer services. Establish a long-term partnership between SLHD and Lifehouse for optimal delivery of cancer services
- Support master planning for the Concord Cancer Centre precinct to include Radiotherapy Services and the Sydney Survivorship Centre

- Efficient development of the Palliative Care Service at Concord and across SLHD; implementation of the Options Paper for SLHD Palliative Care Beds and development of SLHD-wide End of Life Care strategies
- Increase the access to clinical trials within cancer care thereby improving patient outcomes
- Ensure increased capacity in radiology for diagnostic and therapeutic procedures
- Maintain capacity for diagnostic pathology and meet the needs of new molecular testing for therapeutic decision making
- Ensure access to state-of-the art treatment technology e.g. minimally invasive surgery
- Develop and implement eMR functionalities to ensure effective information exchange among various care settings
- Support the development of electronic prescribing across SLHD

## Cardiovascular Services

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- Upgrade Medical Imaging to the standard tertiary and quaternary standard. This includes developing cardiac MR and a hybrid laboratory at Concord Hospital
- Ensure the sustainable and transparent funding of defibrillators, pacemakers, valve prosthesis, stents and closure devices. Support adherence to tender and a more efficient resolution of tenders
- Expand SLHD dialysis capacity. Dialysis is currently near or at capacity across SLHD. There is a need to expand the current sites and establish dialysis and a renal service at Canterbury. Establish a chronic kidney disease, early intervention and prevention service
- Expand the cardiovascular beds, ICU and theatre access with the projected demand as outlined in the SLHD Healthcare Services Plan
- Support collaborative primary, secondary and tertiary care. This requires supporting the development of clinical pathways, the efficient transfer care after an acute episode and early recovery after surgery, the development of fully integrated information systems, including expanding access to patient information such as ECGs, angiogram results, echocardiogram results, and telemedicine

- Develop processes to facilitate SLHD responding to changes in models of care including for example, percutaneous versus open procedures and new devices (valves, stents, biological therapies)

## Community Health Services

- Continue to invest in Community Health to support its pivotal role in complementing hospital and primary healthcare services
- Establish Community Health as an essential element of an integrated healthcare system, delivering:
  - Early intervention and prevention, universal services, proportionate universalism, specialised and targeted programs
  - Community and client health education and health promotion
  - Services and programs to those identified as most vulnerable
  - Network of community-based service sites
  - Patient and family centred care
  - Develop a shared vision for child health and wellbeing with the range of child health agencies delivering services to children and their families in the Inner-West
- Identify and resolve gaps and duplication through formalised collaborative efforts across the range of child health agencies that make up the sector (government and non-government)
- Implement and evaluate a 5 year cross-agency Inner West Child Health and Well-Being Plan
- Support the implementation of a District-wide model for Hospital in The Home that alleviates the burden on hospital services and is patient centred; providing patients with the option of home based clinical services with nursing visits

## Critical Care

- Upgrade Information and Communication Technology
- Upgrade Medical Imaging Technology and explore opportunities for private/ public partnerships

- Develop new models of hospital and health service care
- Develop generalist support of specialist services in the tertiary environment. The recommended approach is to increase the role of critical care outside of the ICU/HDU environment (outreach)
- Support the teaching demands of students and young health workers

## Drug Health

- Clinical redesign of Concord Drug Health Service to manage patients with complex comorbidities
- Establish the Drug Health Research Centre to enhance research in drug health
- Improve access to services, ambulatory care pathways, and linkages to primary care services
- Clinically redesign the Harm Minimisation Program with ADMs in remaining hospitals (Balmain and Canterbury)
- Undertake community engagement (particularly Redfern, Marrickville, Canterbury)

## Gastroenterology and Liver

- Prevention and early intervention of chronic viral hepatitis and associated research
  - New therapies to cure HCV (no toxicity)
  - Case finding in HBV to increase access to treatment
- Increase the numbers/ rates of organ donation, liver and kidney transplants and associated research. Undertake a major collaboration with community groups to introduce international practise in organ donation.
- Increase public bariatric surgery and research in association with the Charles Perkins Centre
- Maximise efficiencies in parenteral nutrition services
- Maximise endoscopic intervention efficiencies

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## Medical Imaging

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- Complete the migration of Concord and Canterbury Hospital imaging and RIS migration from the old SSWAHS PACS to SMILE, and, complete the transfer of the RPA image archive (dated back to 2001) from the old Agfa PACS to SMILE
- Expand the participation of SLHD Medical Imaging Departments in research and clinical trials given the added imaging capacity and achievement of a TGA cyclotron manufacturing license for the Department of PET and Nuclear Medicine Molecular Imaging
- Continue to purchase / install major medical imaging equipment across the SLHD - including CT, angiography, MRI, PET-MR, SPECT-CT, CBCT for Sydney Dental

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## Laboratory Services

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- The transition of Molecular Diagnostic Testing into routine clinical use in Cancer Services
- Implement new Technologies e.g. LC-MS/NGS to provide testing
- Risk Management through initiatives such as BloodNet/Patient ID bar-coded wrist bands at collection
- Facilitate electronic downloads to external customers

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## Mental Health

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- Review the new Professor Marie Bashir Centre. This includes:
  - Establishing the expanded Eating Disorders Service
  - Implementing the new University research beds as a part of the service
  - Seeking to improve the care available to patients within the new facility in partnership with community-based services and other providers
  - Working with the RPA Women and Babies Service to develop a Perinatal Psychiatry Unit as part of the state-wide role at the Professor Marie Bashir Centre
- Work to implement the targets set by the

Steering Committee for improving health outcomes amongst those who live with enduring mental illness

- Develop pathways for care with community partnerships
- Trial an integrated facility in Redfern/Waterloo

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## Neurosciences, Bone and Joint, Plastics and Trauma Surgery

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- Network surgical services across the district where this adds to effectiveness and efficiency:
  - Neurosurgery, ENT, Ophthalmology, Orthopaedics
- Plan the High Volume Short Stay Service at Canterbury as a District resource
- Upgrade the Institute of Rheumatology and Orthopaedics
- Develop new integrated Models of Care for patients effected by neurological conditions to increase the level of care in the community
- Continue the development of Rheumatology and First Fracture Service together with the expansion of Ambulatory Care Services for Epilepsy and Rheumatology

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## Oral Health

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- Continue the National Partnership Agreement providing additional services until March 2015
- Participate in and actively build on Child Dental Benefit scheme from March 2014 to supplement state funding to provide additional services
- Implement the Oral Health Workplace Culture Improvement Plan. This includes 27 projects that have been identified through consultation with staff. Implementation is commencing across SLHD over the next two years
- SLHD Infrastructure and Major Equipment: Progressive surgery redesign in specialty units, build a dedicated 10 surgery suite for new grads and VDGYP's, Imaging- PSP rollout, NewTom 3G (Cone Beam CT) replacement to integrate with NSW Health PACS and RIS

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## Population Health

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- Tobacco Control
- Establish the SLHD Population Health Observatory
- Establish the SLHD Health Equity Unit
- Develop a plan for Population Health

## Women's Health, Paediatrics and Neonatology

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- Establish the Walk-In Women's Assessment Centre for Obstetrics and Gynaecology as an expansion of the Day Assessment Unit at RPA
- Implement an integrated Obstetric and Neonatal data collection system for SLHD (RPA and Canterbury)

- Acquire an intrapartum fetal monitoring system for SLHD (RPA and Canterbury) with appropriate trigger alerts to decrease the rate of adverse perinatal outcomes
- Increase obstetric and neonatal beds to accommodate population expansion in SLHD
- Work with Mental Health Services to develop a 4-6 bed state-wide Perinatal Psychiatry Specialist Unit at the Professor Maire Bashir Centre
- Increase paediatric beds to accommodate population expansion and improved access for local children to local services including paediatric surgery
- Continue to develop midwifery led models of care across SLHD
- Establish a Prenatal Genomics Centre targeting maternal screening for aneuploidy and genetic disorders using free fetal DNA in maternal circulation
- Facilitate Gynaecology access to Short Stay services being developed within SLHD



# Appendix 1: Sydney Local Health District Planning

Since its formation, Sydney Local Health District has embarked on an ambitious program of strategic, service and asset planning. A cascading set of plans has been carefully crafted to address community healthcare need, to reflect the SLHD Board priorities, the Ministry of Health and pillar organisation's requirements, and the outcomes from a series of staff and community consultations.

The Sydney Local Health District Strategic Plan 2012-2017 is the overarching plan for the District. It outlines the vision, mission and values of the District, its core functions and capabilities. The Strategic Plan highlights the importance of the District's leadership role, its world leading research and education and its robust service base including its quaternary and tertiary services. Importantly, the Strategic Plan was developed through an open and inclusive staff and community consultation.

Reflecting the core domains and strongly aligned to the Strategic Plan are six enabling plans of particular strategic importance to the District (Figure 1). The enabling plans include:

- Research Strategic Plan
- Education and Training Strategic Plan
- Community Participation Framework
- Communication Plan
- Workforce Strategic Plan
- Healthcare Services Plan

**Figure 1: Hierarchy of plans**



These plans in turn inform the annually revised SLHD Asset Strategic Plan.

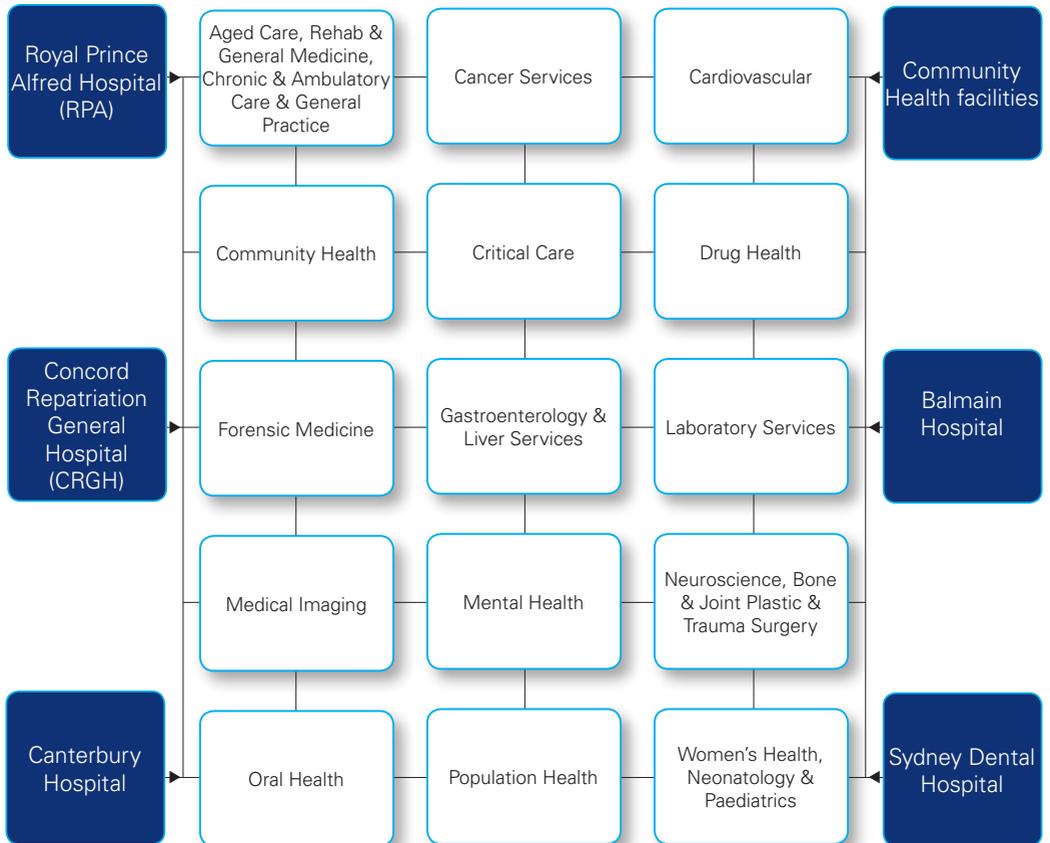
The District has completed five-year plans for all its hospitals and community health services, providing an operational framework for implementing relevant sections of the Strategic Plan and highlighting the most pressing needs, issues and aspirations of each hospital and service. Plans have been completed for the following facilities:

- Royal Prince Alfred Hospital
- Model of Care for *Chris O'Brien Lifehouse*
- Balmain Hospital
- Canterbury Hospital
- Concord Hospital
- Community Health

The District has also collaboratively completed an Overview Model of Care Plan and an Inpatient Plan for the Chris O'Brien Lifehouse which will provide public as well as privately funded cancer services.

The District is clinically governed through 15 Clinical Streams (See Figure 2). Each of these clinical streams has developed a plan or strategy outlining their current services, model of care, opportunities for leadership roles and the projected future services. These plans are integrated in the SLHD District Healthcare Services Plan.

**Figure 2: Overview of District Healthcare Services Planning**

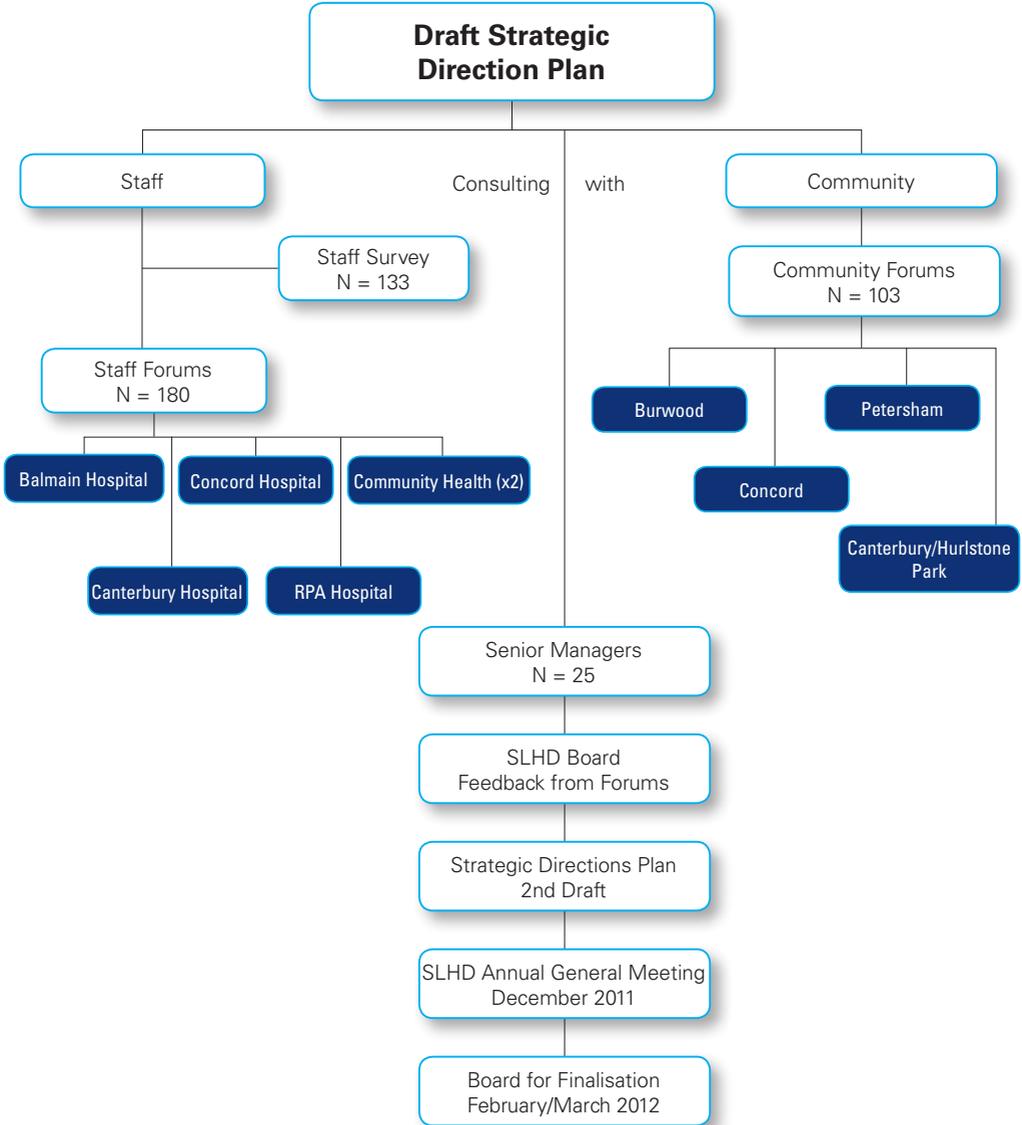


# Appendix 2: The Community and Staff Consultation

Other profession-based and service-based plans are also integral to the planning framework. This includes the SLHD Allied Health Plan, the SLHD Sexual Health Strategy, SLHD Dementia Plan, SLHD Disability Plan, the SLHD Sustainability Plan and the SLHD Aboriginal Health Plan.

This Strategic Plan was developed through a comprehensive community and staff consultation. Figure 3 shows the process for this consultation.

**Figure 3: Consultation Process Towards the Strategic Plan**



The following tables summarise the outcomes of the staff and community consultation for each of the six domains identified by the District as our “core business”:

## Consultation Process Outcomes in the Domain of OUR PATIENTS/CONSUMERS/CARERS

<b>Staff Comments</b>	<ul style="list-style-type: none"> <li>• Improve recruitment processes. Reduce levels of approval</li> <li>• Ensure sufficient staff and non-human resources</li> <li>• Invest in Information Technology especially:</li> <li>• Excellent, accessible and interactive websites</li> <li>• Electronic Medical Record consistent across the District &amp; GP accessible &amp; enabling point of care access</li> <li>• Ensure communication is accurate, adequate, clear between VMOs, staff, departments, patients/carers</li> <li>• Ensure discharge planning involves patients/carers, communication is excellent &amp; excellent linkages to GPs and community organisations</li> <li>• Ensure Interpreters are accessible and pro-active</li> <li>• Focus on health promotion, early intervention and prevention as well as treatment</li> <li>• Improve parking and community transport</li> <li>• Educate patients about healthcare responsibilities. Develop positive behaviour signs</li> <li>• Increase consumer involvement at the local level</li> </ul>
<b>Community Comments</b>	<ul style="list-style-type: none"> <li>• Facilitate improved access to health services (with tailored models of care) for marginalised groups:</li> <li>• Implement holistic strategies appropriate to groups e.g. ATSI, CALD, aged and transgender</li> <li>• Improve physical access e.g. signage, ramps, wider pathways and comfortable seating</li> <li>• Enable excellent, plain English communication between staff, patients, departments</li> <li>• Use IT and media - social marketing, apps, SKYPE, print, translations, local media etc.</li> <li>• Electronic Medical Record</li> <li>• Establish a cross-service on-line referral database including Intake procedures/eligibility</li> <li>• Improve discharge planning and communication with GPs and Community</li> <li>• Consider liaison/link staff e.g. McGrath nurses</li> <li>• Involve patients/consumers in their own care plan. Treat patients and family as part of the care team</li> <li>• Ensure the right staff are well trained and are adequate in number</li> </ul>

## Consultation Process Outcomes in the Domain of OUR SERVICES

<b>Staff Comments</b>	<ul style="list-style-type: none"> <li>• Fast-track the uniform Electronic Medical Record across District and linked to General Practitioners</li> <li>• Ensure access to database for referrals (CERNER)</li> <li>• Invest more in early intervention/prevention/promotion/palliation services</li> <li>• Ensure sufficient , culturally competent staffing and modern resources</li> <li>• Promote a holistic, collaborative and “seamless patient journey” GP-Hospital-Community</li> <li>• Ensure high level services are shared across the LHD and upgraded range of services</li> <li>• Improve access to Interpreter Services and bilingual staff</li> <li>• Improve equipment procurement and maintenance</li> <li>• Improve links to Community Services</li> <li>• Ensure health service cleanliness and maintenance</li> </ul>
<b>Community Comments</b>	<ul style="list-style-type: none"> <li>• Invest in Primary and Community Health as a priority</li> <li>• Ensure continuity of care</li> <li>• Improve discharge planning and communication between hospital, GPs, Community Health and community agencies – timely accurate, translated &amp; eligibility criteria</li> <li>• Promote community services &amp; community information e.g. half price taxis</li> <li>• Establish strong links with Primary Health Networks</li> <li>• Support Outreach Models of Care especially for marginalised groups e.g. mental health</li> <li>• Invest in Linkage Staff to develop relationships with marginalised groups</li> <li>• Support increased Hospital In The Home</li> <li>• Tailor services to the needs of marginalised groups</li> <li>• Plan for forthcoming Brokerage System/Purchasing Models (people with disabilities/aged)</li> <li>• Ensure adequate Staffing Ratios for aged and disabled i.e. higher support needs</li> <li>• Invest in IT e.g. websites, EMR, communication systems for communicating with consumers</li> <li>• Improve physical access for the aged and disabled</li> <li>• Reach out to community and collaborate with Councils via section on website for NGOs, newsletters, conjoint training, transport, consumer group liaison</li> </ul>

## Consultation Process Outcomes in the Domain of OUR COMMUNITY

<b>Staff Comments</b>	<ul style="list-style-type: none"> <li>• Improve community engagement</li> <li>• Establish linkages to community organisations and groups</li> <li>• Participate in community events</li> <li>• Provide information to the community</li> <li>• Positively promote health and act on local health issues</li> <li>• Invest in Community Health</li> <li>• Improve community outreach from hospitals e.g. falls prevention</li> <li>• Improve discharge and referral links to community, GPs and excellent IT</li> <li>• Market Local Health District excellence in the community and via Websites</li> <li>• Improve disability access to services</li> </ul>
<b>Community Comments</b>	<ul style="list-style-type: none"> <li>• Develop partnerships and two-way communication</li> <li>• Ensure Health is represented in community forums</li> <li>• Develop strong links with peak organisations e.g. Alzheimer's etc.</li> <li>• Provide flexible 'bottom-up' Health Promotion programs- not "boxed sets" i.e. needs based</li> <li>• Make Health Issues everyday conversations</li> <li>• Provide high quality information and communication via a range of medium e.g. apps, SKYPE, websites etc.</li> <li>• Ensure clear referral &amp; discharge pathways and communication</li> <li>• Develop outreach models of care appropriate to target groups (especially marginalised)</li> <li>• Consult staff and community prior to changing services</li> <li>• Provide Funding for Community Services for transit to home services</li> <li>• Improve the profile in the community of Community Health</li> </ul>

## Consultation Process Outcomes in the Domain of OUR STAFF

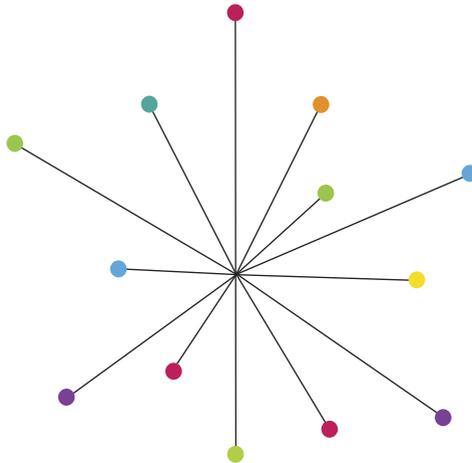
<b>Staff Comments</b>	<ul style="list-style-type: none"> <li>• Improve recruitment processes</li> <li>• Reduce levels of approval/delegated authority</li> <li>• Ensure that staff are valued through</li> <li>• Staff education</li> <li>• Team building</li> <li>• Marketing the staff skill set</li> <li>• Providing positive feedback</li> <li>• Ensure sufficient and equitable staff numbers and resources and backfill staff on leave</li> <li>• Undertake genuine consultation and involve staff in planning</li> <li>• Improve access to IT resources and electronic medical record</li> <li>• Educate patients and community about positive behaviour in hospitals</li> <li>• Establish cultural competency education for staff</li> <li>• Invest more in Community Health</li> <li>• Improve the effectiveness of the management of bullying</li> </ul>
<b>Community Comments</b>	<ul style="list-style-type: none"> <li>• Encourage staff to partner with the community</li> <li>• Seek consumer involvement and comments on health interventions and plans</li> <li>• Recognise community expertise</li> <li>• Ensure adequate staff numbers and infrastructure</li> <li>• Ensure professional development for staff</li> <li>• Invite NGOS to participate</li> <li>• Support conjoint leadership development programs</li> <li>• Ensure strong values in workplace; managers to take responsibility</li> <li>• Ensure staff feel valued</li> <li>• Transparent decision-making</li> <li>• Consult and survey staff</li> <li>• Recognition and “Thank You”</li> <li>• Flexible working hours</li> <li>• Recruit bilingual staff</li> <li>• Make security staff more visible</li> <li>• Provide more office space, cleaner toilets, general areas</li> </ul>

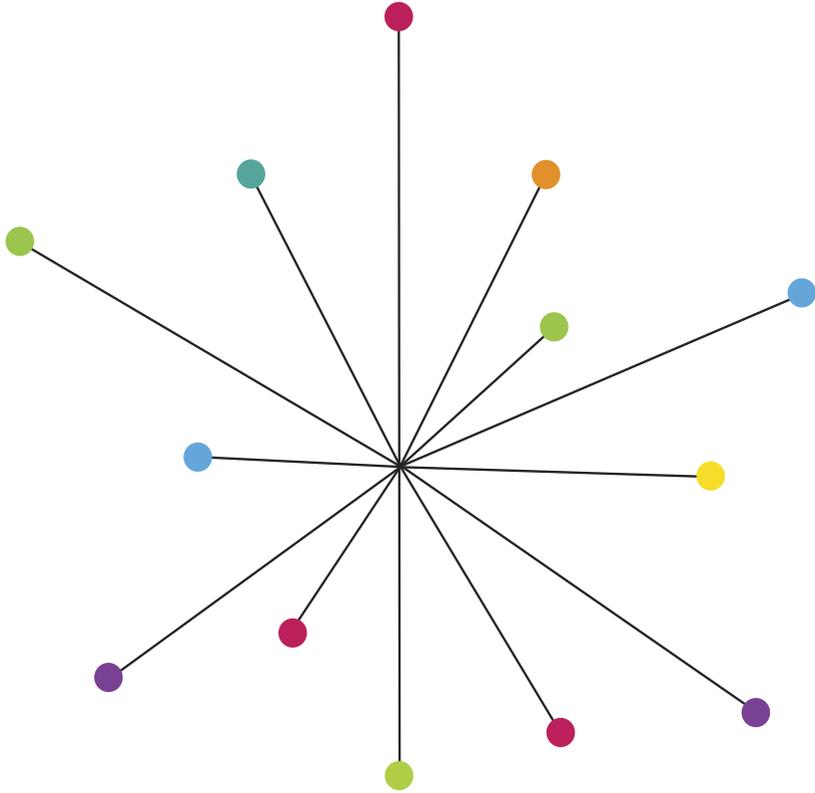
## Consultation Process Outcomes in the Domain of OUR RESEARCH

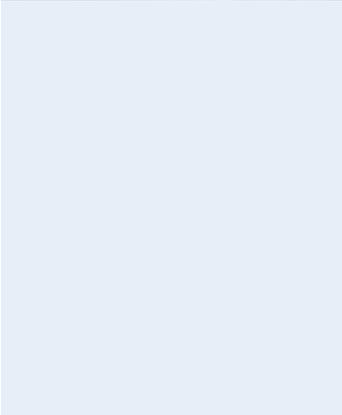
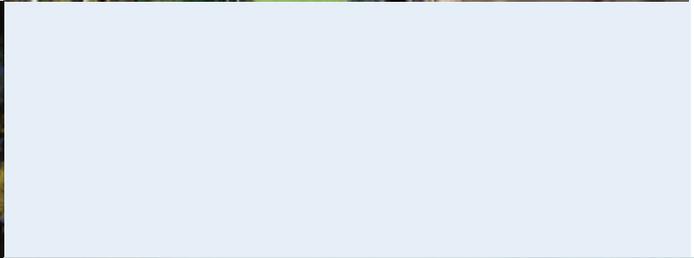
<b>Staff Comments</b>	<ul style="list-style-type: none"> <li>• Promote a research-positive culture</li> <li>• Include research in job descriptions and as agreed occasions of service</li> <li>• Backfill staff doing research</li> <li>• Performance appraisal</li> <li>• Journal club</li> <li>• Recognition, profiling and communication of research achievements</li> <li>• Adequate resources including library Internet access</li> <li>• Develop LHD research leadership and structure to support research</li> <li>• Improve funding for clinical trials and IT support</li> <li>• Improve links with the Universities</li> <li>• Improve translation of research into quality projects</li> <li>• Improve ethics processes</li> <li>• Provide small research grants</li> </ul>
<b>Community Comments</b>	<ul style="list-style-type: none"> <li>• Involve consumers and communities collaboratively in research</li> <li>• Identify and prioritise research via consumer Involvement so that research is relevant</li> <li>• Provide information about evidence/research outcomes to community in everyday language</li> <li>• Promote the translation of research</li> <li>• Provide funding for evidence-based research for positive change/good models</li> <li>• Promote links with tertiary institutions</li> </ul>

## Consultation Process Outcomes in the Domain of OUR EDUCATION

<b>Staff Comments</b>	<ul style="list-style-type: none"> <li>• Promote equity across professions and time (24/7) in access to education</li> <li>• Develop an Education Strategic Plan</li> <li>• Review the utility of mandatory training</li> <li>• Value education and provide allocated protected time for education</li> <li>• Backfill staff attending education</li> <li>• Provide IT as one of many modes of education (don't rely on IT)</li> <li>• Develop education metrics linked to performance review</li> <li>• Mentoring to be goal directed and not just for new staff</li> <li>• IT infrastructure should reach into education centres (KPEC)</li> <li>• Appoint a discipline-specific staff educator e.g. allied health</li> <li>• Foster conference presentation skills</li> <li>• Educate about CIAP and CERNER regularly</li> </ul>
<b>Community Comments</b>	<ul style="list-style-type: none"> <li>• Facilitate NGO access to health training</li> <li>• Ensure cross-information about programs run by NGOs or by Health</li> <li>• Invest in Cultural Competency education</li> <li>• Provide education about Community Services</li> <li>• Support "Work Swaps" – NGOs and Discharge Planners/Social Workers</li> <li>• Enable staff to attend Conferences</li> </ul>













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