
Sydney Local Health District

Forty Eighth Meeting of the Board

Date: Monday 19 October 2015
Time: 9.00am - 11.00pm
Venue: Executive Boardroom, Concord Repatriation General Hospital, Concord
Chair: The Hon. Ron Phillips, Chair

1. Present and apologies

The Hon. Ron Phillips, Chair
Dr Teresa Anderson, Chief Executive
Ms Victoria Weekes, Member
Mr Trevor Danos, AM, Member
Dr Thomas Karplus, Member
Dr Barry Catchlove, Member
A/Prof. Christine Giles, Member
Ms Joanna Khoo, Member
Professor Paul Torzillo AM, Member
Ms Frances O'Brien, Member
Mr David McLean, Member
Ms Susan Anderson, Member

Apologies

Nil

In attendance

Ms Kim Armstrong, Secretariat
Mr Daniel Hunter, Chief Executive, HealthShare (9.00am - 9.45am)

2. Welcome and introductions

The Chair welcomed Members and Guests to the forty eighth meeting of the Sydney Local Health District (SLHD) Board.

3. Declaration of conflicts of interest

The Chair advised to declare any conflicts of interest at this meeting. There were no conflicts of interests to declare.

4. Confirmation of previous minutes

4.1 Minutes 21 September 2015

The minutes of the Board meeting held on Monday 21 September 2015 were moved and seconded with the following change:

10. Matters for approval / resolution, Page 6, last dot point should read: *cash basis becomes accrual basis.*

4.2 CE Report – September 2015

The report of the Chief Executive September 2015 was moved and seconded with minor amendments.

The Chair then declared that the CE Report for September 2015 were ready for publication.

Presentations:

1. HealthShare:

Mr Daniel Hunter, Chief Executive, HealthShare presented on:

- Overview of services offered state-wide
- Linen Services
- EnableNSW – Aids & Equipment Program and Home Respiratory Program.
- Service Centres – Accounting/VMO Claims Processing and Payroll.
- Food & Patient Support Services.
- Warehousing & Distribution.
- New Service Centre Pricing Model.
- Benefits of the New Pricing Model.
- Shared Services – Estimated Financial Savings.
- Shared Services – Non-financial Benefits.
- Customer Feedback – Key baseline measures overview.
- New Warehouse Model.
- Looking Ahead.

The Board discussed and agreed to include:

- Efficiencies and Key Performance Indicators.
- Importance of quality of service / service levels over pricing.
- Resolution of issues.
- HealthShare Employee satisfaction.
- Food services – nutrition

The Chair thanked Daniel for the presentation and for attending the Board meeting.

5. Matters arising from the previous minutes

5.1 Action sheet

The Board received and discussed the outstanding agenda items on the action sheet.

6. Patient Story (Verbal Report)

Professor Paul Torzillo provided a verbal report on patient from Canberra Hospital who developed a DVT while overseas; the subsequent complications that arose from this case required transportation to RPAH and use of the ECMO machine. Link to the Patient's Story on YouTube was sent to all Board members by the Chief Executive.

7. Standing Items

7.1 Acronyms List

The Board received and noted the revised Acronyms List.

7.2 Financial Classification Codes

The Board received and noted the revised Financial Classification Codes List.

7.3 Board Calendar 2015

The Board received and noted the Board Calendar for 2015.

8. Chairman's Report

Nil to report

9. Chief Executive's report

The Board received the Chief Executive's Report for October 2015. In particular the Board noted:

- Review of commercial operations in relation to RPAH rental properties has seen an increase in rent by 300%. The successful tender will be improving all retail outlets within RPAH.
- The Pitch – The Public Service Commission has highlighted *The Pitch* to Parliament.
- Xtend Project – If this project is successful it can be rolled out across the State.
- NSW Health Awards – The 17th Annual NSW Health Awards will be held on 2 November 2015. SLHD has four finalists in the NSW Health Awards; one in each category.
- To register, please contact Nerida Bransby or Kim Armstrong.
- Performance – Length of Stay: Hospital in the Home (HiTH) may be impacting on length of stays. District is reviewing this.
- ED Triage – RPAH staff succeeded in achieving ED Triage targets. A saving of 100 hours of ART time was achieved during the study and evaluation shows it was a success. A formal publication is to be produced from this study.
- Workforce: There was an increase in Influenza vaccinations.

- Yaralla Estate Community Advisory Committee: Due building works undertaken earlier last century, an Archeologist is to be on-site for digging of topsoil for the Community Gardens.
- Bloody Great Night Out: \$130k was raised for haematology research from private donors at the Bloody Great Night Out at Concord.

9.1 Finance and Performance Reports

9.1.1 SLHD Board reporting pack – August 2015

The Board received and noted the SLHD Board Reporting Pack for August 2015.

9.1.2 Selected Performance Indicators – August 2015

The Board received and noted the Selected Performance Indicators for August 2015.

9.1.3 HealthPathways Dashboard Report August 2015

The Board received and noted this report.

9.2 Project updates

9.2.1 Lifehouse

The Board received the information on Lifehouse provided in the Chief Executive's confidential report.

9.2.2 Macquarie International Private Hospital

The Board received the information on Macquarie International Private Hospital in the Chief Executive's confidential report.

9.3 Capital Works Report

The Board received and noted the Capital Works report.

9.4 Clinical Governance Report

The Board noted the next report is due in December 2015.

9.5 Facility Reports – August 2015

(i) Balmain Hospital

The Board received and noted the Balmain Hospital facility report.

(ii) Canterbury Hospital

The Board received and noted the Canterbury Hospital facility report.

(iii) Concord Hospital

The Board received and noted the Concord Hospital facility report.

(iv) Royal Prince Alfred Hospital

The Board received the Royal Prince Alfred Hospital facility report.

(v) Oral Health Services and Sydney Dental Hospital

The Board received and noted the Oral Health Services and Sydney Dental Hospital facility report.

(vi) Mental Health Services

The Board received and noted the Mental Health Services report.

(vii) Croydon/Marrickville/Redfern Health Centres

The Board received and noted the report for Croydon/Marrickville/Redfern Health Centres.

(viii) Drug Health Services

The Board received and noted the Drug Health report.

(ix) Community Health

The Board received and noted the Community Health report.

(x) Population Health

The Board received and noted the Population Health report. The Board requested clarification on how data is analysed and translated into responses, such as Models of Care. A joint presentation by Population Health and Planning has been requested.

(xi) Tresillian

The Board received and noted the Tresillian report.

(xii) Organ Donation for Transplant

The Board noted that the report was not available.

(xiii) Lifehouse

The Board received and noted the Lifehouse report.

- The Board requested clarification of reporting requirements for Lifehouse.
- The Board discussed the issue concerning Medical appointments.

10. Matters for approval / resolution

Nil to report.

11. Board Committee reports / minutes

11.1 Finance, Risk and Performance Management Committee

The Board received and noted the minutes of the meeting 12 October 2015.

11.2 Education and Research Committee

The Board received and noted the minutes of the meeting 21 September 2015.

11.3 Communications Committee

The Board noted the next meeting is to be held on 19 October 2015.

11.4 Audit and Risk Committee

The Board received and noted the minutes of the meeting held on 24 September 2015.

11.5 Health Care – Clinical Quality Council

The Board noted the next meeting is to be held on 28 October 2015.

11.6 Health Care – Clinical Council

The Board received and noted the minutes of the meeting held on 23 September 2015.

11.7 Medical Staff Executive Council

The Board noted the next meeting is to be held on 6 November 2015.

11.8 Patient and Family Centred Care Steering Committee

The Board noted the next meeting is to be held on 14 October 2015.

12. Other Committee reports / minutes

12.1 Sustainability Committee

No meeting held.

12.2 Medical and Dental Appointments Advisory Committee

The Board received and noted the minutes of the meeting held on 9 September 2015.

12.3 SLHD Targeted Activity and Reporting Systems (STARS)

The Board noted the meeting to be held on 17 September 2015 was cancelled.

12.4 Surgical Demand Committee

The Board received and noted the minutes of the meeting held on 16 September 2015.

12.5 Revenue Enhancement Development Committee

The Board noted the meeting to be held on 23 September 2015 was cancelled.

12.6 NSW Health / SLHD Performance Review Meeting

The Board received and noted the minutes of the meeting held on 2 September 2015.

12.7 SLHD Innovations Group

The Board noted the meeting to be held on 25 September 2015 was cancelled.

12.8 Organ Donation for Transplantation

The Board noted the meeting to be held on 22 September 2015 was cancelled.

12.9 Major Procurement, Assets and Imaging Steering Committee

The Board received and noted the minutes of the meeting held on 8 September 2015.

13. Matters for noting

13.1 SLHD Brief - Sydney District Family and Community Services Pregnancy Family Conferencing Program Annual Report 2014-2015

The Board received and noted the SLHD Brief - Sydney District Family and Community Services Pregnancy Family Conferencing Program Annual Report 2014-2015.

13.2 Audit and Risk Committee report to the Board July - September 2015

The Board received and noted the Audit and Risk Committee report to the Board July - September 2015.

13.3 SLHD Brief – Education and Research Annual Report

The Board received and noted the SLHD Brief – Education and Research Annual Report. Board agreed that Research approval should lapse if reports not submitted.

13.4 SLHD Picture of Health – updated 2015

The Board received and noted the updated SLHD Picture of Health. It was suggested to include an executive summary on reports at the beginning of the document.

13.5 Letter - MoH re Six Monthly Performance Review

The Board received and noted the MoH Six Monthly Performance Review Letter.

13.6 SLHD Customer Success Story

The Board received and noted the SLHD Customer Success Story.

13.7 Publication - Public Sector Report

The Board received and noted the Public Sector Report.

14. Other Business

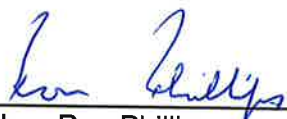
14.1 WestConnex motorway scheme.

As WestConnex will impact on people living within the SLHD catchment area, the Chief Executive will table the Environmental Impact Report once it is finalized. Submissions are still being accepted until Friday, 23 October 2015.

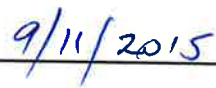
15. Next Meeting

The next meeting is to be held on Monday 9 November 2015 commencing at 8.30am, in the SLHD Boardroom, King George V Building, Camperdown

The meeting closed at 11.11am.



The Hon. Ron Phillips
Chair



Date



CONCORD REPATRIATION GENERAL HOSPITAL

Tour by SLHD Board Members

Date: 19 October 2015

Time: 11.00am – 11.30pm

Venue: Executive Unit, Concord Repatriation General Hospital

11.00am MEET IN EXECUTIVE UNIT

Dr Tim Sinclair

**Professor Len Kritharides and Dr Ilona Cunningham
to join tour party**

Meet Dr John Cullen at entry to Ward 11

VISIT TO WARD 11 – Acute Care Ward

Eloise Clarke

VISIT TO WARD 14 – Rehab Ward

Lynn Symonds

VISIT TO PROPOSED REDEVELOPMENT SITE

Attendees

SLHD Board members

Dr Tim Sinclair, General Manager, CRGH

Professor Len Kritharides, Head of Dept Cardiology, Chair - Medical Staff Council

Dr Ilona Cunningham, Head of Dept Haematology

Dr John Cullen, Head of Dept Aged Care & Rehab; Executive Clinical Director CRGH

Eloise Clarke, NUM Ward 11

Lynn Symonds, NUM Ward 14

Chief Executive's Report to the Finance, Risk and Performance Management Committee and the SLHD Board October 2015

NATIONAL FUNDING REFORM / ACTIVITY BASED FUNDING

Non-Admitted (NAP) Activity

The Performance Unit is working with IM&TD and the NAP Coordinators to review the following changes in relation to NAP15:

- NAP15 provider types and source of referrals in Cerner (Scheduling and ABF Contact forms) for currency to align with NAP15 changes.
- Initial and subsequent flags for all outpatient service types within the district.

The Performance unit is also undertaking some targeted work with the NAP Coordinators at Canterbury and Community Health to assist with increasing the patient level data for these two facilities.

The STARS NAP app has now been live since early September. The feedback from the local co-ordinators has been very positive with reports back that it has allowed them to become more efficient in their data quality work. It has also allowed an increased awareness of their facilities performance against activity targets.

Sub and Non Acute (SNAP) Update

A standardised process is being developed to manage ungrouped SNAP activity to ensure the District is not open to any financial risk in funding shortfall for SNAP activity this financial year.

This financial year has had a strong start with MoH KPI's as follows: 91% grouped activity and 95% without error for the District. As all ungrouped and error SNAP activity has been followed up and reported correctly, these figures would be much closer to 100%.

Collaborative work is continuing with facility SNAP coordinators and the ABF working group at RPAH to ensure correct identification and classification of SNAP activity is ongoing and continually improving. The District SNAP Coordinators working group will be meeting this month to develop a quality / auditing plan for the SNAP data collection.

Mental Health

IM&TD have recently completed a re-extract and reload of all 2014-2015 non-admitted data to the HIE, this resulted in a 5.5% increase in activity, which is a positive result.

The MH non-admitted data quality improvement implementation plan has been developed, agreed to by MHS and due to commence very shortly. Some quality measures have already commenced and yielded immediate improvements associated with an increase in NWAU. This plan will be implemented over the next few months with ongoing review and monitoring of progress, and a final evaluation prior to the end of this financial year.

NWAU Activity against Target

The end of year result for acute admitted activity was 0.47% positive to target, this is an excellent final position for the District. The overall result for SLHD for 2015/16 for all ABF streams including Emergency Department, Acute Admitted, Sub-acute, Mental Health and Non-Admitted the district was 2.30% to target this is a strong result for the District.

Whilst the State reports a -12% variance against our acute activity target at the end of August, there is still a large volume of uncoded records for July/August which would impact on overall result on this dashboard. In addition, some discrepancies were identified with some activity being attributed nil NWAU. This has now been corrected with the Ministry. The facilities are busy working on finalising coding for August to give the District a more accurate indication of activity vs performance.

Early analysis by the Performance Unit has identified that whilst we have experienced an increase in Acute Activity, a large volume of this has been in same day admissions. Typically, same day admissions will incur lower cost-weights / NWAU than overnight admissions. More detailed analysis is under way to understand the shift in activity at CRGH and RPA. The Performance Unit will continue to monitor and analyse the activity and NWAU and work with each facility to determine any changes to improve performance and also those issues to be escalated to Chief Executive / Director Finance.

Clinical Costing Update

The iFRACS process has now been completed for all facilities. The Performance unit would like to acknowledge the extensive work put into this process by all the facilities. As a last component to this body of work the facilities are reviewing their Teaching and Training costs to ensure that appropriate costs have been allocated to Teaching and Training.

As a result of the completion of the iFRACS we have been able to commence the reclass rules set in the General Ledger. The reclass rules ensure that the money is distributed to the areas where the activity is being delivered in accordance to what has been specified by the facilities in their iFRACS i.e. admitted, non-admitted, teaching, research etc.

The focus for the costing team has now shifted to ensure all activity data is ready for costing. To this end a series of reports flagging Health Information Exchange (HIE) data quality errors that affect costing have been sent to facilities for correction.

Preparation of feeder data for costing is also underway. Data from the following feeder systems will be used in the 2014/15 costing:

- Pathology – from Cerner PathNET
- Medical Imaging (radiology, PET & nuclear medicine) from GE PACS/RIS
- Pharmacy from iPharmacy
- Anaesthetic, Operating Room and Recovery data from SurgiNET & TMIS
- Prosthesis data from SurgiNET & TMIS
- Cardiac cath – from CRS and development of relative value units for costing
- Blood products

Clinical Coding

As of the 1 September 2015, Kiel Harvey has commenced as the SLHD Director of Health Information Improvement for a period of six months to undertake a review of coding services across the District. Workforce issues have a major impact on the District's coding performance and as such will be a major focus of the review. Additional issues, including coding completion, coding error audits, medical documentation, clinical engagement and management engagement will be included.

REVENUE ENHANCEMENT DEVELOPMENT COMMITTEE

Private Health Insurance Usage

For the month of August, SLHD had an improved 19.52% of patients using health insurance as a proportion of overall activity. This is increase compared to 19.04% in July.

Single Room Utilisation

In August, 25% of all single rooms were taken up by private patients and 39% of all private patients were accommodated in single rooms. This result was assisted by a small increase in patients isolated for clinical alert to 10.7%.

Revenue Enhancement Committee

Initial discussions with BUPA have commenced looking at mutual objectives and potential joint projects

Additional project manager has been engaged for the Concord Hospital Cath Lab initiative. Working group meetings continuing.

PERFORMANCE AND REDESIGN UNIT / REDESIGN AND SERVICE IMPROVEMENT

Innovations Group

The sixth round of The Pitch will be held at CRGH Medical Education Centre from 4-6pm Friday 6th November. Applications close 12th October.

Previous Pitch winning ideas are being implemented across the District. Speech Pathologists at RPA have commenced using their new nasendoscope to test patient's swallowing on the wards (August 2014 Pitch). The District's Fire Service Training Simulation Centre is due to open shortly (November 2014 Pitch). The Litegait treadmill with hoist was delivered to Balmain's rehabilitation gym recently and allied health staff have commenced training in use of the equipment (May 2015 Pitch).

Clinical Redesign

'Coordination of care – Ground East Concord's cancer centre' and 'Improving home-based dialysis in SLHD' project teams attending the third 2015 Centre for Healthcare Redesign (CHR) School are now in their diagnostic phase. Implementation of endorsed solutions will commence in 2016.

The 2015 CHR Project (first intake) 'Don't Restrict My Ability' is now in implementation phase. The ALOS for restricted weight bearing patients has already reduced by 7 days. All patients required to restrictive weight bear now attend reconditioning exercise classes with allied health staff to ensure strength is maintained throughout their recuperation phase, utilising a rehabilitation based model of care. A range of new communication tools to assist the exchange of information between patients, their families and their care teams have been introduced with great success. The restricted weight bearing patient experience of care on the acute orthopaedic unit will be reassessed in November to evaluate the effectiveness of changes.

The LINK project has commenced to improve the efficiency and capacity of the SLHD ACC&R Access Care Team (referral hub), with funding for the project lead provided by ACI. The Steering Committee composed of Chronic Care, Aged Care and Community Nursing staff from across primary and acute care will meet in early October to endorse the implementation Plan to ensure referrals are managed in an effective and timely manner. This will allow greater utilisation of the RACF triage and health coaching services which are shown to reduce ED presentations.

The Xtend project has commenced to improve the care and experience of Heart Failure patients post-discharge from RPA, with funding for a project lead provided by ACI. This project is a partnership between SLHD and Central Eastern Sydney Primary Health Network. Implementation of the model of care defined by this project will commence early in 2016.

Accelerated Implementation Methodology (AIM)

AIM training is scheduled for November 12th & 13th at CRGH. Three members of the Xtend project team will attend AIM training at ACI in late October.

HealthPathways Workgroups

Scoping and Planning activity continues for the following areas and services:

- TIA & Stroke Management
- Epilepsy and Balance Disorders
- Urology
- Paediatrics
- Andrology

Outside of the workgroup process the development of pathways for Refugee Health, Sexual Assault, Vulnerable Families and Healthy Homes and Neighbourhoods commenced continues and we are developing State wide pathways with Genetics NSW for Familial Cancer screening the first pathway for Ovarian and Breast cancers is nearing completion.

Pathways

To date the development of **437** clinical, requesting and information pathways has been initiated and presently we have:

Complete and accessible to GPs	277	Live to GPs (but being updated)	5
Localising (from other HP regions)	139	New Pathways being developed	16

Over twenty pathways were released in September which included new developments for Methamphetamine abuse, physical activity guidelines for General Practice. A suite of pathways for Shoulder injury and assessment was also published. Additional work was also undertaken to the five Hospitals in the Home Clinical pathways and service directory page ahead of the service expansion on October 12th 2015.

The release of pathways for Heart Failure and Lung Cancer missed the cut off period for this month's report and will be reflected in next month's report.

Usage of HealthPathways

Numbers of users was slightly down compared to the previous reporting period. This may be a reflection of the school holiday period or the previous months lower numbers of new pathways released.

Usage	August 2015	September 2015
Sessions	1,395	1,305
Different Users	459	416
Page Views	8,008	7,403
New Visitors	282 sessions (20.2%)	203 sessions (15.6%)
Returning Visitors	1,113 sessions (79.8.5%)	1,102 sessions (84.4%)

Promotion

GP Engagement

The program undertook seven GP practice visits in the latter part of September, on the return of the Project Officer from extended annual leave.

The Program Manager undertook a presentation on the Governance model initiated by the HealthPathways Sydney program via a state-wide webinar for the ACI as part of their Aged Care model.

FINANCIAL PERFORMANCE

GENERAL FUND

The 2015/16 Board and Ministry Service Level Agreement financial performance targets are based on an expected Net Cost of Service (NCoS). The following analysis reflects the results for the period ended 31 August 2015 based on the District's budgeted NCoS. For the first two months of the financial year Sydney Local Health District (SLHD) General Fund Expenditure was \$1.594M (0.63%) unfavourable to budget and Revenue was \$1.037M (0.41%) favourable to budget. The District's NCoS was \$0.577M unfavourable to budget.

The Chief Executive and the Director of Finance are confident that the District will have an on budget result for the 2015/16 financial year despite the challenges that are facing the District. The District has good controls in place and monitors performance on a daily basis.

The major variances for the month and year to date were:

Expenditure

- Total Expenditure was \$0.344M favourable to budget for the month of August 2015. This result for the month reflected favourable budget variances for Employee Related Expenses (\$0.153M) and Goods & Services (\$2.309M). These favourable results were offset by unfavourable results in VMO Expenses (\$1.239M).
- For the two months to the end of August 2015 Total Expenditure was \$1.594M (0.63%) unfavourable to budget, reflecting unfavourable variances in Annual Leave (\$2.810M), Superannuation (\$0.610M), VMO Expenses (\$1.222M) and RMR Expenses (\$0.671M). These unfavourable results were offset by favourable results for Salaries and Wages (\$1.828M), Overtime (\$0.225M) and Goods and Services (\$1.447M).
- Goods and Services Expenditure was \$2.309M favourable to budget for the month, principally related to G&S Clinical (\$1.842M) and G&S Administration (\$0.884M), offset by unfavourable variances in G&S Support (\$0.417M).
- Year to Date Goods and Services Expenditure is \$1.447M favourable to budget. The YTD favourable result reflects favourable variances in Medical & Surgical Supplies (\$1.056M), Prosthesis (\$0.395M) and Fuel, Light & Power (\$0.676M). These results were offset by unfavourable results for Drugs (\$1.519M) and Pathology Expenses (\$0.697M).

Revenue

- For August 2015 Total Revenue was \$0.692M unfavourable to budget. The result for the month reflects unfavourable budget results in all revenue categories except User Charges (\$1.635M).
- Year to date Total Revenue is \$1.037M favourable to budget. The YTD result reflects favourable variances in Grants and Contributions (\$1.208M) and User Charges (\$0.695M). Patient Fee revenue was \$0.549M unfavourable to budget at the end of August reflecting the impact of the growth in the revenue target for this financial year.

SPECIAL PURPOSE AND TRUST (SP&T)

SP&T NCoS was \$0.152M favourable to budget for the month of August 2015. This reflects favourable budget variances for Expenditure of \$0.081M and Revenue of \$0.071M. Year to Date SP&T NCoS was \$0.472M unfavourable to budget; Revenue was \$0.532M unfavourable and Expenditure \$0.060M favourable.

CONSOLIDATED RESULT

The consolidated year to date NCoS result for August 2015 for the General Fund and SP&T was \$1.029M unfavourable to budget. The result comprises an unfavourable variance in Expenditure of \$1.534M and a favourable budget variance for Revenue of \$0.505M.

FINANCIAL PERFORMANCE *(based on Ministry of Health Reporting Format)*

For the period ended 31 August 2015, SLHD recorded a Total Net Result of \$4.928M which was \$0.986M unfavourable to budget. The Net Direct Operating Result as at 31 August 2015 (GF and SP&T) was \$0.189M unfavourable to budget. The YTD result reflects higher than budgeted expenditure (\$0.646M unfavourable) offset by favourable revenue variances of \$0.457M.

YTD Total Direct Revenue is \$0.457M favourable to budget, comprising \$0.947M favourable for the General Fund and an unfavourable variance of \$0.490M for Special Purpose & Trust funds. The GF result reflects favourable variances in all revenue categories except Patient Fees and Other Income.

Total Direct Expenditure is \$0.646M unfavourable to budget for the year, comprising \$0.933M unfavourable for the General Fund and a favourable variance of \$0.287M for Special Purpose & Trust funds. The GF result reflects favourable variances in Salaries & Wages (\$1.828M), G&S – Clinical (\$1.248M) and G&S – Support (\$0.684M). These results were offset by unfavourable results for Salaries & Wages Oncosts (\$3.171M) and G&S – Administration (\$0.485M).

Liquidity

The District had nil creditors over 45 days as at 31 August 2015.

The District achieved the target of 100% compliance with the NSW Government target for payment of small vendor creditors within 30 days for the month of August 2015.

The cash balance at 31 August 2015 for the Operating bank account was \$6.019M, SLHD \$6.019M and repointing of HRTO-SSW \$0. The Operating Cash book balance was \$5.980M, comprised of SLHD \$5.980M and repointing of HRTO-SSW \$0.

Capital Works – CAPDOHRS PROJECTS

The District's Full Year Capital works budget as at August 2015 is \$5.488M comprising \$2.000M of MoH funded and \$3.488M of locally funded projects. Actual expenditure as at the end of August 2015 funded by MoH was \$0.025M which is \$0.075M below the projected expenditure. There was no expenditure on the locally funded project.

PERFORMANCE

The District continues to be at Performance Level 0.

Activity

In August 2015 FYTD total number of separations increased across the District by 2.5% compared to August 2014 FYTD. For the same period acute separations are up 2.48% compared to the last year.

The District occupancy rate for August 2015 was -2.32% compared to the same month last year. Canterbury Hospital's occupancy rate for August 2015 increased by 10.73%.

The overnight average length of stay (ALOS) for August 2015 FYTD was 6.43 days, unchanged compared to the same period last year.

NEAT

The NEAT performance for the District improved by 0.17% in August 2015 FYTD compared to August 2014 FYTD to 65.73%. Concord Hospital admitted, referred or discharged 6.00% more patients within 4 hours of presentation for August 2015 compared to the same period the year before.

ED Triage

Canterbury Hospital achieved all emergency department triage categories for August 2015. RPA met triage category targets 1, 4 and 5 in August 2015. RPA performance in triage category 3 improved on the previous FYTD result, increasing by 8.69%. Concord met triage targets 1, 2, 4 and 5 in August 2015.

Elective Surgery

SLHD continues to perform at the top of the state for patient treatment timeframe targets for elective surgery. Performance is at 100% for August 2015 FYTD for all categories.

Transfer of Care

SLHD transfer of care increased by 4.81% August 2015. Concord and RPA both improved significant, increasing by 3.23% and 9.05% respectively. On the 17th August, the Nursing Transfer of Care pilot in partnership with NSW Ambulance commenced at RPA and subsequently at Concord and Canterbury Hospital. Early results have been impressive. In the first week of the pilot over 200 hours of paramedic time was returned to the road. Transfer of Care results have increased to between 90 and 100 percent. A formal evaluation will be undertaken.

Quality and Safety

In terms of quality and safety measures, the District continues to achieve root cause analysis and complaints management targets for August 2015.

SLHD met the target for Staphylococcus Aureas Bloodstream (SABSI) infections for July 2015 YTD. There were no Central Line Associated Bloodstream (CLAB) infections in July 2015.

There were no incorrect procedures in SLHD operating theatres in August 2015.

Workforce

Compared to July 2015, the August 2015 total FTE slightly decreased, however the FYTD average increased by 1.6%. The August 2015 FYTD overtime usage decreased by 0.6% compared to the previous year.

Premium staff usage for Medical and Nursing decreased compared to the same period last year by -1.4% and -3.6% respectively. Allied Health premium staff usage increased by 0.4% in August 2015 compared to the same period last year.

August YTD 2015 sick leave is above the 50 hour/FTE target by 1.3 hours/FTE.

CAPITAL WORKS

Concord Translational Research Facility

Significant amounts of sub soil asbestos found. Removal of venomous material completed. Demolition will complete in October.

RPAH Stonework repair main facade

Work continues to the stone facade at RPAH. Work is a funding partnership with the NSW Public Works Centenary Stone Program. Public Works have identified additional works that are required to complete the project. Public Works will provide a cost plan for consideration which will include another 50/50 cost sharing arrangement.

RPA Institute of Academic Surgery & RPA Transplant Institute

Internal works underway.

Project is partially funded through philanthropic donation.

Health Infrastructure is yet to confirm allocation of funds from the state government Capital Research Program.

SLHD Aged Care Network

This project is cash flowed by the Ministry over 3 years and over 3 sites: Canterbury, Concord & Balmain. Each project has been tailored to meet the cash flow demand.

Work on the refurbishment of Telopea ward at Canterbury has commenced.

Detailed design for the Balmain component will commence in October. Project Manager has been appointed.

Medical Imaging Equipment Purchases

Business cases for the purchase of the following have been submitted to the Ministry for approval:

- CT scanners x 2 RPAH
- Angiography Suites x 3 RPAH (one bi-plane suite and the refurbishment of the two current suites)
- SPECT CT Scanner CRGH

Approval to procure these items has just been received from the Ministry of Health.

RPAH Radiology

Design for new angiography suite completed & signed off. Cost estimates for the building work will be sourced through Engineering Services. Design meetings for the remainder of the department will continue

Tresillian Services

SLHD is currently assisting Tresillian to develop a business case for construction of a new unit to replace the Willoughby Service. The infrastructure at Willoughby has reached the end of its useful life for this service.

Business Case will complete in October for submission to the Ministry

PLANNING

A detailed planning update will be provided in the November Chief Executive's Report.

In summary work continues in relation urban development and renewal projects. A seminar was held at the Charles Perkins Centre to hear from planning experts on the relationship between planning and healthy communities.

The Neuroscience Think Tank was held on 15th September. It was a highly successful and well attended seminar. It was followed by a cocktail event with clinicians, business sector and consumers. An action plan will be developed based on the agreed objectives that emerged from the seminar.

YARALLA ESTATE COMMUNITY ADVISORY COMMITTEE (YECAC)

The third annual Yaralla Open Day was held on Sunday the 13 September. The open day was the biggest and best to date with more than 1,000 people enjoying the sunshine, fun activities and the beautiful grounds of the historic estate.

Some of our youngest attendees enjoyed a range of attractions including the petting zoo, jumping castle, fire truck, sports clinics and dog competition, which were judged by Health Minister Jillian Skinner. Other highlights included performances from The Cockroaches and The Army Band, as well as styling workshops provided by James Treble from Channel Ten's 'The Living Room'. Design students from Lidcombe TAFE also exhibited some fantastic concepts for temporary structures that could be used on the estate for community activities.

The day would not have been possible without the tireless effort from our dedicated staff and generous partner organisations including Soldier On, Harris Farm Markets, Netball NSW, NRL, the GWS Giants, Fire and Rescue NSW, Maera Dog Training the CSP Athlete Factory and Concord Rotary Club. The Open Day will continue to be held as an annual event in September.

The September Yaralla Estate Community Advisory Committee meeting was unfortunately cancelled due to some late apologies and no quorum.

Submissions for the community garden have been sent to the NSW Office of Environment and Heritage and we await their feedback. A Memorandum of Understanding has also been drafted for review by SLHD and Inner West Neighbour Aid.

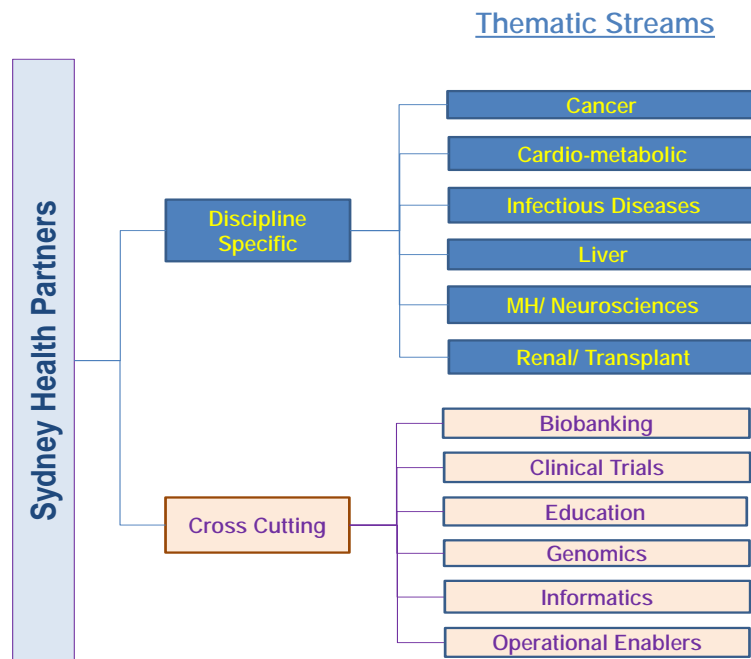
SYDNEY RESEARCH

Sydney Health Partners

The NHMRC plans to hold a workshop, by end of year with the four Australian, Advanced Health Research & Translation Centres (AHRTC). Workshop objectives are to showcase achievements, share ideas on how to make the greatest possible contribution to healthcare and to present translational projects. Funding opportunities are also being explored by the NHMRC to support projects that demonstrate the translation of evidence into improvements to healthcare. Dr Teresa Anderson and members of the SHP Governing Council will be attending the workshop (to be held in Canberra).

Projects groups from the 12 thematic streams (diagram below) have been meeting to formulate plans including five year objectives, leads and representative groups, activities, milestones and metrics.

Sydney Health Partners Advanced Health Research and Translation Centre



To date, thematic streams include an average of three projects each, totalling 36 (12 x3) projects over a five year horizon. Numerous members of Sydney Research are involved in and or leading projects groups including,


- Prof Tim Lambert, Mental Health, Living Well project.
- Prof Matthew Kiernan and Prof Craig Anderson, Neurosciences projects.
- Prof Warwick Britton, Infectious Diseases projects.
- Prof Vlado Perkovic, Clinical Trials project.
- A/Prof Judith Trotman, Cancer projects.
- Prof Leonard Kritharides & Prof Stephen Twigg, Cardiometabolic projects.
- Prof Geoff McCaughan, Liver projects.
- Prof Steven Chadban, Renal projects.
- RPA and Concord Research Governance Offices, Operational Enabler projects.
- Prof Garth Nicholson & A/Prof Marina Kennerson, Genomics projects.
- Ms Mira Haramis, Education projects.

Office of Health & Medical Research

The 2015 NSW Hubs Forum was held on Tuesday 22 September 2015. Dr Anderson presented at the Forum and Sydney Research members participated in working groups. The OHMR plans to make available Health Service Research funding under a collaborative research grants scheme. Emphasis will be placed on community engagement/consultation, partnerships and translational research outcomes.

Sydney Research Facility

In consultation with members a rework of the facility proposal is being progressed. This includes biobanking growth needs (CTC and Woolcock Lung Cancer Centre) and scoping of public/private partnership opportunities.



Dr Teresa Anderson
Chief Executive

29.11.15