SECTION 6

NSW HEALTH ORGANISATIONS
Key achievements 2018-19

- Launched the Milk Bank in December 2018, to provide pasteurised donor human milk to vulnerable infants in neonatal intensive care units.
- Increased distribution of influenza vaccines doses from 2.2 million in 2017-18 to 2.4 million doses in 2018-19.
- Invested $38 million in overweight and obesity prevention.
- Provided 27,000 occasions where patients received acute care in a Hospital in the Home service rather than having to stay in a hospital bed.
- Invested an additional $2 million to further improve access to elective surgery services in NSW. Around 97.1 per cent of patients had elective surgery in their clinically recommended timeframe.
- Employed more than 2500 new graduate nurses and midwives.
- Grew the NSW Health Aboriginal Workforce to 2.75 per cent, exceeding the minimum target of 2.6 per cent.
- Delivered 26 infrastructure projects across NSW on time and on budget.
- Invested more than $13.5 million on tobacco control initiatives and developed the NSW Health Tobacco Strategy Work Plan 2019-2021 to guide efforts to tackle smoking as a leading cause of disease and premature death.
- Committed $225.3 million to minimise harm from alcohol and other drug use by delivering comprehensive education, intervention, treatment, rehabilitation and continuing care programs through NSW Health services, non-government organisations and Aboriginal community controlled health services.
- Launched the Strategic Framework for Suicide Prevention in NSW 2018-2023. The Framework was developed by the NSW Mental Health Commission and the NSW Ministry of Health in collaboration with people with lived experience of a suicide attempt or bereaved by suicide, communities concerned about suicide, government agencies, clinicians, service providers and experts in suicide prevention, and starts the journey towards zero suicides in NSW.
- Referred more than 500 women to the expanded Substance Use in Pregnancy and Parenting Services.
- Scaled up the Hepatitis in Prisons Elimination Program and achieved virtual elimination of hepatitis C in 12 correctional facilities.
- Completed Housing for Health in 23 Aboriginal communities to improve safety and reduce infections.
- Committed $67.2 million over five years to implement key recommendations from the Royal Commission into Institutional Responses to Child Sexual Abuse.
- Released the Integrated Prevention and Response to Violence, Abuse and Neglect Framework.
- Committed $12.05 million over four years for the recruitment of more than 1250 NSW patients to the Australian Genomic Cancer Medicine Program and established six PhD Scholarships for related postgraduate research opportunities.
- Completed implementation of Electronic Medication Management (eMeds) at 84 sites, with an additional 12 sites going live with the Electronic Medical Record (eMR).
- Supported implementation of Leading Better Value Care initiatives in more than 100 health facilities to help accelerate NSW Health’s move to value based healthcare.
- Continued deployment of the Electronic Record for Intensive Care (eRIC) to support the delivery of improved safety and better clinical decision-making for critically ill patients in intensive care units.
- Exceeded the 40 per cent target by rolling out My Food Choice – a more personalised way of serving patient meals – to 42 per cent of beds statewide, an increase from 33 per cent at the end of 2017-18.
- Implemented the Emergency Department Patient Experience initiative in the emergency departments at Liverpool, Lismore, Blacktown and Nepean hospitals to help patients, carers and their families feel more welcome, safe, cared-for and empowered. The mid-point pilot evaluation showed, on average, a 30 per cent improvement in patient satisfaction across all four hospitals.
- Commenced planning for a system-level strategy for patient and carer experience that will build on existing work and initiatives on patient experience, patient-centred care, value-based care, patient-reported measures, culture and leadership, and eHealth initiatives.
Agency for Clinical Innovation (ACI) as Chief Executive in June 2017. He brings experience in clinical practice in refugee health and tropical medicine, in clinical governance and in academic research to the ACI.

Dr Levesque is a member of the Strategic Analytic Advisory Committee of the Canadian Institute of Health Information and a Fellow of the Royal College of Physicians of Canada in Preventive Medicine and Public Health. He holds a Doctorate in Public Health, a Masters in Community Health and a medical degree from the Université de Montréal, Canada. He is a Conjoint Professor at the Centre for Primary Health Care and Equity of the University of New South Wales.

Year in review

The Agency for Clinical Innovation (ACI) leads innovation in clinical care across NSW. We do this by bringing clinicians, patients and healthcare managers together to support innovation, design and implementation.

This year our 39 networks, institutes and taskforces worked closely with senior clinicians to deliver new models of care, clinical guides, resources and tools that support the delivery of improved healthcare. Our teams partnered with local hospital teams to pilot and scale programs addressing system priorities including intensive care unit access block, implementing the patient reported measures program across the state, and supporting Leading Better Value Care initiatives.

Leading Better Value Care continued to be a key priority for the ACI as we supported more than 40 hospitals and facilities to implement programs under nine initiatives, across two tranches. We hosted workshops, forums and webinars for thousands of clinicians to support capability and knowledge sharing for facilities across NSW.

The Unwarranted Clinical Variation Taskforce was reconvened during the year to bring clinical leaders, senior managers and policy makers together to inform the reduction of unwarranted clinical variation. The taskforce has focused on a range of clinical areas such as stroke, hysterectomy and hip fracture and broader themes such as organisational culture.

The ACI, with the Clinical Excellence Commission (CEC), commenced a program of visits to local health districts and specialty health networks across the state. These visits included presenting to boards and staff in each region, sharing ideas and building on how the ACI and CEC work together to improve how care is delivered in NSW.

A significant milestone during the year was publishing the ACI’s Strategic Plan for 2019-22, which articulates our vision for the future of healthcare and healthier futures for the people of NSW. We used an innovative approach to gathering evidence to inform the development of the plan, including interviewing organisations from around the world, creating a logic model with staff and consulting widely within the NSW health system to refine our strategic directions. The plan outlines how we will work with patients and clinicians to provide innovations that are evidence based, clinically led, person centred and value driven.

To enable this work, the ACI established an evidence generation and dissemination unit to provide increased support to ACI’s clinical networks, synthesising available evidence to inform the development of new innovations.

The ACI’s success is built on the dedication and professionalism of its staff. This year we changed our environment to embrace flexible, activity-based working to support our transformative work. The ACI team has responded positively and I would like to acknowledge their significant contribution throughout the year.

738 members from NSW Health joined the newly launched Telehealth Capability Interest Group to share innovative telehealth models of care
Key achievements 2018-19

- Developed and implemented nine Leading Better Value Care initiatives, across two tranches, in over 40 NSW public hospitals and facilities, including hosting a series of webinars, forums and workshops reaching thousands of clinicians to support capability, skill building and knowledge sharing.
- Eight additional hospitals joined the National Surgical Quality Improvement Program, taking the total number participating in the program to 16 hospitals. Four hospitals have now rolled out a site-specific quality improvement program.
- Launched the Intensive Care Unit Exit Block Project, a whole of hospital approach to optimising intensive care capacity across 14 hospitals in NSW.
- Convened research showcase and research marketplace events that brought together consumers, clinicians, executives and academics to present research projects and outcomes from ACI research grants, and discuss shared interests across research, clinical and discipline fields. Both events forged new working relationships for future research projects.
- Created an interactive Consumer Enablement Guide for Clinicians to provide information, tools and resources to help consumers, carers and communities manage their own health and wellbeing.
- Initiated a Telehealth Community of Practice, providing NSW Health staff with a monthly forum to share innovative telehealth models of care among its 735 members.
- Launched the Social Determinants of Health resource at an event hosted by The Benevolent Society, with keynote speaker Sir Michael Marmot. The resource recognises the influence of social and economic factors as drivers of health and effective healthcare.
- Launched the inaugural Innovation as Usual series. This annual seminar will cover innovative topics, foster discussions and be a platform for health innovators to share their views and opinions. The first event featured Professor Ian Scott, who questioned whether innovation in healthcare can become the norm for clinicians.

BUREAU OF HEALTH INFORMATION

67 Albert Avenue
Chatswood 2067
Telephone: 9464 4444
Facsimile: 9464 4445
Email: BHI-enq@health.nsw.gov.au
Website: www.bhi.nsw.gov.au
Business hours: 9am-5pm, Monday to Friday

Chief Executive: Dr Diane Watson

Bureau of Health Information (BHI) Chief Executive, Dr Diane Watson, has led the establishment of three reporting agencies in Australia that use big data to drive decisions on healthcare provision nationally and locally. Over the past 20 years, Dr Watson has held senior management positions measuring, monitoring and reporting on the performance of healthcare systems to drive improvements in health, care and productivity. Prior to joining the BHI, Dr Watson was the inaugural Chief Executive Officer of the Victorian Agency for Health Information. She was also the inaugural Chief Executive of the National Health Performance Authority.

Year in review

The Bureau of Health Information (BHI) set the course for the next four years in 2018-19 by launching its new Strategic Plan 2019-2022, which coincided with its 10th year as an independent and trusted provider of healthcare performance information. Developed with extensive input from stakeholders, the plan will guide BHI’s work to enhance the provision of timely, accurate and comparable information so as to maximise its impact on behalf of NSW patients and communities, and provide enhanced value to the NSW health system.

BHI’s reports cover a wide range of topics, including emergency department and elective surgical procedure waiting times and patients’ experiences in a variety of healthcare settings. In 2018-19, BHI published 14 reports and associated information releases on healthcare performance. BHI also works closely with those in the healthcare system to ensure that its reporting can be used to inform improvement efforts.

BHI further enhanced the value of its Healthcare Quarterly report series, which tracks activity and performance across public hospital and ambulance services in NSW, strengthening accountability by making these results available to the community.
In relation to ambulance performance, the January to March 2019 issue of Healthcare Quarterly included, for the first time, measures for 91 local areas in NSW rather than the 18 ambulance zones previously reported on. In conjunction with this update, BHI introduced a new interactive online ambulance performance tool summarising key response times, enabling easy access to more localised and meaningful ambulance performance information.

BHI’s Healthcare in Focus report examined healthcare performance in NSW for more than 60 measures, with one-third of those measures dedicated to enhancing understanding about healthcare and opportunities to improve health outcomes for Aboriginal people. The decision to use this prominent report to focus on a strategic priority has been developed further during 2018-19 and the next edition of Healthcare in Focus will examine people’s use and experiences of mental health care in NSW.

BHI continued to manage and expand the NSW Patient Survey Program to help ensure patients’ voices drive health system improvements, publishing several Snapshot reports on patients’ experiences of care, along with detailed results for individual hospitals.

In 2018-19, BHI asked almost 300,000 patients about their time in the NSW health system. Surveys were sent to patients admitted to NSW public hospitals; emergency department patients of rural, regional and metropolitan hospitals; maternity patients; patients attending outpatient cancer clinics; and for the first time, to people with longstanding health conditions and those with select, high-priority medical conditions, which will support NSW Health’s work to improve these patients’ care.

BHI also launched the NSW Patient Survey Program Strategy 2019-2022 to ensure the program develops in ways that maximise its unique value to the NSW health system for the benefit of health consumers. Priorities include:

- maintaining the robust and representative nature of surveys
- more timely data collection and reporting
- making survey results more useful in informing system improvement.

BHI will continue to provide the community, health professionals and policy makers with information that enhances healthcare system performance transparency in NSW, informing actions to improve the safety and quality of healthcare, and strengthening accountability in line with our Strategic Plan 2019-2022 and NSW Health strategic priorities. BHI is proud to have reached an employee engagement index of 73 per cent in the People Matter Employee Survey, one of the highest in NSW Health, and we thank our staff for their continued efforts providing independent reports and information about the performance of the health system.

**BHI surveyed almost 300,000 patients on their experiences and outcomes of care**

**Key achievements 2018-19**

- Analysed feedback from almost 300,000 patients through the NSW Patient Survey Program.
- Released robust and representative patient survey results at NSW, local health district and hospital level, covering inpatient care for adults, children and young people, emergency departments, maternity care and outpatient cancer clinics.
- Designed and introduced a new survey of people with longstanding health conditions, and provided additional patient survey data for 10 high-priority clinical cohorts for the Leading Better Value Care program.
- Initiated a joint program with the Centre for Aboriginal Health to enhance information on Aboriginal patients’ experiences and outcomes of care.
- Developed improved key performance indicators for emergency department patient experience, now adopted in local health district service agreements.
- Published four Healthcare Quarterly reports featuring detailed information for the public about activity and performance in NSW public hospitals and for ambulance services.
- Released a new interactive ambulance performance tool giving people easy and intuitive access to key ambulance response times by 91 local statistical areas.
- Examined healthcare performance in NSW in the Healthcare in Focus report, including national, international and local comparisons. One-third of 60 measures in total related to the experiences and outcomes of Aboriginal people.
- Launched a new Strategic Plan and a strategy for the NSW Patient Survey Program, each for the 2019-22 period, setting out plans to maximise BHI’s impact on behalf of NSW patients and communities and enhance its value to the NSW health system.
- Achieved an employee engagement index of 73 per cent, one of the highest in NSW Health, as measured through the People Matter Employee Survey.
Year in review

Cancer Institute NSW

Level 9, 8 Central Ave
Australian Technology Park
Eveleigh NSW 2015
PO Box 41
Alexandria NSW 1435
Telephone: 8374 5600
Facsimile: 8374 3600
Email: information@cancer.nsw.gov.au
Website: cancer.nsw.gov.au
Business hours: 9am-5pm, Monday to Friday

Chief Executive Officer: Professor David Currow
FAHMS

Professor David Currow FAHMS is the Chief Cancer Officer of NSW and Chief Executive Officer of the Cancer Institute NSW.

Prior to his appointment in March 2010, Professor Currow was the foundation Chief Executive Officer of Cancer Australia.

Professor Currow is a Fellow of the Australian Academy of Health and Medical Sciences, the previous president of the Clinical Oncological Society of Australia and past president of Palliative Care Australia. He has also:

• served on the American Society of Clinical Oncology working party on palliative care education
• chaired the working party for the Union of International Cancer Control on Palliative Care for the United Nations summit on non-communicable diseases
• been a faculty member of the Australia and Asia Pacific Clinical Oncology Research Development workshops.

Year in review

Cancer continues to be a leading cause of premature death and illness in NSW, which has a significant impact on the community. Reducing the incidence of cancer, while ensuring the best quality care and outcomes for those who do experience the disease, are key priorities for the Cancer Institute NSW.

The Cancer Institute NSW provides the strategic direction for cancer control across the state, which is driven by the goals of the NSW Cancer Plan:

• Goal 1: Reduce the incidence of cancer
• Goal 2: Increase the survival of people with cancer
• Goal 3: Improve the quality of life of people with cancer

The Institute continues to collaborate with the health system, researchers and the community to develop and implement initiatives across the spectrum of cancer control – from cancer prevention and early detection, to optimising cancer treatment and care, and facilitating research in all of these areas.

Although the burden of cancer is shared by all, some groups are more affected by cancer than others, including Aboriginal people, people from culturally and linguistically diverse backgrounds, and people from rural and remote areas and lower socioeconomic backgrounds.

The Institute continues to focus on improving outcomes for these communities and ensuring that all people diagnosed with cancer across NSW receive the right treatment, in the right place, at the right time.

We are working across the health system to support cancer clinics within local health districts to embed smoking cessation brief intervention into routine care.

Importantly, we are taking a patient-centred approach, launching a Patient Information website this year (patients.cancer.nsw.gov.au). The site provides information to help people affected by cancer talk to their cancer care team, understand their options, and make informed decisions about their treatment and care.

As the state’s cancer control agency, we delivered the eighth round of Reporting for Better Cancer Outcomes, providing local and statewide cancer data and information to all local health districts, primary health networks and participating private hospitals to inform health system performance and areas for improvement. In 2018, the program reported on 67 key performance indicators across cancer control, including nine patient-reported measures. This is three times the number of indicators reported in 2015. Each year, we are providing a more comprehensive view of cancer control in NSW.

Additionally, the Institute continued to increase knowledge and research capacity across the state by awarding 21 new cancer research fellowships this year.

While there is still much to do, the chances of NSW citizens surviving cancer are among the highest in the world as we continue to lessen the impact of cancer across the state. Thank you to our staff for their commitment to reducing the burden of cancer in NSW.

The Reporting for Better Cancer Outcomes Program reported on 67 key performance indicators in 2018 (three times the number in 2015), providing a more comprehensive picture of cancer control in NSW.
Key achievements 2018-19

• Delivered a comprehensive anti-tobacco campaign program, including targeted approaches for Aboriginal, and culturally and linguistically diverse groups. Results indicated that 26.6 per cent of smokers in the target audience (18- to 54-year-olds) expressed an intention to quit in the next 30 days.

• Launched the Smoking Cessation in Cancer Services project, to embed smoking cessation brief interventions within local health district clinical cancer settings. We delivered workshops in three local health districts to agree on local governance for local adoption of the NSW Smoking Cessation Framework.

• Rolled out electronic distribution of BreastScreen NSW results to the majority of general practices in NSW to facilitate more timely, secure and reliable communication of results.

• Developed and implemented multilingual educational resources about bowel and breast screening, through consultation and collaboration with local multicultural health and community organisations.

• Established the Cervical Screening Aboriginal Workforce Network to increase engagement with Aboriginal communities and healthcare providers.

• Increased eviQ Cancer Treatments Online (eviQ.org.au) users to 50,000 per month, a 100 per cent increase since the new eviQ website launched in August 2017. International users now account for 28 per cent of all users, representing a 400 per cent increase in two years.

• Launched the Patient Information website (patients.cancer.nsw.gov.au) for people affected by cancer, featuring general cancer information and content about 16 specific cancer types.

• Delivered the eighth round of annual reporting for Reporting for Better Cancer Outcomes, providing local and statewide cancer data and information to all local health districts, primary health networks and participating private hospitals to inform health system performance and areas for improvement. In 2018, the program reported on 67 key performance indicators across cancer control, which is three times the number of indicators reported in 2015.

• Increased knowledge and research capacity by awarding 21 new cancer research fellowships. Eleven fellowships were completed and 63 are ongoing.

• Continued to fund seven translational cancer research centres, bringing together 1081 members (clinicians and researchers) across 86 institutions.
The CEC continued to develop the Quality Data Improvement System, which gained wider use and recognition across NSW. The System is a digital analysis platform for clinical teams, facilities and local health districts to support local quality improvement work. Users gave positive feedback on its value and contributed to further enhancements and functionality.

The CEC’s Quality Improvement Academy continued to develop and offer a range of multimedia resources, programs and commissioned learning events in improvement science. Building individual and team capability to lead and support improvement work on the frontline is the cornerstone of the Academy’s partnership with local health districts and specialist health networks.

The CEC continues its commitment to working with local health districts to create and sustain a positive safety culture across the NSW health system. We thank our staff for their support in delivering this important priority.

Commencement of the NSW Mental Health Patient Safety Program, in partnership with local health districts and specialist health networks, has brought together consumers, clinicians and managers to improve the experience of care for our consumers and their families in mental health.

**Key achievements 2018-19**

- Issued 21 safety alert broadcasts and four medication shortage communications. Risk assessed 670 medical devices, of which 17 were identified as high risk and two as extreme risk, requiring a system level response led by the CEC.
- Increased use of the Quality Data Improvement System to over 5000 clinicians and managers in NSW Health.
- Continued to build the NSW Health workforce patient safety and quality improvement capabilities through the Quality Improvement Academy, training 693 improvement coaches with 417 taking part in safety system skills training.
- Commenced participation in the Stillbirth Safer Baby Program, a national collaboration to reduce preventable stillbirth from 28 weeks gestation by 20 per cent by 2023.
- Commenced the NSW Mental Health Patient Safety Program in partnership with local health districts and specialty health networks, to improve quality and safety of mental health care in NSW. Fifty-eight coaches have been trained to support local teams.
- Released the NSW Health Literacy Framework, a guide for frontline staff, leaders and managers to improve the health literacy of patients, families and carers and create organisations with a greater level of health literacy.
- Continued development of resources and strategies to reduce hospital-acquired complications, with information on prevalence now provided by the Quality Data Improvement System. Consultation has commenced with senior clinicians to prioritise high-risk targets.
- Developed a new preliminary risk assessment in consultation with clinical leaders and directors of clinical governance, which is being piloted in two local health districts.
- Continued work with eHealth NSW to deliver a contemporary, intuitive and secure cloud-based incident management system for NSW Health staff. The pilot will commence in 2019 in two local health districts, followed by implementation across NSW Health in 2020.
- Released Between the Flags electronic observation charts (version four) in collaboration with eHealth, including the antenatal short stay observation chart, the standard maternity observation chart and the standard newborn observation chart.

---

**HEALTH EDUCATION AND TRAINING INSTITUTE**

Building 12, Gladesville Hospital
Shea Close
Gladesville NSW 2111
Locked Bag 5022
Gladesville NSW 1675
Telephone: 9844 6551
Facsimile: 9844 6544
Email: heti-info@health.nsw.gov.au
Website: www.heti.nsw.gov.au and www.heti.edu.au
Business hours: 8:30am-5pm, Monday to Friday

**Chief Executive: Adjunct Professor Annette Solman**

Adjunct Professor Annette Solman is the Chief Executive of the Health and Education Training Institute (HETI). She has significant experience in health management, change management, leadership capability development, strategic planning, research, policy development, clinical practice development, facilitation, coaching, project management, education and workforce development, to meet the needs of a contemporary healthcare system.

Professor Solman has an active interest in person-centred care practices and their application to the clinical practice setting and in leadership development to provide a person-centred approach to healthcare. She is also interested in aligning a workplace culture of effectiveness to that of a high-achieving professionally competent learning workforce, and strengthening relationships between HETI and our health and academic partners.
Year in review

Life-long learning, quality and access, and people and systems were the three areas of focus for the Health Education and Training Institute (HETI) during 2018-19. This year, HETI released its 2020 Strategic Plan, which seeks to bring these focus areas to life through the delivery of high-quality, evidence-based education and training to the NSW Health workforce.

Innovation and technology remained at the centre of HETI’s work with 378 new digital resources added to My Health Learning. These included interactive videos, gamification, podcasts and the new cinematic-style video Promoting Inclusive Healthcare for lesbian, gay, bisexual and transsexual people, which was awarded a Gold LearnX Impact award, recognising innovative workforce learning.

HETI continued to contribute to the health outcomes of Aboriginal people through the Aboriginal Trainee Doctors Forum, Aboriginal Medical Workforce Recruitment Pathway and the Jumbunna webcast series. The year also featured the:

- launch of Health for Older Aboriginal People, developed with Aboriginal healthcare workers, elders and consumers
- inaugural Aboriginal Allied Health Forum, which attracted 36 Aboriginal allied health professionals from nine local health districts
- First Connections Forum, attended by more than 100 NSW Health staff who work with Aboriginal mothers, families and communities. The virtual format enabled staff statewide to connect and share ideas, knowledge and experiences.

Regional and rural NSW received 32 new trainees embarking on careers in rural general practice with advanced skills through HETI’s Rural Generalist Medical Training program; and 1026 first-year doctors were placed into 64 hospitals across the state.

Junior Medical Officer education and wellbeing underpinned HETI’s Prevocational Conference attended by nearly 200 staff, shared ideas and innovations, and strengthened networks. This year marked 30 years since the original Postgraduate Medical Council in NSW was formed, the first of its kind in Australia.

Recognising the importance of leadership and inter-professional collaboration to excellence in patient care, HETI provided leadership and management training to 7515 staff and delivered Inter-Professional Family Conferencing training to 266 staff.

HETI launched the NSW Health Finance Executive Development program, to build the leadership and strategic skills required to support a complex healthcare environment. Support for further studies also expanded with the NSW Health Registered Training Organisation becoming an accredited VET Student Loan Provider, and HETI Higher Education now offering FEE-HELP.

This snapshot of achievements highlights another successful year for HETI in promoting and supporting a connected learning community with NSW Health. We thank our staff for their passion and commitment to furthering training and education opportunities for health system staff.

Key achievements 2018-19

- Delivered 378 new digital education resources.
- Awarded the Gold LearnX Impact award for promoting inclusive healthcare for lesbian, gay, bisexual and transsexual people in the Best People and Culture Strategy - Diversity/Inclusion category.
- Coordinated employment of 1026 first-year doctors in 64 NSW hospitals.
- Supported commencement of 32 doctors in the Rural Generalist Training Program.
- Delivered Gatekeeper (a suicide prevention program) to 815 participants face-to-face across NSW. A further 1088 staff have completed the online Gatekeeper training.
- Launched the Finance Executive Development program pilot.
- Trained 7515 NSW Health staff within HETI’s Leadership and Management programs.
- Delivered Inter-Professional Family Conferencing program to 266 staff face-to-face across 15 local health districts and specialty health networks.
- Achieved vocational education and training student loan provider accreditation as a NSW Health Registered Training Organisation, granting access to Centrelink benefits to Diploma of Nursing students. Health Education and Training Institute Higher Education is now a Higher Education FEE-HELP loan provider.
- Distributed 152 Allied Health Workplace Learning Grants to allied health teams across 18 local health districts and specialty health networks.
SPECIALTY HEALTH NETWORKS

JUSTICE HEALTH AND FORENSIC MENTAL HEALTH NETWORK

1300 Anzac Parade
Malabar NSW 2036
PO Box 150
Matraville NSW 2036
Telephone: 9700 3000
Facsimile: 9700 3744
Email: JHFMHN-Admin@health.nsw.gov.au
Website: www.justicehealth.nsw.gov.au
Business hours: 8am-5pm, Monday to Friday

Chief Executive: Gary Forrest

Gary Forrest has worked in nursing for more than 30 years. He completed his general nursing training at Rockhampton Base Hospital in Queensland, a Bachelor of Science (Nursing) at Flinders University and a Master of Applied Management (Health) with distinction, at the University of Newcastle.

Mr Forrest joined the Network in 2002, working in nursing, population health and prison hospital management before becoming the Chief Executive in June 2016.

Year in review

Justice Health and Forensic Mental Health Network delivers healthcare to those in contact with the NSW criminal justice and forensic mental health systems across community, inpatient and custodial settings.

During 2018-19, the Network successfully managed the increase in demand, finishing the year (excluding high-cost drugs) $1.1 million, or 0.4 per cent, over budget for expenditure and $0.1 million, or 0.1 per cent, favourable for own source revenue.

The Network continued to manage service demands, which grew at a higher rate than budget increases, through efficiencies and initiatives including expanded telehealth capacity and changing models of care, which resulted in a reduction in average waiting list time of more than 20 per cent.

Continued development of the GP telehealth clinics model of care provided efficient healthcare to inmates in correctional centres across the state. Between 2017 and 2018, there was a 335 per cent increase in the number of GP telehealth appointments across public correctional centres. The Network increased investment in infrastructure and resources in GP telehealth to ensure equity of care for inmates, regardless of location.

The Network also introduced Protecht.ERM, a web-based, single platform system to support clinical and corporate risk management, incident management, compliance and internal audit recommendations.

The Network’s forensic mental health research team developed and trialled an evidence-based prison mental health screening tool for inmate mental health assessment. The new tool was found to be feasible to implement and, when compared to the existing approach, demonstrated superior performance in identifying inmates with mental illness and those at risk of self-harm in custody. The tool was further refined and will be converted into an electronic form to be implemented across the Network. The study was funded by the Network and the National Health and Medical Research Council Centre of Research Excellence in Offender Health.

In responding to the 2018 Your Training and Wellbeing Matters survey, 87 per cent of the Network’s junior medical officers provided very positive feedback about their workplace experience, reflecting the organisation’s commitment to improving junior doctors’ training and improved patient care.

Thank you to our Network staff, who change lives every day. Their dedication and expertise improve the health outcomes of patients, and bring dignity and high-quality patient-centred care to a stigmatised and vulnerable patient population.

Key achievements 2018-19

• Initiated 1452 custodial patients on direct acting antiviral hepatitis C treatment compared to 1127 in 2017-18.
• Supported 2757 Aboriginal Chronic Care Program patients compared to 1086 in 2017-18.
• Diverted 3340 adults and young people with mental illness from custody to community-based care, compared to 2899 in 2017-18.
• Supported on release from custody, 680 young people with mental health and drug and alcohol histories, compared to 486 in 2017-18.
• Reduced average waiting times for non-admitted patient appointments from 30 days to 10 days.
• Established a partnership with Western NSW Local Health District integrated care for high-risk patients released from Macquarie Correctional Centre.
• Increased telehealth appointments by 123 per cent since July 2018.
• Commenced a clinical trial of long-acting opioid dependence treatment in NSW correctional centres.
Developed a Close the Loop assurance framework to implement Root Cause Analysis and Coroner recommendations.

Launched the 2016 Forensic Mental Health Patient Survey Report in November 2018.

THE SYDNEY CHILDREN’S HOSPITAL NETWORK

Hawkesbury Road
Westmead NSW 2145
Locked Bag 4001
Westmead NSW 2145
Telephone: 9845 0000
Facsimile: 9845 3489
Website: www.schn.health.nsw.gov.au
Business hours: 8.30am-5pm, Monday to Friday

Interim Chief Executive: Adjunct Associate Professor Cheryl McCullagh (from April 2019)

Associate Professor McCullagh has worked in health for 30 years, including roles in nursing, research, education, IT and executive management, in specialist referral hospitals in Sydney and Adelaide. She has a Diploma in Applied Science, a Bachelor of Nursing and a Masters of Health Service Management, and is an Adjunct Associate Professor in the Sydney Medical School and Faculty of Health Sciences at The University of Sydney.

Prior to being appointed Interim Chief Executive in April 2019, Associate Professor McCullagh was the Director of Clinical Integration for The Sydney Children's Hospitals Network.

Chief Executive: Dr Michael Brydon OAM (until April 2019)

Dr Michael Brydon OAM was the Chief Executive of The Sydney Children’s Hospitals Network from May 2016 until April 2019.

Year in review

The Sydney Children’s Hospitals Network (the Network) is the largest provider of paediatric health services in Australia. In 2018-19, the Network saw occupancy averaging 87 per cent across both its tertiary hospitals, an increase on 2017-18. We thank our staff for their tireless work and commitment to caring for sick children in our facilities.

With more than one million occasions of service (being any examination, consultation, treatment or other service provided to a patient in a non-admitted setting), and an increase in emergency department presentations to more than 98,000, the Network cared for a total of 157,000 children.

Unprecedented capital funding commitments were made in 2018-19 to support further infrastructure developments for paediatric services at The Children’s Hospital at Westmead and Sydney Children’s Hospital, Randwick. In total, more than $1.2 billion was committed for major redevelopments at both tertiary hospital sites. In 2018-19 major building milestones were met with the completion of the Central Acute Services Building structure at Westmead, which is due to open in late 2020.

Significant accomplishments have been made through our research division, Kids Research, this financial year. A highlight includes the $2 million Spinal Muscular Atrophy (SMA) screening program, which has provided diagnostics to more than 90,000 newborns since August 2018 and delivered an internationally sponsored clinical trial to test a gene therapy to help prevent the onset and devastating progression of SMA.

In 2018-19, the Network completed the roll-out of a single digital paediatric Electronic Medical Record System (eMR) to cater specifically for the paediatric population. The Network can now design and modify the eMR to ensure alignment with best practice and clinician requirements in the paediatric care setting.

A governance review of The Sydney Children’s Hospitals Network was completed by the Ministry of Health in the first half of 2019, to assist the Network in adapting to a changed operating environment since the Network was established. While change is ahead for the Network, recommendations made by the expert panel and further direction from the Ministry will only strengthen and improve the specialised paediatric services the Network delivers to children, young people and their families across NSW.

Around 7300 parents and carers now use The Sydney Children's Hospitals Network’s My Health Memory app

Key achievements 2018-19

- Implemented an integrated paediatric eMR system across both The Children’s Hospital at Westmead and Sydney Children’s Hospital, Randwick, to enhance service delivery, strengthen patient safety and provide a Network-wide view of the patient record.
- Implemented a system-wide change to the way our health system addresses children who are above a healthy weight range. The new program, implemented by the Network’s population health team, engages all clinics to assess a child’s height and weight and also supports them with clinically appropriate advice that can be passed on to parents and carers.
- Launched the Aboriginal Health Strategic Plan, the first of its kind for Aboriginal children and young people in NSW.
- Supported the full implementation of the Sydney Children’s Hospitals Foundation to drive fundraising projects across The Sydney Children’s Hospitals Network.
Delivered a new refurbished adolescent mental health ward (Hall Ward) at The Children’s Hospital at Westmead to improve the therapeutic environment.

New ‘Early Phase Trial’ accreditation from the highly acclaimed Human Research Ethics Committee (HREC) gave The Sydney Children’s Hospitals Network world-class status, the only public organisation committee in NSW to achieve this type of accreditation.

Implemented ground-breaking research into clinical practice through the Grace Centre for Newborn Intensive Care at The Children’s Hospital at Westmead, to continue to lead developmental care for newborns. Early intervention programs are significantly improving outcomes for babies at risk of developing neurodevelopment problems, such as cerebral palsy, later in life.

Delivered the $2 million Spinal Muscular Atrophy (SMA) screening program and an internationally sponsored clinical gene therapy trial, to help prevent the onset and devastating progression of SMA. The first baby involved in the trial was the first infant outside of North America to receive the one-off gene therapy infusion for SMA.

Achieved a 50 per cent response rate over the past two years in children who have received a personalised treatment as part of the Zero Childhood Cancer National Precision Medicine Program and who have had a complete or partial response, which has stabilised the disease. This has been led by the Kids Cancer Centre at Sydney Children’s Hospital, Randwick, and the Children’s Cancer Institute.

Developed and implemented a new meal service at Sydney Children’s Hospital, Randwick, to optimise nutrition for patients. Meals are now offered to patients up to six times a day to address two key paediatric nutritional requirements.

ST VINCENT’S HEALTH NETWORK SYDNEY

390 Victoria Street
Darlinghurst NSW 2010
Telephone: 8382 1111
Email: SVHS.Enquiry@svha.org.au
Website: svhs.org.au
Business hours: 9am-5pm, Monday to Friday

Chief Executive: Associate Professor Anthony Schembri AM

Associate Professor Anthony Schembri AM joined St Vincent’s Health Network Sydney as Chief Executive Officer in 2014. He is a Board Director of the Central and Eastern Sydney Primary Health Network, Board Director of the Garvan Institute for Medical Research, Board Director of the St Vincent’s Curran Foundation, Board Director of the National Centre for Clinical Research of Emerging Drugs of Concern and Co-Chair of the Nursing Research Institute of the Australian Catholic University/St Vincent’s.

Associate Professor Schembri holds academic appointments with the University of NSW and the Australian Catholic University. He is a surveyor for the Australian Council on Healthcare Standards and Fellow of the Australian College of Health Service Management.

Year in review

The 2018-19 financial year was one of the most transformative periods for St Vincent’s for innovation and new models of care, while increasing its mission of outreach to the vulnerable.

The St Vincent’s oncology department won the Premier’s Award for the best clinical trials unit in NSW and has quickly evolved to become the busiest clinical trials unit in the state, with the largest proportion of oncology patients now accessing cutting-edge treatment.

St Vincent’s is now also NSW’s fastest-growing provider of telehealth services, with more than 55 active telehealth programs and more than 80 trained clinicians providing care to people in rural or remote areas for a range of services, from pain management to alcohol and drug specialist support.
The past year has seen important acquisitions to better serve the community. With construction of Australia’s first dedicated Advanced Cardiac Imaging Centre, using the latest technology in CT and MRI cardiac scanning to radically improve diagnostic and research capacity, St Vincent’s also opened the southern hemisphere’s first MRI-guided ultrasound unit for the non-invasive treatment of neurological conditions including Parkinson’s and Essential Tremor.

Our emergency department is undergoing a complete transformation, including the construction of a new psychiatric and non-prescription drug and alcohol unit. The unit ensures that our unique patient population, which includes the highest concentration of patients with underlying drug and alcohol and mental health conditions, as well as those experiencing homelessness, are provided with more effective and dignified care. St Vincent’s also increased its inclusive health expenditure in 2018-19, dedicating a record $45 million to providing care for marginalised groups.

In late 2018, St Vincent’s embedded a new informal reporting system, known as Ethos. It forms part of the organisation’s commitment to creating a culture of speaking up and addressing problems in an early, informal way. The Ethos program provides staff with the opportunity to report negative behaviour via a confidential online reporting tool. Staff can also choose to report anonymously.

Our staff, volunteers, and community and consumer advocates have our thanks for making these achievements possible.

### Key achievements 2018-19

- Launched the Campus Mental Health Strategy, an innovative plan to improve accessibility and service integration for the unique patient population that St Vincent’s has long served. The strategy focus on the provision of high-quality mental health services to preferentially care for the vulnerable.
- Opened the southern hemisphere’s first MRI-guided ultrasound unit for the non-invasive treatment of neurological conditions including Parkinson’s and Essential Tremor. This new technology treats patients using an incisionless procedure, rendering patients free of symptoms immediately.
- Commenced primary care service provision at Parklea Correctional Centre. St Vincent’s Hospital Correctional Health will deliver primary healthcare, primary mental health care, drug and alcohol care, dental and allied health services.
- Launched St Vincent’s first Aboriginal and Torres Strait Islander Nursing scholarship, the Aunty Fay Carroll Nursing Traineeship, named in honour of local elder Aunty Fay Carroll.
- Commenced the Advanced Cardiac Imaging Centre at St Vincent’s Hospital, the first of its type in Australia. A joint initiative of the St Vincent’s heart lung service and the Victor Chang Cardiac Research Institute, the new Centre brings two powerful and complementary cardiac imaging techniques – CT and MRI – together in a single space for the first time, operated by cardiologists and a dedicated team of radiographers.
- Established Australia’s first Prostate Cancer Research Alliance in collaboration with the Peter MacCallum Cancer Centre and the University of Melbourne – bringing together world-leading experts to focus on the most promising ways of predicting the risk of future progression of prostate cancer at the time of diagnosis, reducing the progression of prostate cancer and improving treatments for men with advanced forms of the disease.
- Commenced a new stimulant treatment service, providing free and confidential counselling for young people aged 16 to 25 who are using methamphetamine, cocaine, ecstasy and other drugs. Opening in late 2018, the Burton Street Centre has seen clients as young as 14. The Centre’s inclusive model of care provides individual therapy for both the young person and concerned others, via family or network-based therapy.
- Opened a new haematology and bone marrow and stem cell transplant ward. The new 20-bed, state-of-the-art unit provides each patient with private, negative airflow rooms – minimising infection risk and exposure to resistant microorganisms.
- Announced our partnership with the Institute of Global Homelessness, City of Sydney, NSW Government and the sector’s leading NGOs in a collaboration with hard targets to end street sleeping. Together, the aim is to reduce rough sleeping in the City of Sydney by 25 per cent by 2020; reduce rough sleeping in the City of Sydney and NSW by 50 per cent by 2025; and work towards zero rough sleeping in the City of Sydney and NSW.
- Received a number of major awards recognising the outstanding achievements of both our health service and our people. In particular, Dr Jenny Stevens won Collaborative Leader of the Year at the NSW Health Awards; our health service won Employer Support Award for Australian Defence Force reservists; and the Kinghorn Cancer Centre was awarded the NSW Premier’s Award for Outstanding Clinical Trials Unit.
We continued supporting this delivery of world-class care by providing our staff with the latest knowledge and best possible equipment. This included new training programs across our aeromedical team, maternity emergency training for paramedics, a new fleet of state-of-the-art AW139 helicopters, and Mercedes V530 ambulances. We also equipped our ambulances with new mobile data terminals to provide faster, more comprehensive patient medical information, and improved radios and radio communication to make it easier to locate patients and keep our paramedics safe.

Staff and patient safety continued to be a priority with multiple programs available throughout employment and into retirement. Programs included in-house psychologists and chaplains, wellbeing workshops, occupational violence prevention training, Trauma Assist, Manager Assist, NSW Ambulance Legacy and support for employees’ families. Collaborations included Reliance at Work and Mind Coach with the Black Dog Institute and HeadCoach Research with the University of New South Wales.

A staff educational campaign, Speak Up, was designed to eradicate bullying, harassment and discrimination in the workplace. The community education campaigns Don’t Hurt a Paramedic and No Excuse for Triple Zero (000) Call Taker Abuse helped improve workplace safety for our staff.

NSW Ambulance continued to protect and improve the health and wellbeing of the NSW community, delivering the Traffic Offenders Intervention Program, programs designed to improve access to quality acute stroke care, and educational programs to reduce the gap between the care received by Indigenous and non-Indigenous Australians.

Throughout the year, we continued developing integrated models of care to reduce the number of unnecessary trips to emergency departments. We now also have a range of alternate care programs including Falls Program, Aged Care Outreach Program, Point of Care Testing, Low Acuity Patient Referral and Palliative and End-of-Life Care.

Other clinical initiatives include refining our major trauma protocols to improve patient management following a major trauma incident, improved demand management to better meet the needs of a growing and ageing population, a world-class cardiac reperfusion program and improved patient access to stroke services across the hospital network.

It has been a strong year for NSW Ambulance, as we continued our delivery of excellence in care to the NSW community. Thank you to our staff for their care provided to the community.

Invested over $40 million in improved mobile communications and patient medical data
Key achievements 2018-19

• Recognition of NSW Ambulance paramedics as registered health professionals. Registration is a major milestone for our staff and recognition of their high-level clinical skills and dedication to the community of NSW.

• Recruited 226 paramedics and control centre staff in the first tranche of 750 additional staff over four years announced in the 2018-19 NSW State Budget. Extensive evidence-based planning ensures they are allocated where they are needed most.

• Introduced staff safety and recovery reforms including a dedicated claims coordinator, an injured worker resource and support kit, and a recovery at work coordinator. These reforms have reduced the number of claims and the time taken to resolve them.

• Invested more than $40 million in the latest secure mobile technology to achieve faster response times, locate patients and keep staff safe. This investment has included electronic medical records hardware, a single platform of data communications and personal and in-car radios.

• Commissioned nine NSW Ambulance superstations in the Sydney metropolitan area, with a 10th superstation announced for Randwick in February 2019. Across rural and regional NSW, 12 new stations were officially opened during 2018-19.

• Better protected our staff and provided a safer workplace with enhanced mobile communications, dynamic risk assessment training, a broad range of off-duty support services and public education campaigns such as Don’t Hurt a Paramedic and No Excuse for Triple Zero (000) Call Taker Abuse.

• Invested in a new fleet of state-of-the-art AW139 helicopters which act as airborne intensive care units and are also equipped to provide neonatal emergency transport. Covering NSW and beyond, AW139s can travel approximately 600km without refuelling. They represent the biggest ever NSW Government investment in aeromedical services.

• Started rolling out a new fleet of Mercedes-Benz VS30 ambulances designed with paramedic safety in mind. The new vehicles use sensors, cameras and enhanced safety packs to help negotiate traffic, and the redesigned interiors are more spacious and comfortable for staff and patients.

• Replaced the NSW Ambulance Advisory Council with the NSW Ambulance Advisory Board from January 2019. The Advisory Board advises on governance, performance, financial oversight and reporting to ensure effective governance of NSW Ambulance.

• Launched NSW Ambulance Legacy to retain the strong friendships and support networks formed during paramedics’ careers. NSW Ambulance Legacy celebrates and recognises our past and offers social connection and information to former staff and transitional assistance to existing staff approaching retirement.

HEALTH INFRASTRUCTURE

Level 14, 77 Pacific Highway
North Sydney NSW 2060
PO Box 1060
North Sydney NSW 2059
Telephone: 9978 5402
Email: hi-info@health.nsw.gov.au
Website: www.hinfra.health.nsw.gov.au
Business hours: 9am-5pm, Monday to Friday

Chief Executive: Rebecca Wark (from May 2019)

Rebecca Wark is an experienced leader of major infrastructure projects and has been with Health Infrastructure since 2008, overseeing the development of some of the state’s largest hospitals and public health services. Today, she is proudly leading the delivery of the largest health capital works portfolio in Australia.

Prior to Health Infrastructure, Ms Wark worked on major infrastructure projects across the public and private sectors. Her first public sector role was planning and delivering venues for the Sydney Olympics. She has completed studies in landscape architecture and project management, is a strong advocate for women in leadership and acts as a mentor to young professionals in business and construction.

Acting Chief Executive: Cathryn Cox (from December 2018 until April 2019)

Cathryn Cox was Acting Chief Executive, Health Infrastructure, from December 2018 until April 2019.

Chief Executive: Sam Sangster (until November 2018)

Sam Sangster was Chief Executive, Health Infrastructure, from April 2013 until November 2018.

Year in review

In 2018-19, NSW Health committed to invest $2.3 billion in the Health Capital program, a sum that includes $149 million from the NSW Ministry of Health’s recurrent budget. This was part of an $8 billion investment over four years to continue the major capital program for new health facilities, upgrades and redevelopments. Health Infrastructure manages the largest health capital works portfolio in Australia, delivering critical new and updated facilities and services across metropolitan and regional NSW.
In 2018-19, Health Infrastructure completed the construction of 26 projects, including the new Forensic Medicine and Coroners Court Complex, the Broken Hill Health Service, and eight new ambulance stations across regional NSW. Health Infrastructure is proud of its collaboration with a range of partners to deliver world-leading health and education precincts – co-locating and integrating education, research and health partners to improve community health outcomes.

In December 2018, the NSW Government announced a partnership with the University of New South Wales and the Prince of Wales Hospital to build an integrated medical education, training and research facility. Similar precinct plans are in place for Liverpool, Westmead and John Hunter.

Health Infrastructure will continue to collaborate closely with industry, focusing on safety, quality and outcomes for local health districts, healthcare professionals, patients and the wider community.

Key achievements 2018-19

- Completed 12 business cases for projects with a combined total value of $2.2 billion and seven investment decision documents for projects with a combined total value of $2.3 billion.
- Submitted the business case for the $700 million statewide Mental Health Infrastructure Program.
- Completed and opened the $91.5 million Forensic Medicine and Coroners Court Complex.
- Completed 14 new ambulance stations as part of the $306 million Rural Ambulance Infrastructure Reconfiguration Program and Sydney Ambulance Metropolitan Infrastructure Strategy Program.
- Worked in collaboration with the NSW Government and other partners to continue to drive the creation of world-leading health and education precincts at Westmead, Liverpool and Randwick. This has involved co-locating and integrating education, research and health partners to improve community health outcomes.
- Completed construction of various projects throughout rural and regional NSW, including four new facilities as part of the $300 million Multipurpose Service Program at Bonalbo, Coolah, Culcairn and Rylstone.
- Implemented a statewide reform of asset management and established the Medical Asset Management Program to support a whole-of-life approach to medical equipment and achieve fit for purpose, safe and optimised public health assets. Over 150 projects are underway as part of the $500 million Asset Refurbishment and Replacement Program.
- Started construction of 23 Health Infrastructure projects across metropolitan, rural and regional NSW, including Wagga Wagga Health Service Stage 3 and Concord Hospital Redevelopment Stage 1.
Over the past 12 months, HealthShare NSW has achieved many of its objectives to make services more competitive. This included making it easier for rural patients to get financial assistance for trips to specialists not available locally, by implementing a new digital system for the Isolated Patients Travel and Accommodation Assistance Scheme. The system allows patients to claim online and speeds up processing of paper claims. Claims have increased by more than 25 per cent since the system went live, with a record 21 per cent of patients now claiming online.

A key project was the Accelerated Savings Program, which delivered $24.9 million in savings to local health districts, 55 per cent above the Program’s annual target. HealthShare NSW also successfully tendered to provide finance, procurement, payroll, recruitment and workforce services to the NSW Mental Health Commission. This year also saw the Patient Transport Service begin to transport low-acuity patients, completing 49 per cent of such trips over the year, and allowing the NSW Ambulance Service to focus on patients needing emergency care.

HealthShare NSW also completed projects to improve customers’ experience and to deliver on the vision to be a workplace of choice for staff. HealthShare NSW was part of the statewide rollout of a new customer portal, SARA (Search and Request Anything), which is now fully operational with over 1.4 million visits so far. SARA allows users to interact online on tablets, mobile phones or desktop devices, reducing the demand on resource-intensive channels such as phone and email. SARA also provides transparent reporting to assist in the continuous improvement of HealthShare NSW. HealthShare NSW achieved a 22 per cent reduction in the Lost Time Injury Frequency Rate across the organisation, demonstrating its focus on safety.

HealthShare NSW is committed to developing a constructive workplace culture, and the latest Organisation Culture Inventory survey showed progress towards this goal. HealthShare NSW also increased participation in the People Matter Employee Survey to 68 per cent, up from 66 per cent in 2017-18.

Key achievements 2018-19

- Continued the My Food Choice roll-out across NSW hospitals, with patients in a total of 42 per cent of beds across the state now making meal choices through the program. My Food Choice meals were among more than 23 million patient meals served.
- Processed 41,000 tonnes of hospital linen, which involved transporting 82,000 tonnes of both clean and soiled linen across NSW in a closed loop system, while saving 205 million litres of water through sustainability activities.
- Continued delivery of the Ambulance Make Ready Model, improving service turnaround for NSW Ambulance. Ambulance Make Ready completed over 41,000 cleans, accounting for over 30,000 hours of work no longer carried out by paramedics.
- Launched the Booking Better Project, which improves the information captured when booking patient transport.
- Launched iEnhance, a new Oracle requisitioning module to assist NSW Health staff with requisitioning and purchasing processes. This module uses product images integrated with the Oracle R12 Financial Management Information System.
- Established HealthShare NSW’s innovation team and piloted an innovation program in Patient Transport Service.
- Achieved a 50 per cent reduction in the use of 1300 phone numbers across HealthShare NSW, realising significant savings and streamlining the customer experience.
- Continued to develop staff and workforce capability by offering employees an opportunity to learn from senior managers through a mentoring program and Lean Six Sigma training – a program that allows a selected cohort to learn continuous improvement methodologies as part of a leadership development program.
- Exceeded Aboriginal employment targets for both employee numbers: 3.5 per cent of employees have an Aboriginal background against a target of 2.5 per cent.
- Implemented 23 Ergo Analyst controls, which reduced risks associated with manual processes, across 13 safety focus sites.

Freed paramedics from 30,000 hours of cleaning and restocking work through the continued delivery of the Ambulance Make Ready Model.
Chief Executive: Tracey McCosker PSM

Tracey McCosker PSM has worked in public health for more than 20 years. She held several Hunter New England Local Health District executive positions before leading a range of statewide projects for NSW Health.

Ms McCosker holds Bachelor of Commerce and MBA degrees, and is a member of the Australian Institute of Company Directors. She is committed to leading organisations that make a positive difference in people’s lives, and serves on the board of Life Without Barriers. In 2018, she was awarded an Australian Public Service Medal for outstanding public service to community health in NSW.

Year in review

We’ve achieved so much since becoming NSW Health Pathology six years ago. I’m incredibly proud of the progress we’ve made and 2018-19 was another great year. We continued to build our role as trusted partners in creating integrated and modern health and justice systems for the people of NSW – a responsibility we take very seriously. Together, we worked on our second strategic plan, holding thousands of valuable conversations with our staff, partners, customers and community representatives. Towards 2025 is the result; a plan that sets a clear roadmap for our future in genuine partnership with those who rely on and deliver public pathology and forensic services.

We also embarked on our first Clinical Services Plan, a pivotal juncture in our transformation as a truly connected statewide service. Through these important plans, we are examining how best to make use of our statewide network, embrace emerging technologies and science, while also being responsive to the diverse and evolving needs of local customers and communities.

In 2018-19, we celebrated some big, public achievements, such as the official opening of the Forensic Medicine and Coroners Court Complex in Western Sydney. It’s truly a magnificent building that’s making a difference – not just for our dedicated forensic medicine staff and justice partners, but importantly for grieving families experiencing the unexpected death of a loved one.

We also had some quieter achievements, celebrating our science superheroes during National Science Week and collaborating on 140 new ideas to improve our services and workplaces through our online innovation space – IdeaLab.

The dedication of our staff was reflected in our 2018 People Matter Employee Survey results, with 73 per cent of our staff agreeing their team works collaboratively and their job gives them a feeling of personal accomplishment, while 84 per cent of us believe our teams strive to achieve client and customer satisfaction.

I was proud to officially unveil Elsie Randall’s beautiful artwork, which we commissioned to illustrate our commitment to closing the health and justice gaps for Aboriginal and Torres Strait Islander people. Using the Aboriginal kinship model, it tells the story of our statewide pathology and forensic service and the importance of deep cultural connections with our communities. We hope Elsie’s work will help make our facilities more culturally safe and welcoming.

Finally, I send my heartfelt thanks to the 4000 pathologists, scientists, technicians, and support and administrative staff who make up NSW Health Pathology for another year of caring, connecting and pioneering – for all of us.

Key achievements 2018-19

• Held thousands of valuable conversations with staff, customers, peers, partners and community representatives to shape and deliver NSW Health Pathology’s second strategic plan – Towards 2025. The plan sets a clear roadmap for the organisation’s future direction in genuine partnership with those who rely on and deliver public pathology and forensic services.
• Embarked on the creation of NSW Health Pathology’s first Clinical Services Plan to form the blueprint for future clinical service models in line with statewide strategies and local customer needs.
• Partnered in the construction and officially opened the world-class Forensic Medicine and Coroners Court Complex in Western Sydney. The facility was designed to provide greater support and dignity, and answers to families experiencing the unexpected loss of a loved one.
• Enrolled another 21 colleagues into the fourth cohort of NSW Health Pathology’s Emerging Leaders program, which now has more than 100 alumni. This multi-faceted and highly interactive program develops the leaders of tomorrow.
• Provided infrastructure and support through the
NSW Health Statewide Biobank to help the NSW research community to undertake more high-quality research, including through the establishment of a strategic collection strategy and development of a consent framework to enhance consent, certification and more.

- Partnered with local health district colleagues at hospital open days right across NSW showing the community how vital pathology is to integrated care via an innovative virtual reality tour showing the journey of a blood sample from collection to the lab and back to the doctor’s clinic.
- Commissioned Aboriginal artist Elsie Randall to create an artwork to illustrate NSW Health Pathology’s commitment to closing the health and justice gaps for Aboriginal and Torres Strait Islander people. Using the kinship model of Aboriginal communities, it tells the story of the statewide pathology and forensic service and the importance of having strong cultural connections with the communities it serves.
- Helped to solve some of Australia’s most enduring military mysteries using cutting-edge DNA analysis to help identify World War I soldiers who died more than 100 years ago in France.
- Trained medical staff at the 2018 Invictus Games in Sydney to use innovative hand-held point-of-care devices to treat athletes on-site at the games, producing results in a matter of minutes.
- Connected with each other to hatch innovative ideas through IdeaLab, an online collaboration space where staff can propose, develop and gain support for ways to improve NSW Health Pathology’s services.

EHEALTH NSW

Tower B, Level 13
Zenith Centre
821 Pacific Highway
Chatswood NSW 2067
PO Box 1770
Chatswood NSW 2057

Telephone: 9880 3200
Facsimile: 9880 3299
Email: EHNSW-eHealthCE@health.nsw.gov.au
Website: www.ehealth.nsw.gov.au

Business hours: 8:30am-5pm, Monday to Friday

Chief Executive: Dr Zoran Bolevich

Dr Zoran Bolevich is Chief Executive of eHealth NSW and Chief Information Officer of NSW Health.

Dr Bolevich has a background in medicine and business administration. He has worked in senior health system management, health IT and data analytics leadership roles in Australia and New Zealand.

Leading a team of more than 1350 staff, Dr Bolevich is focused on implementing the eHealth Strategy for NSW Health 2016-2026, streamlining governance of eHealth NSW’s key programs and activities, and developing a highly effective, customer-focused digital health organisation. He is passionate about improving the health system through meaningful and effective use of digital technologies, data analytics, research and innovation in partnership with patients, clinicians, health organisations, government and industry partners.

Year in review

eHealth NSW is partnering with NSW Health organisations and industry to make strong progress in building, shaping and extending the landscape for a world-class, patient-centred and digitally enabled healthcare system in NSW.

eHealth NSW is continuing to implement consistent foundations from which NSW Health can innovate. This includes state-of-the-art clinical systems such as the Electronic Medical Record (eMR) and Electronic Medication Management (eMeds), effective business and workforce management systems such as Recruitment and Onboarding (ROB), HealthRoster, and a cloud-based portal Search and Request Anything (SARA) to support NSW Health staff, underpinned by secure, high-performing information communication technology infrastructure and networks.

In accordance with the eHealth Strategy for NSW Health 2016-2026, eHealth NSW is transforming the inpatient environment by working with local health
districts to implement eMR systems, now in use at 177 hospitals across the state, supporting safer care for 1.8 million patient admissions annually. Every day on average 45,000 clinicians open 1.03 million patient charts, order 110,000 laboratory tests and book 36,500 appointments digitally. Nine products that enhance the functionality of the eMR were also introduced in 2018-19.

By June 2019, the eMR’s Electronic Medication Management (eMeds) functionality was live at 122 NSW public hospitals, amid plans to roll out to a further 80 facilities. Sixty-nine rural sites have gone live with eMeds and 54.5 million medications were administered in NSW using details recorded electronically, thereby reducing the risk of medication errors.

Deployment of the Electronic Record for Intensive Care (eRIC) program gained momentum, delivering improved safety for critically ill patients and supporting clinicians in the use of evidence-based clinical practice. By June 2019, eRIC was live in 19 hospitals and 373 beds across NSW, having been used to treat 20,215 patients.

By June 2019, the Radiology Information System and Picture Archive and Communication System (RIS-PACS) Program had completed its proof of concept and procurement phases, which included the signing of a 10-year as-a-service contract with the selected vendor covering the 11 participating NSW Health organisations. RIS-PACS will interface with the eMR and various patient administration systems now in use and transform the way more than two million medical imaging studies are captured, used and archived annually.

eHealth NSW’s business and workforce management systems are playing their part in enhancing patient care by directly supporting the 140,000 staff members who provide 24/7 care to those in need across hundreds of NSW Health facilities.

Statewide implementation of HealthRoster was completed and new functionality to the ROB system enabled the bulk recruitment of graduate nurses and midwives and specialty recruitment of NSW Ambulance staff and senior medical and dental officers.

By June 2019, all of NSW Health’s email systems were transitioned into a single managed email system, hosting 150,000 email accounts. This program of work has also standardised user login credentials to allow staff across the state to use a single user name and password to access multiple systems.

The SARA portal went live in June 2019, providing NSW Health staff with anytime-anywhere-and-on-any-device access to IT, payroll, recruitment, finance, purchasing and warehousing services and support services.

eHealth NSW continues to vigilantly monitor, review and strengthen NSW Health’s information systems’ defences and implement measures to ensure NSW Health’s cyber security 24/7 readiness is maintained. The eHealth NSW and HealthShare NSW Cyber Security Executive Committee approved the Cyber Security Roadmap 2019-20 for managing Cyber security risks as mandated by the NSW Cyber Security Policy. We thank our staff for their work in ensuring the safety and performance of the health system’s electronic processes.

Successfully completed large-scale recruitment of graduate nurses and midwives, NSW Ambulance staff, and senior medical and dental officers through the new Recruitment and Onboarding (ROB) system

Key achievements 2018-19

- Reached a total of 177 sites with 21,500 beds now live with the eMR. Nine enhancements to the eMR were made, including Offline Medication Administration Chart, My Charted Patients and Pharmacy MPages.
- Implemented Electronic Medication Management (eMeds) at 84 sites, with an additional 12 sites going live with the second phase of Electronic Medical Record (eMR2). eMeds is now available at 122 sites in NSW.
- Increased to 19 the number of hospitals live with the Electronic Record for Intensive Care (eRIC) which is delivering improved safety and providing better clinical decision-making for critically ill patients.
- Signed a contract to pilot the Health Grade Enterprise Network initiative at the Westmead Redevelopment Precinct. This will test a new approach to commissioning and providing hospital networking infrastructure as-a-service to ensure hospitals can provide the best digitally enabled healthcare to the people of NSW.
- Completed the Radiology Information System and Picture Archive and Communication System (RIS-PACS) Program’s proof of concept and procurement phases with a selected vendor covering 11 NSW Health organisations. This will transform the way more than two million medical imaging studies are captured, used and archived annually.
- Implemented secure, cloud-based infrastructure that will enable systems such as a new Patient Reported Measures (PRM) system to ‘scale’ to support integrated, better value care across NSW Health.
- Delivered technical integration for the pilot of a Risk Trigger Monitoring Tool, which is supporting patient safety. The tool captures combinations of events within the eMR allowing for rapid feedback on the effectiveness of quality and safety initiatives.
- Designed a platform for combining and rapidly accessing NSW Health data for analytics purposes.
- Delivered the Pathology Analytics Phase 1 proof of concept solution on a robust platform in June 2019, enabling a limited set of specific reports and analytics based on pathology data to analyse variation in ordering pathology services in emergency departments.
- Completed the integration of NSW Diagnostic Imaging Reports from all local health districts and The Sydney Children’s Hospitals Network, enabling NSW Health to share available information to My Health Record.
LOCAL HEALTH DISTRICTS

Eight local health districts cover the Sydney metropolitan region, and seven cover rural and regional NSW.

**METROPOLITAN NSW LOCAL HEALTH DISTRICTS**
- Central Coast
- Illawarra Shoalhaven
- Nepean Blue Mountains
- Northern Sydney
- South Eastern Sydney
- South Western Sydney
- Sydney
- Western Sydney

**RURAL AND REGIONAL NSW LOCAL HEALTH DISTRICTS**
- Far West
- Hunter New England
- Mid North Coast
- Murrumbidgee
- Northern NSW
- Southern NSW
- Western NSW
Chief Executive: Dr Andrew Montague

Dr Andrew Montague has been Chief Executive of Central Coast Local Health District since August 2016 and has extensive clinical and senior management experience within the health sector, both in Queensland and NSW.

Dr Montague studied medicine at the University of New South Wales (UNSW) and has a Masters in Health Administration from UNSW. He is a fellow of both the Royal Australian College of General Practitioners and the Royal Australasian College of Medical Administrators.

Dr Montague’s previous role was as Executive Director Operations for Northern Sydney Local Health District from 2012 to 2016, where he also acted as the Chief Executive for an extended period.

He worked as a clinician for 10 years, both in hospital and as a general practitioner, and since 2005 has held the roles of Director Medical Services, Mercy Health and Aged Care Central Queensland; Deputy Director Medical Services, Royal North Shore Hospital; and Director Medical Services Northern Beaches Health Service.

Year in review

Central Coast Local Health District’s continuing expansion of facilities and initiatives is a reflection of the growth and transformation of the Central Coast community. We acknowledge the work of our committed staff in supporting and delivering care to our patients.

Gosford Hospital’s $348 million redevelopment is an example of the District’s commitment to providing world-class care and support to the community and the generations that follow. Ongoing refurbishments across this financial year have provided new homes for allied health, physiotherapy, the medical day unit, anaesthetics, emergency department offices, and patient enquiries.

Commissioning of the helipad for the new 11-storey tower has meant improved access and upgraded technology for patient transfers.

The main entry forecourt and linkway connection to the new multi-storey car park was finalised in 2018-19. The connection includes the proposed site for the $72.5 million Central Coast Medical School and Research Institute, a partnership between the Central Coast Local Health District and the University of Newcastle. Construction of this new research facility will commence in mid-2019.

Work commenced on the $200 million redevelopment of Wyong Hospital, with construction of the new car park completed in November 2018. This redevelopment will deliver first-class services including a new emergency department, intensive care unit and expanded surgical services.

The District’s strong relationship with the local Aboriginal community was highlighted at the annual NAIDOC Community Day, which saw 330 Aboriginal community members complete full health checks, including pathologies.

The District has shown strong leadership in providing a healthy food environment, fully implementing the NSW Healthy Food and Drink Framework in early 2019. All retail outlets have prioritised healthy food and drink in their offerings and continue to work closely with the District to ensure this is maintained.

Key performance indicators for the Healthy Children’s Initiative and health professional referrals to the Get Healthy Service, including Get Healthy in Pregnancy, were exceeded in 2018-19. A total of 838 patients were referred to the Get Healthy Service by health professionals, of which 486 were Get Healthy in Pregnancy referrals – more than double the target set.

The Thirsty? Choose Water! translational research grant encouraged students to swap sugary drinks for water, with early positive results showing the overwhelming popularity of chilled water stations in secondary schools. This program also attracted another research grant from the Medical Research Future Funds for $399,850 to extend the project throughout more than 60 NSW schools.

Digital transformation continues to improve the District’s capability to provide care to the highest standards of quality and safety. The District’s information communications and technology team implemented the eHealth health wide area network
Key achievements 2018-19

- Continued work on the $348 million redevelopment of Gosford Hospital, which is nearing completion, and expected to be finished in late 2019.
- Commenced work on the $200 million redevelopment of Wyong Hospital, with construction of a new car park completed in November 2018.
- Implemented a new model of care for Ngiyang (Aboriginal Maternal Infant Health Service and Building Stronger Foundations Program), which ensures all pregnant women in the District identifying as Aboriginal, or who identify their baby as Aboriginal, will be provided cultural care from pregnancy until the child’s sixth birthday.
- Delivered a new mobile x-ray service for residents in aged care facilities, allowing care to be delivered closer to where people live and avoiding unnecessary emergency department presentations.
- Developed a consortia to provide strategic direction and informed decision-making on the development, implementation and local evaluation of suicide prevention initiatives.
- Implemented a new risk stratification tool for people living with chronic conditions. The tool aims to assist patients at risk of rehospitalisation to navigate the health system, reducing barriers to accessing care.
- Developed a partnership with Liquor & Gaming NSW to encourage ID checking at local alcohol retailers. ‘Mystery shopper’ site visits have helped improve the number of bottle shops on the Central Coast checking customer IDs.
- Co-designed a Consumer Participation Framework to inform consumers and guide staff.
- Refreshed the District’s values and behaviours as part of the Culture Strategy 2018-2023.
- Delivered eRIC (Electronic Record for Intensive Care), a unique clinical system created by ICU clinicians for critically ill patients, to Wyong Hospital and Gosford Hospital.

Demographic summary

Central Coast Local Health District is located north of Sydney and provides healthcare services across a geographic area of approximately 1680 square kilometres. The District is home to about 350,170 residents.

The Darkinjung people are the traditional custodians of the land covered by the District.

People of Aboriginal and Torres Strait Islander heritage make up 3.8 per cent of the population. About 21 per cent of the population were born overseas, 8.3 per cent reported speaking a language other than English at home and about 0.8 per cent of the District population reported poor proficiency in English.

Comparatively high numbers of people 70 years and older live on the Central Coast (15.5 per cent of the population), compared to the rest of NSW (11.8 per cent). The District’s population is expected to increase by around 12 per cent by 2031. The older population is projected to grow by about 42 per cent and will represent about 20 per cent of the population.

Issues facing the District are related to ageing, chronic health conditions and growing service requirements. These are particularly relevant in the Wyong area, due to higher population growth, lower socio economic status and higher levels of risky behaviours such as smoking, alcohol consumption, poor diet and obesity. Central Coast residents have higher rates of death from all causes, in particular cancers and respiratory disease, in comparison to the NSW rates.

Source: 1. Estimated resident population for 2019

Local government areas

Central Coast

Public hospitals

Long Jetty Health Centre (sub-acute), Gosford, Woy Woy (sub-acute), Wyong

Community health centres

Erina, Kincumber, Lake Haven, Long Jetty, Mangrove Mountain, Woy Woy, Wyong, Wyong Central

Child and family health services

Aboriginal Maternal and Infant Health Services, Building Strong Foundations, Family Care Cottage Gosford Gateway Centre and Wyong Kanwal Health Service Child and Family Health Gateway Centre, Statewide Eyesight Preschooler Screening, Statewide Infant Screening – Hearing, Sustaining NSW Families Wyong Central, Universal Health Home Visiting, Pregnancy and Early Parenting Education – Maternity Services, Developmental Team – Child Health Assessment, Family Assessment Consultation Education Therapy Service, Early Childhood Nursing Service, Well Baby Clinic, Immunisation Clinics, Allied Health Clinics – occupational therapy, speech pathology, physiotherapy, social work. Child and Family Health services are also provided at community health centres and Kariong Neighbourhood Centre.

Oral health clinics

Gosford Hospital, Woy Woy Hospital, Wyong Hospital

Other services

Aboriginal health, ambulatory care, BreastScreen NSW, chronic and complex care, community nursing, drug and alcohol, HIV and related programs, Hospital in the Home/Acute Post-Acute Care, Integrated Care Program, mental health, multicultural health, palliative care, sexual assault care, sexual health, violence...
Chief Executive: Steve Rodwell

Steve Rodwell was appointed Chief Executive for Far West Local Health District in September 2017. Previously, he was the Executive Director Nursing, Midwifery and Workforce, with the Mid North Coast Local Health District for six years. Mr Rodwell began as a student nurse at Royal Prince Alfred Hospital in 1980, moving to Kempsey District Hospital in 1986 and to the Coffs Harbour Base Hospital in 1989. He brings to the role a great depth of nursing and general management experience.

Year in review

The 2018-19 financial year was a busy time, with the Far West Local Health District continuing to consolidate on the previous years’ developments and making significant progress on important initiatives.

The District continued to perform strongly against a range of indicators and retained a NSW Health performance rating of zero (no performance issues). The Yamirri Nharatji culture framework program continued to enhance workplace culture and drive improvements in staff engagement and patient-centred care.

In 2018-19, the District increased medical services at Broken Hill Health Service, which included the appointment of a new resident general physician. An increase in the orthopaedic service to weekly visits has enabled most emergency procedures to be performed at Broken Hill. This has also increased the volume of elective surgery, including sub-specialty surgery, and the amount of emergency orthopaedic surgery done at Broken Hill. Shoulder replacement surgery and a monthly haematology service commenced; previously patients had to go Adelaide for these services.

The District increased the Aboriginal health worker positions within the Broken Hill Health Service by 4.6 full-time equivalent positions in 2018-19. These positions provide support to the Aboriginal community when they are accessing the health service, seven days per week. Growth also continued in the mental health and drug and alcohol (MHDA) Aboriginal workforce, with the commencement of three Aboriginal mental health trainees (AMHT). The new AMHT clinicians join the four existing Aboriginal MHDA clinicians, who are all successful graduates of the trainee program. The program promotes development of skills in both the trainees and also in non-Indigenous clinicians, through shared knowledge, education and engagement with Aboriginal people and their families.

Expansion of the Primary Health Care Registered Nurse in School Service now means there are five registered nurses in seven primary and two secondary schools in Broken Hill, offering population health screening to all children commencing kindergarten each year, as well as providing and coordinating health promotion activities. The service also provides early intervention strategies to improve health literacy and prevent illness.

Expansion of the School Based Traineeship program saw the program grow to 19 positions in 2019, with 15 positions identified for Indigenous students. The program combines paid work, training and school, with eight trainees in their final year and 10 in their first year. Students receive an industry-recognised national qualification and credit towards their HSC.

Implementation of the Clinical Excellence Commission’s Last Days of Life Toolkit in Broken Hill Health Service has provided standardised paperwork and language for identifying, discussing and implementing care in the last days of life. Education sessions were provided at Broken Hill Hospital for nursing, medical and allied health staff, and a comprehensive resource manual was also developed to support its ongoing use. Roll-out of SHAPE End of Life conversations to outreach sites has included half-day education sessions for nursing and allied health staff at Dareton, Wentworth and Balranald, with an aim of increasing staff confidence and capacity in discussing end of life issues with patients, carers and colleagues.

Our staff, volunteers, and community and consumer advocates have our thanks for making these achievements possible.
The School Based Traineeship program increased to 19 positions in 2019, with 15 positions identified for Indigenous students.

Key achievements 2018-19

- Achieved an Indigenous employment rate of 9.5 per cent, as compared to 8.7 per cent in last financial year. The District target is to have an Indigenous employment rate of 10.7 per cent by the end of 2019.
- Expanded our Transition to Professional Practice new nurse graduate program and the School Based Traineeship program with more opportunities for Aboriginal applicants.
- Achieved emergency treatment performance targets, with a result of 89.2 per cent as at 30 June 2019, significantly above the state target of 81 per cent.
- Maintained the percentage of consumers rating the mental health and drug and alcohol services through the Your Experience Surveys (YES) as very good or excellent (above 80 per cent). In May 2019, 100 per cent of consumers rated the service as very good or excellent.
- Continued increases to specialist services, including three new Aboriginal mental health trainees and an increase in Aboriginal health worker positions, and increased the numbers of medical practitioners and nurses in our primary schools offering health screening and health promotion activities for all children.
- Implemented the Last Days of Life Toolkit, the Palliative Approach Framework online resource, and SHAPE End of Life education sessions.
- Completed Stage 2 of the Broken Hill Health Service redevelopment and the roof replacement program.
- Increased medical services at Broken Hill Health Service, increasing access to surgery, including elective surgery.
- Continued planning for a new facility at Buronga and major refurbishment of Tibbooburra Health Service; upgraded staff accommodation and accessibility to health buildings in White Cliffs and Tibbooburra.
- Consolidated services at the new Broken Hill Community Health Centre.

Demographic summary

The Far West Local Health District is located in the far west of NSW and provides healthcare services across a geographic area of approximately 194,949 square kilometres. The region has some of the most beautiful, though harsh, landscape in NSW and has been significantly affected by the current drought.

The Barkandji, Wilyakali, Ngiyampaa and Muthi Muthi peoples are the traditional custodians of the land covered by the District. The region has three rivers – the Darling, the Murray and the Murrumbidgee. These rivers are significant for the traditional custodians and provide connection to their lands.

The northern cluster of the District includes the towns of Broken Hill, Tibbooburra, Wilcannia, Menindee, White Cliffs and Ivanhoe, which all have links with the South Australian health service, especially for flows to higher level health services. The southern cluster of the District includes the towns of Wentworth, Dareton, Buronga, Gol Gol, Euston and Balranald and links to Victoria for higher level health services.

The 2019 estimated residential population (ERP) of the District was 30,060. People of Aboriginal heritage make up 3,920 or 13 per cent (2016 ERP) of the population, compared to 216,176 for all NSW. The District’s representation of culturally and linguistically diverse communities is small, with 91.1 per cent of residents coming from an English-speaking background.

By 2036, the District’s population is expected to decrease by 9.6 per cent. However, a planned land release in the Wentworth Local Government Area may increase the population over the next 25 years. Mining and alternative electricity generation technology activity is also increasing across the District.

The proportion of the District aged 65 years and over is projected to increase from 18 per cent in 2016, to 29 per cent by 2036. It is expected that this growth will increase the demand for services in the District. Aboriginal community birth rates are also increasing. The District is responding by providing culturally safe and responsive healthcare, complemented by working with Aboriginal health service partners.

The demand for health services in the region has been changing in line with the ageing population’s increased rates of chronic disease. More recently, the impact of the drought on the wellbeing of far west communities has seen a need to enhance mental health and drug and alcohol services. We have seen the importance of this particularly for Aboriginal communities, with the lack of water in the rivers affecting their wellbeing.

In 2017-18, the rate of admissions for circulatory disease in the region was slightly higher than that of the rest of NSW. In 2017-18, the hospitalisation rates for chronic obstructive pulmonary disease and diabetes-related conditions were respectively two and three times the NSW rate. In 2017-18, the hospitalisation rates for intentional self-harm in 15-24-year-olds was twice the rate of all the local health districts. In 2017, an estimated 20.2 per cent of respondents in the region reported high or very high psychological distress, compared to 15.1 per cent across NSW.

The District is keen to ensure the co-design of services based on community need. By enhancing models of care that focus on integrated care, patient-centred, value-based care, telehealth and alternatives, the District aims to reduce the use of hospital services and place a greater emphasis on the provision of primary healthcare and support for self-management.

Sources:
1. NSW Health Stats
2. 2016 Australian Bureau of Statistics Census
Local government areas
Broken Hill, Central Darling, Wentworth, Balranald, Unincorporated Far West

Public hospitals
Broken Hill Health Service, Wilcannia Health Service (multipurpose service), Balranald Health Service (multipurpose service), Wentworth Health Service

Community health centres
Broken Hill Community Health Centre (Wilyakali Pali-mala Kirra), Dareton Primary Health Care Service, Ivanhoe Health Service (HealthOne), Menindee Health Service, Tibooburra Health Service, White Cliffs Health Service

Child and family health services
Child and Family Health Service (Wilyakali Pali-mala Kirra)

Oral health clinics
Broken Hill Community Health Centre Dental Clinic (Wilyakali Pali-mala Kirra), Balranald Dental Clinic, Dareton Dental Clinic/Mobile Van

**HUNTER NEW ENGLAND LOCAL HEALTH DISTRICT**

Lookout Road
New Lambton Heights NSW 2305
Locked Bag 1
New Lambton NSW 2305
Telephone: 4985 5522
Facsimile: 4921 4969
Email: HNELHD-SRC@health.nsw.gov.au
Website: www.hnehealth.nsw.gov.au
Business hours: 8.30am-5pm, Monday to Friday

Chief Executive: Michael DiRienzo

Michael DiRienzo, Chief Executive, Hunter New England Local Health District, holds tertiary qualifications in commerce and economics. He held senior positions in a range of manufacturing organisations prior to entering the health field. Mr DiRienzo has extensive experience in senior management roles within health support services, and was senior operational leader of the District’s major referral hospitals prior to becoming Chief Executive in January 2011.

**Year in review**

This year, Hunter New England Local Health District has looked to the future, examining how emerging technology can continue to help provide excellent care for every patient, every time. Technology underpins - or has the potential to underpin - almost every service model and enhance contemporary, quality healthcare.

With this in mind, there has been a continued focus on eHealth and what it can achieve, particularly for people living in some of the most rural and remote corners of this vast and diverse local health district.
In an Australian first, Hospital HealthPathways was launched to support John Hunter Hospital and John Hunter Children’s Hospital’s junior medical officers via an online, mobile-friendly website. The website currently provides 45 clinical pathways and 143 referral pages with information on clinical management, referral, discharge criteria and information for patients. Junior doctors provided positive feedback on the initiative as a valuable resource, and it will be rolled out right across the District in 2020.

This year the Quality Improvement Data System commenced, a significant step to reduce hospital-acquired complications. More than 800 staff are active users of the new system, enabling services to audit coding and input of information, understand common complications experienced by their patients and put strategies into place to reduce the incidence of hospital-acquired complications.

To further formalise eHealth, we developed the new Digital Strategy 2020-2025. More than 1000 staff contributed to the development of the Strategy, sharing how existing clinical systems can provide better support and what ideas can be explored into the future.

A major focus of the strategy is to consider how frontline staff can access seamless, real-time, in-depth information on every patient in the District. In response to staff input, we are exploring ways to reduce duplication in record keeping. Making systems more mobile, providing better access to systems on the go and reducing the need for staff to log on and record patient notes at a desk are all being advanced, as well as how to take further advantage of telehealth by improving usability, accessibility and scheduling. These focuses, along with many others detailed in the strategy, will support frontline staff to provide even more innovative, safe and high-quality care to the diverse population served.

The District continued its investment in telehealth to ensure people living in its most remote communities have access to high-quality care. Telehealth can help remove the need for patients to travel long distances for face-to-face consultations. This is significant in the large area of the District where patients travel more than 20 million kilometres a year to access booked appointments and services.

The District’s commitment to technology and innovation is being rewarded with a whole range of new and improved service models not conceived of 10 years ago. This work, combined with the hard work and dedication of the 16,000 clinicians and support staff, is taking patient care into the modern age.

Our staff, volunteers, and community and consumer advocates have our thanks for making these achievements possible.

64% of staff had their say in the 2019 People Matter Employment Survey, the District’s highest ever response rate

Key achievements 2018-19

- Improved access to culturally appropriate podiatry services for Aboriginal people experiencing diabetes-related foot disease by employing the first Aboriginal health practitioner to the Healthy Deadly Feet Project based in Tamworth.
- Selected by the Ministry of Health to provide one of three new specialised intellectual disability health teams. The team will provide multidisciplinary assessments and develop care plans for people with intellectual disability and complex health needs to ensure they receive coordinated, high-quality healthcare.
- Implemented strategies to achieve a 20 per cent increase in the use of interpreter services by staff, improving care for the District’s large population of non-English speaking patients.
- Developed the Digital Strategy 2020-2025, which details how the District will use new and improved technology and software to enhance patient care in coming years.
- Implemented a new, four-week menu for aged care residents living in 10 multipurpose services as part of the My Food Choice program. The program, implemented in partnership with HealthShare NSW, is improving the quality, variety, choice of food and diet management for residents.
- Distributed toothbrushes, toothpaste and oral health information to children at 12 non-fluoridated rural schools. The initiative, in a partnership with HealthWISE, was aimed at improving oral health and oral health literacy in young people.
- Launched the Quality Improvement Data System in a significant step to reduce hospital-acquired complications. More than 800 staff are active users of the new system, enabling services to audit coding and input of information, understand common complications experienced by their patients and put strategies into place to reduce the incidence of hospital-acquired complications.
- Launched Australia’s first Hospital HealthPathways to support junior medical officers at John Hunter Hospital and John Hunter Children’s Hospital via an online, mobile-friendly website. The website currently provides 45 clinical pathways and 143 referral pages with information on clinical management, referral, discharge criteria and information for patients.
• Achieved a 40 per cent increase in alcohol consumption assessments performed during routine antenatal appointments at Newcastle, Tamworth, Gunnedah, Quirindi and Taree. This work led to the establishment of local referral pathways and increased referrals to services such as Drug and Alcohol and Aboriginal Medical Services.

• Developed an Adverse Childhood Experiences (ACE) Assessment Tool to strengthen clinical assessment of children and young people accessing specialised violence and neglect services. Adverse childhood experiences can be linked to poorer long-term health outcomes, and the ACE tool will assist clinicians in better assessing complex needs and decision-making towards intervention.

Demographic summary

Hunter New England Local Health District is located north of Sydney and spans from Morisset in the south to Tenterfield in the north, west to Boggabilla and to Mungindi on the Queensland border. The District provides healthcare services across a geographic area of 131,785 square kilometres or 16 per cent of the area of NSW. The catchment includes many small rural and remote communities as well as populous regional centres. The largest centre is Newcastle, which is NSW’s second largest city. The District spans almost 700 kilometres from north to south and approximately 500 kilometres from east to west.

Traditional custodians of the land covered by the District are the Kamilaroi, Gomilaroi, Geawegal, Bahttabah, Thungutti, Awabakal, Aniawan, Biripi, Worrimi, Nganyaywana, Wonnarua, Banbai, Ngoorabul, Bundjalung, Yallaroi and Darkinung nations.

 About 942,370 residents live within the District. Approximately 52,990 people of Aboriginal and Torres Strait Islander heritage make up 5.9 per cent of the population. About 169,800 residents, or 20 per cent of the District’s population, were born overseas. Approximately five per cent of residents in the District speak a language other than English. Recent arrivals are of Kurdish Kurmanji speakers from Iraq and Syria in Armidale, and refugees from the Democratic Republic of Congo, Tibet and Syria in the Newcastle region.

The District is experiencing an ageing of the population, with a notable increase in people aged 85 years and over. At the same time, some communities are seeing a growth in families and young people, particularly in the Hunter Valley, Newcastle, Port Stephens and Armidale areas. There is also a general movement of the population away from inland areas to the coast. However, while some communities such as Moree may be decreasing in overall population, the Aboriginal population is growing.

Over the next decade, the District’s population is expected to grow by eight per cent to 1,024,072 residents by 2029. The main health issues facing the District include stroke, cancer, gastrointestinal disease and kidney disease.

Sources:

Local government areas

Armidale Dumaresoq, Cessnock, Dungog, Glen Innes Severn, Gloucester, Great Lakes, Greater Taree, Gunnedah, Guyra, Gwydir, Inverell, Lake Macquarie, Liverpool Plains, Maitland, Moree Plains, Muswellbrook, Narrabri, Newcastle, Port Stephens, Singleton, Tamworth Regional, Tenterfield, Upper Hunter, Uralla, Walcha

Public hospitals

Tertiary referral hospitals: John Hunter (includes Royal Newcastle Centre), John Hunter Children’s Hospital, Calvary Mater Newcastle

Rural referral hospitals; Armidale, Maitland, Manning (Taree), Tamworth

District hospitals: Belmont, Cessnock, Glen Innes, Gloucester Soldiers Memorial, Gunnedah, Inverell, Kurri Kurri, Moree, Muswellbrook, Narrabri, Scott Memorial (Scone), Singleton

Community hospitals: Bulahdelah, Dungog, Quirindi, Tenterfield Hospital, Tomaree (Nelson Bay), Wee Waa, Wilson Memorial (Murrurundi), Wingham

Multipurpose services: Barraba, Bingara, Boggabri, Denman, Emmaville, Guyra, Manilla, Merriwa, Tingha, Walcha, Warralda and Werris Creek

Public Nursing Homes

Hillcrest Nursing Home (Gloucester), Kimbarra Lodge Hostel (Gloucester) and Wallsend Aged Care Facility

Community health centres

Armidale, Ashford, Barraba, Beresfield, Bingara, Boggabilla, Boggbri, Bulahdelah, Bundarra, Cessnock, Denman, Dungog, East Maitland, Emmaville, Forster, Glen Innes, Gloucester, Gunnedah, Guyra, Gwabegar, Harrington, Hawks Nest/Tea Gardens, Inverell, Kurri Kurri, Manilla, Merriwa, Moree, Munigindi, Murrurundi, Muswellbrook, Narrabri, Nelson Bay, Newcastle, Nundle, Pilliga, Premer, Quirindi, Raymond Terrace, Scone, Singleton, Tamworth, Taree, Tenterfield, Tingha, Toomelah, Toronto (Westlakes), Uralla, Walcha, Walhallow, Wallsend (Western Newcastle), Wariald, Wee Waa, Werris Creek, Windale (Eastlakes)

Child and family health services

Armidale, Anna Bay, Barraba, Belmont, Beresfield, Bingara, Boggabilla, Boggbri, Bundarra, Charlestown, Cessnock, Denman, East Maitland, Edgeworth, Glen Innes, Greta, Gunnedah, Guyra, Hamilton, Inverell, Kotara, Kurri Kurri, Mallabula, Manilla, Maryland, Medowie, Merriwa Morisset, Moree, Munigindi, Murrurundi, Muswellbrook, Narrabri, Newcastle, Old Bar, Quirindi, Raymond Terrace, Rutherford, Scone Singleton, Stockton, Stroud, Tamworth, Tenterfield, Tomaree, Toronto, Wallsend, Walcha, Waratah, Wariald, Wee Waa, Windale, Wingham
Oral health clinics
Armidale, Barraba, Beresfield, Cessnock, Forster, Glen Innes, Gunnedah, Inverell, Maitland, Moree, Muswellbrook, Narrabri, Nelson Bay, Newcastle, Raymond Terrace, Scone, Singleton, Stockton, Tamworth, Taree, Toronto, Tenterfield, Wallsend, Windale, Walcha

Third Schedule facilities
Calvary Mater Newcastle

Other services
Mental health facilities: Mater Mental Health Services (Waratah), James Fletcher (sub-acute), Morisset Hospital. Inpatient mental health services: Maitland, Tamworth, Manning, Armidale and John Hunter hospitals.
Lakeview Detoxification Service is located at Belmont Hospital.
Clinical networks: aged care and rehabilitation, children, young people and families, cancer, women’s health and maternity, mental health and drug and alcohol, critical care, chronic disease.

Chief Executive: Margot Mains
Margot Mains began her career as a nurse and held senior leadership roles in the health system in New Zealand and South Australia, before taking up the position of Chief Executive with the Illawarra Shoalhaven Local Health District in 2014. Ms Mains has extensive health executive leadership and management experience at hospital and District level, and is a member of the Illawarra Health and Medical Research Institute Board. She also holds a Bachelor of Laws.
Ms Mains has a strong focus on research and has led the District through a significant period of change, including leadership reform.

Year in review
Over the past 12 months Illawarra Shoalhaven Local Health District has seen unprecedented growth in demand. Our emergency departments treated an additional 7000 patients and the number of unplanned surgeries increased by almost 15 per cent on the previous year. This significant growth in our activity has driven much of the District’s focus on improving efficiencies so that we are able to deliver the highest
quality care, where it’s needed most. We commenced development of the District’s new Health Care Services Plan that will guide the delivery of services over the next decade. The Plan will outline our vision for an integrated health system in the Illawarra Shoalhaven region which supports people to stay healthy in their homes and communities.

The District also continued to plan and develop the region’s clinical infrastructure. The $37.1 million Bulli Aged Care Centre is under construction. A community-owned organisation will manage the residential aged care facility, investing $16.6 million in the facility to bring the total project cost to over $50 million.

In November 2018, Premier Gladys Berejiklian announced a $434 million upgrade of Shoalhaven Hospital, and preliminary planning for the significant redevelopment is now underway. Work also started on the construction of a $11.8 million car park at Shoalhaven, delivering 220 more parking spaces to meet current and future demand.

The past 12 months saw the District further develop key relationships that promote greater collaboration, and ultimately, improve health outcomes for our local communities. We contributed to the development of the first regional plan for Mental Health and Suicide Prevention, in partnership with Southern NSW Local Health District and the primary health network. The District also collaborated with stakeholders, including Aboriginal medical health services, on priority issues, including birthing on country and increasing the voice of Aboriginal people in decision-making and planning of health services. We developed the District’s first Consumer Engagement Framework, to provide better opportunities to connect with all of our patients, consumers, clients and carers.

We also worked to improve the overall experience for our patients by installing Wi-Fi at hospital sites and starting a significant infrastructure upgrade of the District’s internet platform to improve access to information by consumers and the community.

Overall, 2018-19 has been an incredibly busy period. The year ahead will see our District continue to build on plans for further improvements for delivering the highest quality services to the people of the Illawarra and Shoalhaven.

Our staff, volunteers, and community and consumer advocates have our thanks for making these achievements possible.

Achieved 47% improvement in surgery times for orthopaedic trauma (neck of femur) patients at Wollongong Hospital

Key achievements 2018-19

• Commenced planning and early works on two major hospital redevelopments. The $434 million upgrade of Shoalhaven Hospital will significantly improve services for people living on the South Coast. At Shellharbour Hospital, early works signalled the start of the facility’s redevelopment, which will include an expanded emergency department and increased medical and surgical capacity, including new operating theatres.

• Implemented a new 48-hour face-to-face follow-up program for discharged consumers at Illawarra community mental health service and achieved a first in Australia for providing seven-day follow-up.

• Achieved a major milestone in construction of the $50.4 million ($16.6 million invested by a community-owned organisation) Bulli Hospital and Aged Care Centre, which will create a centre of excellence focused on geriatric medicine. A ceremony was held to mark reaching the highest point of the building.

• Implemented an internationally recognised standard outcomes set for colorectal cancer, a first for the District. The framework, guided by the International Consortium of Health Outcomes Measurement, was presented at an international conference and received a nomination for both the NSW Health Awards and NSW Premier’s Awards.

• Achieved 100 per cent full immunisation coverage for Aboriginal children at five years of age and consistently exceeded 95 per cent vaccination coverage for all local children at five years.

• Developed the My Care Board for use in hospital inpatient wards in support of the clinical handover process. The new tool aims to facilitate better communication among consumers, carers and clinical teams to enable stronger shared decision-making.

• Implemented technologies to improve patient care and experience, including electronic medication records and patient and guest Wi-Fi, and completed the roll-out of the Electronic Record for Intensive Care (eRIC), with implementation at Shoalhaven Hospital.

• Developed the District’s first Consumer Engagement Framework to guide a robust and consistent approach to improved consumer interaction, feedback and connection with health services.

• Enabled further improvements in integrated care working alongside the primary health network (COORDINARE). This work included developing secure messaging capability between GPs and District services to enhance the integration of care.

• Developed a new pathway for disadvantaged local families to be referred to oral health services to improve their access and experience. An oral health waiting list redesign project was also launched to improve patient wait times. This halved the number of patients waiting for their assessment and reduced wait time for dentures from six to two months.
**Demographic summary**

The Illawarra Shoalhaven Local Health District covers four local government areas – Wollongong, Kiama, Shellharbour and Shoalhaven. The District provides healthcare services across a geographic region of approximately 5687 square kilometres, which extends along the coastline from Helensburgh to North Durras.

Traditional custodians of the land covered by the District are the Tharawal and Yuin nations. The area of these nations far exceeds District boundaries and the people of the traditional language groups within these nations include the Wadi, Tharawal, Wandandian, Walbanga and Yuin peoples.

About 409,692 residents live within the District. People of Aboriginal and Torres Strait Islander heritage make up 16,908 of the population, compared to 265,685 for all NSW. Culturally and linguistically diverse communities are also well represented in the Illawarra Shoalhaven, with approximately 12 per cent speaking a language other than English at home.

The District population is, on average, more disadvantaged than the NSW population, based on the composite socio-economic index (SEIFA) for local government areas, with the exception of Kiama. The District also has a higher proportion of people aged 75 years and older (12 per cent) when compared to the NSW average (9 per cent).

The main health issues in the District are cancer, cardiovascular disease, injury, mental illness, respiratory disease, chronic kidney disease, obesity, musculoskeletal disease, dementia, type 2 diabetes and chronic conditions. Aboriginal and Torres Strait Islander people experience a higher prevalence and earlier incidence of most chronic diseases, including cardiovascular disease, diabetes and kidney disease. People living in socio-economically disadvantaged areas of the District, in particular, the Shoalhaven Local Government Area, overall have a poorer health status than people living elsewhere in the District.

By 2031, the District’s population is expected to grow to over 455,000 people, placing increased demand on existing services. It is also projected that residents over 70 years of age will make up approximately 20 per cent of the population.

Sources:
1. PHIDU Social Atlas of Australia 2019
2. HealthStats accessed 2018
3. Ministry of Health HealthApp accessed 2019

**Local government areas**

Kiama, Shellharbour, Shoalhaven, Wollongong

**Public hospitals**

Coledale, Berry, Bulli, Wollongong, Port Kembla, Shellharbour, Milton-Ulladulla, Nowra

**Community health centres**

Bulli, Cringila, Culburra, Dapto, Kiama, Helensburgh, Jervis Bay, Nowra, St Georges Basin, Sussex Inlet, Ulladulla, Warilla, Wollongong, Wreck Bay

**Child and family health services**

Early childhood centres: Albion Park, Berkeley, Corrimal, Culburra, Dapto, Figtree, Flinders, Gerringong, Helensburgh, Kiama, North Wollongong, Nowra, Oak Flats, Shoalhaven Heads, St Georges Basin, Sussex Inlet, Thirroul, Ulladulla, Warilla, Warrawong (Anglican Church, outreach), Wollongong, Woonona

Child and family services: Port Kembla (Allied Health Services), Kids Cottage Warilla, Child Protection Counselling Service, Out of Home Care, Illawarra Shoalhaven Diagnostic and Assessment Service, Northern Family Care Centre (Woonona), Shoalhaven Child and Family Allied Health, Shoalhaven Child and Family Psychology, Shoalhaven Family Care Centre, Southern Family Care Centre (Berkeley), Sustaining NSW Families Program, Illawarra Prior to School Immunisation

Aboriginal maternal and infant health: Illawarra Aboriginal Maternal Infant Child Health Service, Jervis Bay Early Childhood Centre, Binji and Boori Aboriginal Maternal Infant Child Health Service Shoalhaven, Wreck Bay Community Health Centre

**Oral health clinics**

Kiama, Nowra, Port Kembla, Shellharbour, Ulladulla, Warilla Dental Clinic, Wollongong Dental Clinic (all include child dental clinic)

**Other services**

Clinical divisions and district-wide services: Aged care, rehabilitation and palliative care, ambulatory and primary healthcare, critical care, Cancer and Haematology Network, dental and oral health, Division of kids and families, Division of surgery, Division of medicine, including renal services, drug and alcohol, maternity services, mental health services, clinical support services, including pathology, radiology and nuclear medicine, pharmacy and allied health specialties

Integrated chronic disease management: Aboriginal Chronic Care Unit, Access and Referral Centre, Carer’s Program, Connecting Care Chronic Disease Program, Illawarra Shoalhaven Diabetes Service, HealthPathways Illawarra Shoalhaven, Regional Assessment Service, Transport for Health Service

Healthy People: Health improvement (health promotion, multicultural health, refugee health), healthcare interpreter service, Mental Health Homelessness Project, targeted clinical services (sexual health, women’s health, youth health), Violence Abuse and Neglect (VAN) Service, New Street Service, Youth Health and Homelessness Strategy

Ambulatory care: Asthma education service, continence service, palliative care, primary health nursing, speciality wound service

Other: BreastScreen (provided by South Eastern Sydney Local Health District), HIV/AIDS and related programs (South Eastern Sydney Local Health District hosted service)
Chief Executive: Stewart Dowrick

Stewart Dowrick began his career in healthcare administration at the then Children’s Hospital at Camperdown in 1989. He moved to the Central Coast Area Health Service in 1993 and the Mid North Coast Area Health Service in 1999. Since 2000, he has held numerous executive positions with the Mid North Coast and North Coast Area Health Service and was appointed Chief Executive at the beginning of 2011. Mr Dowrick has a particular interest in health service partnership and service partners working together. He has tertiary qualifications from the University of NSW, University of Newcastle and the Australian Institute of Company Directors.

Year in review

The Mid North Coast Local Health District continued to oversee large capital investment into health services on the mid north coast. The Port Macquarie Base Hospital mental health unit expansion was completed and work is well underway on the new Macksville District Hospital and the Coffs Harbour Health Campus redevelopment.

The District also expanded its allied health and child and family services within Bowraville, now offering a baby clinic, mental health services for both adults and youths, and drug and alcohol counselling. Aboriginal health staff continue to provide education and referrals to existing services at Bowraville, working very closely with other District teams and community-based organisations.

Australia’s leading early parenting service, Tresillian, in partnership with the District, expanded their specialist child and family health services in regional areas with Australia’s first regional Tresillian residential unit and a ‘Tresillian 2 U’ early parenting service van complementing the District’s existing maternity and child and family services.

Our strategy to increase our Aboriginal workforce (now at 5.24 per cent) has boosted our capacity to engage local communities in health challenges and solutions. In 2019, the District endorsed the Aboriginal Cultural Safety and Security Framework, which aims to improve the health outcomes of Aboriginal people in the mid north coast by allowing patients to feel safe and secure when accessing and using mainstream health services.

The mental health and multi-media teams produced the video Precious Michelle, which focuses on one family’s journey and the importance of involving consumers and carers in assessment and care planning. This video will be used as a national training tool and has been nominated for an award as part of the National Suicide Prevention Conference.

This year the District was a finalist in the 2018 NSW Health Awards for the innovative Traffic Signal Framework to Capacity Assessment. This Framework provides better outcomes for patients by reducing length of stay and healthcare costs through the elimination of unnecessary capacity testing and guardianship applications.

The District recognises the excellent work undertaken by the more than 4500 staff and volunteers who provide health and support services throughout the mid north coast community to improve the health outcomes of our patients, clients and staff. Without their dedication, none of these remarkable accomplishments would be possible.

An advanced form of radiation therapy (SABR) is now available to liver cancer patients, as an alternative to open surgery for the removal of small to moderately sized cancers.
Key achievements 2018-19

- Opened Stage 1 of the Port Macquarie Base Hospital mental health unit expansion.
- Implemented the People Matter Culture and Wellbeing Forum, which is made up of about 60 District employees from all occupations and sites, to collaborate together and with the Chief Executive, to improve culture and staff wellbeing in our District.
- Expanded allied health and child and family services within Bowraville.
- Developed the Precious Michelle video, a national training resource which is an award finalist at the 2019 National Suicide Prevention Conference.
- Expanded allied health and child and family services within Bowraville.
- Implemented the People Matter Culture and Wellbeing Forum, which is made up of about 60 District employees from all occupations and sites, to collaborate together and with the Chief Executive, to improve culture and staff wellbeing in our District.
- Expanded allied health and child and family services within Bowraville.
- Developed the Precious Michelle video, a national training resource which is an award finalist at the 2019 National Suicide Prevention Conference.
- Achieved 5.2 per cent Aboriginal workforce.
- Delivered Your Health Link National Photographic competition, promoting images that capture a ‘Healthy Life – Healthy You’.
- Implemented five new initiatives for Leading Better Value Care, including bronchiolitis (paediatric), hip fracture care, breast hyperfractionation, direct access colonoscopy and wound management.
- Presenting partner for 2019 Luminosity Youth Summit. Focusing on innovation, excellence and entrepreneurship, this summit supports the health and wellbeing of our young people and encourages our future leaders towards a career in the growing health sector.
- Opened the Maam Darruyaygamba Culture and Wellbeing Centre at Coffs Harbour Health Campus.

Demographic summary

Mid North Coast Local Health District extends from the Port Macquarie Hastings Local Government Area in the south to Coffs Harbour Local Government Area in the north and provides healthcare services across a geographic area of approximately 11,335 square kilometres.

Traditional custodians of the land covered by the District are the Gumbaynggirr, Dunghutti, Birpai and Nganyaywana nations.

It is estimated that more than 218,180 residents live within the District. People of Aboriginal and Torres Strait Islander heritage make up 5.7 per cent of the population, compared to 2.9 per cent for all NSW. An estimated 11 per cent of residents were born overseas. Coffs Harbour has a growing number of refugees settling in the area. The main refugee communities include Afghan, Sudanese, Burmese, Congolese, Togolese, Sierra Leone, Ethiopian, Eritrean and Somali. Smaller numbers of migrants also reside in Laurieton, Wauchope and Port Macquarie.

Over the next decade, the District’s population is expected to increase by 13 per cent. The largest increases are projected for the Coffs Harbour and Port Macquarie Hastings Local Government Areas. The main health issues facing the District are mental health illnesses and chronic age-related illnesses such as cardiac, pulmonary, diabetes and renal disease, and dementia. The Mid North Coast also has significant groups of disadvantaged people, including Aboriginal people and refugees, people on low incomes, and people living in small, isolated communities, all of whom are at risk of poorer health outcome behaviours and risk factors compared to the general population. These behaviours and risk factors include increasing overweight and obesity, low levels of physical activity, poor diet and smoking.


Local government areas

Coffs Harbour, Bellingen, Nambucca, Kempsey, Port Macquarie-Hastings

Public hospitals

Bellingen, Coffs Harbour, Dorrigo, Kempsey, Macksville, Port Macquarie, Wauchope

Public nursing homes

Dorrigo Residential Aged Care

Community health centres

Bellingen, Bowraville, Camden Haven, Coffs Harbour, Dorrigo, Kempsey, Macksville, Nambucca, Port Macquarie, South West Rocks, Wauchope, Woolgoolga

Child and family health services

There are no tertiary level facilities in the District, so these services are sourced from other partners. John Hunter Children’s Hospital is the tertiary facility for the District’s children’s services, with the exception of some services that are provided at Sydney and Westmead Children’s Hospitals.

Oral health clinics

Coffs Harbour, Kempsey, Laurieton, Nambucca, Port Macquarie, Wauchope

Other services

Aboriginal health, cancer services, drug and alcohol, mental health, public health, sexual health, violence, abuse, neglect
Chief Executive: Jill Ludford

As Chief Executive of the Murrumbidgee Local Health District, Jill Ludford is passionate about delivering rural healthcare that supports people to live the healthiest lives possible. Ms Ludford leads a team who deliver healthcare in more than 45 health facilities, with more than 3500 staff across almost 125,500 square kilometres in the Riverina Murray region. Ms Ludford has recognised the potential of information and communications technology to improve access to essential healthcare in rural communities, and is a strong advocate for NSW Health’s integrated digital clinical programs, including telehealth care and Electronic Medical Record (eMR) systems.

Ms Ludford has sponsored new models of patient-centred care and worked with clinicians on the redesign of hospital functions, all aimed at improving the patient experience. Another of Ms Ludford’s passions is staff engagement – working to create a flexible and dynamic working environment – so that the District is an employer of choice. Under her leadership, the District has introduced staff wellbeing programs and recognition awards and implemented strategies to recruit and retain medical and nursing workforces.

Ms Ludford has strong links with her regional community and has fostered partnerships with a wide range of stakeholders, including government and non-government organisations, Aboriginal services and tertiary institutions.

Year in review

Murrumbidgee Local Health District continues to strive forward as a leader in rural healthcare, whether on the frontline in patient care or behind the scenes in innovation and health support services.

More than 158,757 people were treated in hospitals and multipurpose services across the District. In addition, consumers received 779,880 service events in the community or through outpatient services.

The District’s vision for the region remains at the forefront: together in partnership the focus is on wellness, aspiration to excellence and continued investment in our people. In February 2019, the Our Communities, Our Future: Healthier Together blueprint was released to lead the organisation towards 2021.

The work of the District takes a whole of community perspective and captures feedback, stories and insights provided during consultations with communities and the workforce. Aligned with NSW Health priorities, the District is supporting people to improve their health and wellbeing, increasing the use of research and innovation, as well as building capability in staff to deliver great healthcare services.

The year has seen a growth in services across the region. Embracing telehealth, clinical teams are using digital platforms to reach patients in emergency departments, hospital and community settings and in their homes. The District has provided care to more patients presenting to emergency departments, and there has been a rise in admissions to hospitals and patients receiving emergency and elective surgery.

The District remains committed to broadening the use of innovation, research and partnerships, to anticipate challenges and take advantage of opportunities. This is reflected in the Murrumbidgee Edison Program, an initiative that supports our workforce to innovate. New ideas implemented through the Program include the highly successful Virtual Fracture Clinic and the Virtual Reality in Paediatrics project – reducing procedural anxiety and improving experience for paediatric patients.

The District made significant progress on infrastructure works in 2018-19, including progress on Stage 1 of the Griffith Base Hospital redevelopment, including the opening of a new temporary renal unit – Mungarr Ngurang the ‘Kidney Place’. The third and final stage of the Wagga Wagga Base Hospital redevelopment is underway and a number of multipurpose redevelopments are progressing or have been completed.

Our staff, volunteers, and community and consumer advocates have our thanks for making these achievements possible.
**The High Risk Foot Service in Wagga Wagga has seen more than 130 clients since opening in August 2018, with wait time to first appointment of less than five days**

**Key achievements 2018-19**

- Developed and implemented Our Communities, Our Future; Healthier Together, a three-year blueprint for leading the organisation towards 2021. Healthier Together provides a whole of community perspective and a foundation to support long-term initiatives.
- Achieved full accreditation for all four state government residential aged care facilities – Corowa Hospital, Murrumburrah, Harden Multipurpose Service, Leeton Hospital and Holbrook Multipurpose Service.
- Provided outcome-focused, patient-centred care, with the HOPE team providing a holistic experience for consumers with behavioural and psychological dementia. The multidisciplinary team combined their strengths and support systems to achieve consistent key performance indicators, best patient outcomes and family satisfaction.
- Implemented the successful pilot project for a Virtual Fracture Clinic, led by the physiotherapy team, at Temora Hospital. Due to the success of the pilot project, this initiative is being expanded to other sites in the District.
- Launched the Metabolic Clinic, the first public hospital service in regional NSW to provide access to weight loss management, providing eligible patients with support to prepare them for the next steps in accessing bariatric (weight loss) surgery.
- Held an inaugural Aboriginal Staff Networking Forum connecting 120 people, including District staff and community members, strengthening the District’s commitment to developing the Aboriginal and Torres Strait Islander workforce and fostering a culturally safe workplace.
- Successfully piloted the wellbeing and health nurse coordinator model at two Murrumbidgee sites (Young and Tumut), with a registered nurse providing a range of support and coordination to school students, to improve education, health and wellbeing outcomes for children, young people and families.
- Collaborated with Murrumbidgee Primary Health Network to develop the Farming Community Counselling Program (Farmgate) to provide free, local and friendly one-on-one support for farmers, farming families and the communities that rely on farming for their income.
- Implemented the electronic medication management system across 12 sites, providing electronic management for prescribing, monitoring and reference of patient medications.
- Collaborated with the University of NSW Training Hub to create a four-year rural GP training scheme in the Murrumbidgee region. The training scheme will grow the medical workforce for rural communities and hospitals.

**Demographic summary**

Murrumbidgee Local Health District spans 125,243 square kilometres across southern New South Wales, stretching from the Snowy Mountains in the east to the plains of Hillston in the northwest and along the Victorian border.

As the largest employer in the region, with more than 3500 healthcare staff working across 33 hospitals and 12 primary healthcare centres, we are supported by hundreds of volunteers who make an invaluable contribution to enriching the lives of people in our care.

Traditional custodians of the land covered by the District are the Wiradjuri, Yorta Yorta, Baraba Baraba, Wemba Wemba and Nari Nari peoples.

About 243,228 residents live within the District. People of Aboriginal and Torres Strait Islander heritage make up 4.8 per cent of the population. People in the District were mostly born in Australia (82.2 per cent in 2016) or were from English-speaking overseas countries (3.2 per cent in 2016). Only 5.3 per cent of the population were born in a predominantly non-English speaking country and 6.1 per cent speak a language other than English at home, compared to 21 per cent and 25.5 per cent in NSW respectively. Just over one per cent of the population had difficulty speaking English compared to 4.5 per cent in NSW.

The District’s population is ageing, with 19 per cent of the population older than 65 years. Life expectancy for males is 79.5 years and for females is 83.9 years.

Main mortality factors include cancer, circulatory disease, ischaemic heart disease, deaths from external causes and death from road traffic/transport injuries. Incidents of colorectal cancer, musculoskeletal disease, pancreatic cancer and arthritis are above the NSW and Australian average.

The main health issues facing the District are ongoing conditions such as chronic cardiac failure, diabetes and chronic obstructive pulmonary disease, as well as prostate, breast and other cancers. This is in line with the high prevalence of health risk factors such as tobacco smoking, overweight/obesity and risky alcohol consumption in the adult population.


**Local government areas**


**Public hospitals**

Hospitals: Albury, Cootamundra, Corowa, Deniliquin, Finley, Griffith, Hay, Henty, Holbrook, Leeton, Murrumburrah-Harden, Narrandera, Temora, Tumut, Wagga Wagga, West Wyalong, Young

Multipurpose services: Adelong-Batlow, Barham, Berrigan, Boorowa, Coolamon, Culcairn, Gundagai, Henty, Hillston, Jerilderie, Junee, Lake Cargelligo, Lockhart, Tocumwal, Tumbarumba, Urana
Public nursing homes
Carramar (Leeton), Norm Carroll Wing (Corowa), Harry Jarvis Wing (Holbrook), Murrumburrah-Harden

Community health centres
Albury, Cootamundra, Deniliquin, Griffith, Wagga Wagga

Child and family health services
Barham, Boorowa, Coleambally, Cootamundra, Corowa, Culcairn, Darlington Point, Deniliquin, Finley, Griffith, Harden-Murrumburrah, Hay, Henty, Hillston, Holbrook, Jerilderie, Junee, Lake Cargelligo, Leeton, Lockhart, Moama, Moulamein, Narrandera, Temora, The Rock, Toolebyuc, Tumbarumba, Tumut, Urana, Wagga Wagga, West Wyalong, Young. A home visit and outreach service is also provided.

Oral health clinics
Albury, Berrigan, Cootamundra, Deniliquin, Griffith, Hay, Hillston, Junee, Leeton, Temora, Tumbarumba, Tumut, Wagga Wagga, Young

Third Schedule facilities
Albury Mercy Care, Young Mercy Hospital

Other services
Aboriginal services, speech therapy, occupational therapy, physiotherapy, dietitian services, child protection counselling services, service pathways for victims of domestic and family violence, sexual assault services, genetic counselling, Wagga Wagga Mental Health Inpatient Service, South West Brain Injury Service

NEPEAN BLUE MOUNTAINS LOCAL HEALTH DISTRICT

Nepean Hospital
Derby Street
Penrith NSW 2750
PO Box 63
Penrith NSW 2751
Telephone: 4734 2000
Facsimile: 4734 3737
Email: NBMLHD-mail@health.nsw.gov.au
Website: www.nbmlhd.health.nsw.gov.au
Business hours: 8:30am-5pm, Monday to Friday

Chief Executive: Kay Hyman

Kay Hyman has led the Nepean Blue Mountains Local Health District as Chief Executive for more than eight years and has more than 20 years of health management experience in New Zealand. She has extensive experience and skills in strategic leadership, change management and service development.

Mrs Hyman works in partnership with the community, clinicians and the District Board towards her vision to provide extraordinary patient experience and a high-performing culture.

Year in review

In 2018-19, a continued focus on building a high-performing workplace and delivering innovative healthcare for our diverse community has seen a number of notable achievements for Nepean Blue Mountains Local Health District.
Our strong research profile saw us achieve a worldwide patent for HIST, a lifesaving diagnostic flu test, allowing us to commercialise its use in the USA, Japan, China, Europe and Australia. Our inaugural Together Achieving Better Health Conference brought health professionals together to benefit from an innovative program of high-profile speakers and thought leaders in the healthcare area.

To best address local and individual health needs, we redesigned models of care to keep consumers and carers at the core of decision-making. We are proud to be home to a NSW first with the introduction of a Mental Health Consumer and Carer Council Charter, making consumers and carers true partners in mental health care delivery. Our immunisation rates across the District continued to keep our community healthy, with 99 per cent of Aboriginal children, and 95 per cent of non-Aboriginal children fully immunised at four years of age.

To help address the obesity epidemic, we also worked with a collaborative network of researchers, health professionals, and government and private sector representatives. The District is pioneering strategies to manage obesity through a collective plan of action with the Charles Perkins Centre and the University of Sydney, via the Obesity Collective and Obesity Node. Our commitment to grow a skilled Aboriginal workforce saw various programs continue, including the Koori Kids Futures work experience program and workforce saw various programs continue, including the Koori Kids Futures work experience program and our Aboriginal Traineeship Strategy. In 2018-19, 22 local high school students participated in our Koori Kids program, and another five Aboriginal traineeships were provided. With the highest percentage of Aboriginal people of the metropolitan local health districts, it is hoped that these programs will have long-term health and employment benefits for the broader Aboriginal community. To provide the best possible patient experience in our hospitals, we introduced patient experience managers to our busy emergency department at Nepean Hospital.

Our staff dedication to providing quality care was recognised when a Community Health Nurse, Ms Rachel Scobie, won the Excellence in Aboriginal and Torres Strait Islander Healthcare Award at the 2018 NSW Excellence in Nursing and Midwifery Awards. We also are proud to receive accreditation with merit for partnering with consumers and research governance in our organisation-wide survey by the Australian Council on Healthcare Standards.

We thank our staff for their tireless work and commitment.

**Key achievements 2018-19**

- Launched the Obesity Collective and Obesity Node and held an Obesity Summit (a Sydney Ideas event) at the Charles Perkins Centre Nepean in 2018, to discuss the topic ‘Let’s talk about shame and blame in obesity.’
- Supported immunisation across the District to achieve vaccination rates of 99 per cent of Aboriginal children, and 95 per cent of non-Aboriginal children being fully immunised at four years of age (Oct-Dec 2018).
- Implemented a pilot program introducing two patient experience managers into the Nepean Hospital emergency department waiting room to help improve the patient experience.
- Upgraded Nepean Hospital to increase security measures and provide a larger sub-acute area and waiting room. Blue Mountains Hospital emergency department was also upgraded with a new separate children’s area, reception, triage and waiting room.
- Developed and launched a NSW first Mental Health Consumer and Carer Council Charter.
- A Community Health Nurse, Ms Rachel Scobie, received the Excellence in Aboriginal and Torres Strait Islander Healthcare Award at the 2018 NSW Excellence in Nursing and Midwifery Awards.
- Continued our Aboriginal Workforce Strategy, implementing the Koori Kids program for 22 students and offering five Aboriginal traineeships to build our Aboriginal workforce.
- Achieved accreditation by the Australian Council on Healthcare Standards until 2022. Standards met with merit included partnering with consumers and research governance.
- Hosted the inaugural Together Achieving Better Health Conference in November 2018. The conference was held over three days, attracting a number of high-profile speakers and more than 250 attendees.
- Achieved a worldwide patent for our ground-breaking HIST (flu test), allowing us to commercialise its use in the USA, Japan, China, Europe and Australia.

**Demographic summary**

The Nepean Blue Mountains Local Health District is located in Sydney’s greater west and consists of both urban and semi-rural areas. The District provides healthcare services across a geographic area of approximately 9179 square kilometres.

Traditional custodians of the land covered by the District are the Darug, Gundungarra and Wiradjuri people.

Approximately 379,000 residents live within the District. People of Aboriginal and Torres Strait Islander heritage make up 11,800 or approximately 3.1 per cent of the population. People from culturally and linguistically diverse communities make up around 29 per cent of the population, with the most frequently reported countries of birth being the United Kingdom, New Zealand, Germany, Netherlands, Philippines, India, Malta and the USA.
Around 5000 births to residents are recorded each year and life expectancy at birth is 79.7 years for males and 84.6 years for females. Within the District, more than 64 per cent of residents aged 16 or over are overweight or obese and almost a quarter of local children are estimated to be overweight or obese. There are also high rates of smoking and diabetes within the population.

A 24 per cent population growth across the District is expected from 2016 to 2036. This will lead to an increased demand for services. The main health issues facing the District are an increasing and ageing population that will bring new and unique challenges in healthcare planning, service delivery and access to specialised care, and the rates of overweight and obesity across the lifespan.

Around 78 per cent of District staff, totalling more than 6000, live in the area.

Source: 1 Department of Planning and Environment – NSW and Local Government Area Population Projections 2016

Local government areas
Penrith, Blue Mountains, Lithgow, Hawkesbury

Public hospitals
Nepean, Blue Mountains, Springwood, Lithgow, Hawkesbury (for public patients, operated under contract with Hawkesbury District Health Service and St John of God Health Care)

Public nursing homes
Portland Tabulam Health Centre

Community health centres
Cranebrook, Katoomba, Lawson, Lemongrove, Lithgow, Penrith, Springwood, St Clair, St Marys

Child and family health services
Cranebrook, Katoomba, Lawson, Lemongrove, Lithgow, Penrith, Springwood, St Clair, St Marys

Oral health clinics
Hawkesbury, Katoomba, Nepean, Springwood, Lithgow

Third Schedule facilities
Tresillian Centre Nepean

Other services
Nepean Cancer Care Centre, palliative care and support services, drug and alcohol services, mental health services, Centre for Population Health, primary care and community health, Public Health Unit, sexual health

NORTHERN NSW LOCAL HEALTH DISTRICT
Crawford House, Hunter Street
Lismore NSW 2480
Locked Mail Bag 11
Lismore NSW 2480
Telephone: 6620 2100
Facsimile: 6621 7088
Website: www.nnswhlhd.health.nsw.gov.au
Business hours: 8.30am-5pm, Monday to Friday

Chief Executive: Wayne Jones
Wayne Jones started in health more than 30 years ago, undertaking his generalist nursing training in Western Sydney. In the following 10 years, he gained multiple postgraduate nursing and management qualifications in areas including intensive care, cardiology and Bachelor of Health Management. Mr Jones progressed into a variety of nursing and general management roles, and came to Northern NSW in 2000 as Executive Officer of Lismore Base Hospital. Prior to his appointment as Chief Executive in May 2016, Mr Jones held a number of roles within the health service, including Manager of Planning, Director of Clinical Streams and Chief of Staff.

Year in review
Throughout 2018-19, Northern NSW Local Health District experienced increased hospital activity, with emergency department presentations 3.1 per cent above the previous year. October to December 2018 was the busiest quarter on record for the District, with 4.7 percent (or 2489) more presentations than the same quarter in 2017. The District had an end-year result of 79.4 per cent of patients presenting to emergency departments being managed within four hours.
Elective surgery admissions for the year were ahead of target by 6.3 per cent, and the District met the elective surgery access performance target for category 1. The District was below target for category 2 with 94 per cent and category 3 with 92 per cent against targets of 97 per cent.

The first BIG IDEAS innovation challenge was held in February 2019, part of a new program to foster change and innovation from the ground up. Eight staff-led projects were selected, and are now in various stages of implementation.

Work progressed on a suite of infrastructure projects to future-proof healthcare in the District. A satellite renal unit opened at Murwillumbah District Hospital in September 2018 and the new Bonalbo Multipurpose Service opened in December 2018.

In April 2019, the first sods were turned on the new Evans Head HealthOne and the new Ambulatory Care Centre at Grafton Base Hospital, while the Lismore Base Hospital redevelopment continued with the north tower reaching its zenith. Early construction works commenced on the new Tweed Valley Hospital site in Kingscliff, following Stage 1 State Signification Development consent being granted in June 2019, which approved the concept proposal and early works to prepare the site for the hospital buildings.

The District successfully implemented the Electronic Medication Management (eMeds) program in nine facilities, transitioning to it through each patient’s Electronic Medical Record (eMR), training 3115 staff members, and ensuring safe work practices and patient care.

The District continued to work on improving the experience of patients in our care, with a notable example being the Improving the Patient Experience pilot program at Lismore Base Hospital emergency department. Overall patient experience index across the District reached 8.9 in December 2018, above the target of 8.5, while the patient engagement index was also above target at 8.6. When surveyed between January and March 2019, 80 per cent of mental health consumer respondents rated their care as very good or excellent, a significant improvement on the previous quarter.

Independent reporting revealed that patients across the District continue to rate our staff and facilities very highly, whether in outpatient cancer clinics, emergency departments, inpatient units or the maternity setting. We thank our staff for their tireless work and commitment.

---

**Implemented domestic violence screening in emergency departments, providing tailored psychosocial support**

---

**Key achievements 2018-19**

- Launched the Emerging Leaders Program to ensure we have well-trained and prepared clinical, education, managerial and research leaders into the future. The District’s Nursing and Midwifery Service developed and launched the Emerging Leaders Program in early 2019. The 12-month program aims to enhance the knowledge and skills of nursing and midwifery professionals who aspire to become leaders in their field.

- Embedded the Integrated Aboriginal Chronic Care program to create a single point of access to all local Aboriginal chronic disease management programs. The program was developed through collaboration between key stakeholders, including Aboriginal people, the North Coast Primary Health Network, Aboriginal medical services and general practitioners. It removes duplication of services, streamlines the patient journey and provides a better patient experience, and was runner up in the District Quality Awards, highly commended in the 2019 Agency for Clinical Innovation Awards. It has received close to 600 referrals in two years.

- Implemented routine domestic violence screening in emergency departments across the District following a successful pilot in 2017 in Lismore. A screening tool built into the local eMR is also being trialled, reducing the time required for screening and making the process easier.

- Increased BreastScreen NSW North Coast participation rates for women aged 50-74 from 57.6 per cent in 2017-18 to 58.6 per cent in 2018-19. The service also exceeded the screening target set by the Cancer Institute NSW by 1701 participants, the second highest participation rate in NSW. The Aboriginal participation rate also improved from 48.5 per cent to 49.9 per cent over the same period.

- Implemented the Improving the Patient Experience in the Emergency Department pilot at Lismore Base Hospital. Patients reported high levels of satisfaction during the pilot.

- Launched our new Community Engagement Framework to increase community participation in the health service. The Framework was developed with input from community members, staff and the District Board. The Framework includes seven new community advisory groups across the District footprint and a new peak advisory council to oversee engagement across the region.

- Launched the BIG IDEAS challenge to foster innovation and change from the ground up. The winning projects are now in various stages of implementation, and a second round of applications will be held later in 2019.

- Reduced seclusion rates in Lismore Base Hospital emergency department through improved risk assessments and new bed allocation practices. A new framework was developed based on the principles of patient-centred care.
- Increased the use of the Clinical Excellence Commission’s Last Days of Life Toolkit resulting in increased use of medication management plans within the last 24-72 hours of life, an increase in the number of documented Advance Care Directives and an increase in the number of advance care plans.
- Launched research findings from a collaborative study into the effectiveness of Child-At-Risk Electronic Medical Record alerts being used throughout the District.

Demographic summary

Northern NSW Local Health District is located in north eastern NSW, extending from Tweed Heads in the north, to Tabulam and Urbenville in the west and Nymboida and Grafton in the south. It provides healthcare services across a geographic area of approximately 20,732 square kilometres.

The Bundjalung, Githabul, Gumbaynggirr and Yaegl Nations are the traditional custodians of the land covered by the District.

Over 300,000 residents live within the District. People of Aboriginal and Torres Strait Islander heritage make up 4.5 per cent of the population, compared to 2.9 per cent for all NSW. The District has fewer culturally and linguistically diverse residents compared with NSW as a whole, many of whom live in the Byron and Tweed Local Government Areas.¹

The year saw a continued increase in the proportion of residents aged 65 years or older who make use of more acute health services due to chronic and complex conditions, dementia and fractures as a result of falls.

Four key demographic features will affect the health status of residents and the demand for healthcare services into the future. These include:

- significant population growth – the District’s population is projected to grow by eight per cent over the next decade²
- large and growing aged population – the District’s population aged 65 years or older is projected to increase by 33 per cent to 86,370 people in 2026. The number of residents aged 85 years or older in this cohort is significant¹
- socioeconomically disadvantaged areas – five out of seven local government areas in the District are more disadvantaged than the NSW average³
- a high proportion of Aboriginal residents.

Local government areas

Ballina, Byron, Clarence Valley, Kyogle, Lismore, Richmond Valley, Tenterfield (part), Tweed

Public hospitals

Hospitals: Ballina, Byron, Casino, Grafton, Lismore, Maclean, Murwillumbah, Tweed Heads

Multipurpose services: Bonalbo, Kyogle, Nimbin, Urbenville

Community health centres

Alstonville, Ballina, Banora Point, Bonalbo, Byron Bay, Casino, Coraki Campbell HealthOne, Evans Head, Grafton, Iluka, Kingscliff, Kyogle, Lismore, Maclean, Murwillumbah, Nimbin, Pottsville HealthOne, Tweed Heads, Urbenville, Yamba

Child and family health services

Ballina, Byron Bay, Casino, Goonellabah, Grafton, Maclean, Tweed Heads, Yamba

Oral health clinics

Ballina, Byron Bay, Casino, Coraki, Goonellabah, Grafton, Nimbin, Pottsville, Tweed Heads, Yamba

Other services

Aboriginal health, BreastScreen, cancer services, aged care, rehabilitation, public health, mental health and drug and alcohol, sexual health, sexual assault, women’s health, radiology and interventional radiology

Sources:

Chief Executive: Deb Willcox

Deb Willcox became Chief Executive of Northern Sydney Local Health District in November 2017. Her career has included roles in both government and non-government organisations, and her experience spans clinical, corporate services, government departments, the research environment and senior government advisor roles.

Ms Willcox has held a number of senior executive and leadership positions within NSW Health, including Director of Operations, Sydney Local Health District, General Manager, Royal Prince Alfred Hospital, Director Customer Service and Corporate Governance, HealthShare NSW and Director Executive and Ministerial Services, NSW Ministry of Health.

Year in review

It was a historic year for Northern Sydney Local Health District with the reconfiguration of health services on the northern beaches. In a major logistical exercise, staff safely transferred 105 patients from Manly and Mona Vale hospitals to the new Northern Beaches Hospital. It was the end of an era for the staff and community of Manly Hospital, which closed with future plans for an adolescent and young adult hospice on the site. For Mona Vale Hospital it marked a new era of providing urgent care, rehabilitation, aged care and palliative care. Almost 700 staff transferred to the new hospital, enabling them to take their values and commitment to patient care to new state-of-the-art facilities.

Mona Vale Hospital’s transformation continued. The Urgent Care Centre has been refurbished and a 10-bed inpatient drug and alcohol unit constructed. Construction also began on a $10 million 10-bed palliative care unit and 10-bed geriatric evaluation and management building.

Work on the $320 million redevelopment of Hornsby Hospital continued, with an additional $65 million announced in the state budget, along with $479 million announced for the redevelopment of Ryde Hospital.

Together with significant capital investment, the government has invested to enhance the Electronic Medical Record system (eMR), including rolling out Electronic Medication Management (eMeds) at all hospitals, the MOSAIQ oncology management information system and Electronic Record for Intensive Care (eRIC) – the eMR for our intensive care units. These enhancements will make a significant contribution to safer, seamless care for patients.

Staff are the District’s greatest asset and by building on an excellent workforce culture, great care is ensured for patients. The District’s Innovation Program provides an opportunity for staff to showcase their collaborative improvement efforts. The Speak Up For Safety initiative, launched this year, empowers staff to respectfully raise safety and quality concerns when they arise. Our Junior Medical Officer Wellbeing initiatives are designed and implemented to enhance the working environment of our junior medical officers, and our Exceptional People Awards provide an opportunity to acknowledge the incredible achievements of our staff, teams and volunteers.

I would like to thank the staff for their steadfast commitment to providing high-quality patient care, our volunteers for the support and generosity they provide, and our partners and supporters for all of our great achievements.

Trained 1054 staff for eMeds go-live at Hornsby and Macquarie Hospitals
Key achievements 2018-19

• Transferred almost 700 staff and 105 patients from Manly and Mona Vale hospitals to the new Northern Beaches Hospital, which opened at the end of October 2018.
• Implemented eMeds across all Northern Sydney Local Health District hospitals, to provide electronic management of prescribing and dispensing, which links with each patient’s eMR.
• Launched the Speak Up For Safety program at Royal North Shore Hospital to build on the culture of providing safe and high-quality healthcare and empower staff to respectfully raise any safety and quality concerns should they arise.
• Launched the second Carers Strategy 2018-2023 that will see initiatives such as a patient’s status as a carer being listed on their medical records.
• Continued transformation of Mona Vale Hospital Construction began on a 10-bed palliative care unit and a 10-bed geriatric evaluation and management building. The refurbishment of the Urgent Care Centre was completed, along with construction of a new 10-bed inpatient drug and alcohol rehabilitation unit.
• Launched the PJ Paralysis initiative at Ryde Hospital, aimed at getting patients up, dressed and moving, to improve patient experience and outcomes.
• Recruited eight carer peer workers to use their lived experience of caring, and their peer work skills, to improve the delivery of mental health drug and alcohol services. The carer peer workers provide representative input through collaborative policy development, committee activities, research, education and training within a non-clinical role.
• Launched the Discharge Collective Program at Royal North Shore Hospital, designed to improve access to care and to support a culture of improvement. The project resulted in a 10 per cent increase in patients being discharged before midday across all eight wards and an overall reduction in length of stay of 0.35 days.
• Launched the Simply RRED patient safety program at Hornsby Ku-ring-gai Hospital. The program is designed by emergency department doctors and nurses to formalise the clinical review process of deteriorating patients.
• Held the first forum to provide foster carers with the latest academic research on child development and specific strategies to support foster children in the first 2000 days of life. The forum was held at the Child, Youth and Family Health Dalwood Spilstead Centre.

Demographic summary

Northern Sydney Local Health District is located between Sydney Harbour and the Hawkesbury River and provides healthcare services across a geographic area of approximately 900 square kilometres.

Traditional custodians of the land covered by the District are the Gai-mariagal, Guringai and Dharug Aboriginal nations.

According to the 2016 Census, the usual population of the District was 883,119 people. Of these, 25.8 per cent (227,445) of residents were born in non-English speaking countries, with the same proportion speaking a language other than English at home. The Aboriginal and Torres Strait Islander population accounted for 0.4 per cent (3425) of the population, an increase of 0.1 per cent from 2011.

The government estimates that the District population has now reached more than 943,908 residents. Between 2019 and 2029, the population is expected to grow by 11 per cent to over one million people, with high rates of growth of people aged 70 and over.

The District is characterised by low average disadvantage rates and high levels of private health insurance compared with the rest of NSW, but with higher disadvantage in some areas and relatively high rates of people living alone. Generally, health risk factors and the standardised mortality rates are lower than the state average. However, the District has a higher mortality rate for stroke than the NSW average.

Source: 1. 2016 NSW State and Local Government Area Population Projections

Local government areas

Hornsby, Hunters Hill, Ku-ring-gai, Lane Cove, Mosman, North Sydney, Northern Beaches, Parramatta (part), Ryde, Willoughby

Public hospitals

Royal North Shore, Ryde, Mona Vale, Hornsby Ku-ring-gai, Macquarie, Northern Beaches (public health services purchased by Northern Sydney Local Health District from the private operator of the hospital)

Community health centres

Berowra, Brooklyn, Brookvale, Chatswood, Cremorne, Dalwood, Galston, Hillview, Mona Vale, Pennant Hills, Royal North Shore, Ryde (mental health), Top Ryde, Wahroonga (rehabilitation), Wiseman’s Ferry

Child and family health services

Avalon, Balgowlah, Berowra, Brooklyn, Brookvale, Chatswood, Cremorne, Crows Nest, Frenchs Forest, Galston, Hornsby, Lane Cove, Marsfield, Mona Vale, Pennant Hills, St Ives, Top Ryde and West Ryde

Oral health clinics

Brookvale Community Health Centre, Cox’s Road (Macquarie Hospital, North Ryde), Hornsby Hospital, Mona Vale Hospital, Royal North Shore Community Health Centre, Top Ryde

Third Schedule facilities

HammondCare (Greenwich), Neringah Hospitals, Royal Rehab

Other services

Under a long-term contract, Northern Beaches Hospital provides public health services purchased by Northern Sydney Local Health District from the private operator of the hospital. Twenty non-government health organisations have a formal relationship with Northern Sydney Local Health District through a grants program.
Chief Executive: Tobi Wilson (from April 2019)
Tobi Wilson was appointed Chief Executive, South Eastern Sydney Local Health District, in April 2019. He previously held senior executive roles within the NSW, South Australian and Victorian health systems. He started his career as a physiotherapist and holds a Master of Health Service Management.

Mr Wilson is committed to change in health service delivery into the future, transitioning care closer to the patient’s home and improving the wellbeing of the community through innovative use of technology. He is an advocate for empowering local decision-making and ensuring patients and their families are engaged in developing healthcare services.

Acting Chief Executive: David Pearce (from September 2018 until April 2019)
David Pearce was Acting Chief Executive, South Eastern Sydney Local Health District, from September 2018 until April 2019.

Chief Executive: Gerry Marr (until August 2018)
Gerry Marr was Chief Executive, South Eastern Sydney Local Health District, from February 2014 until August 2018.

Year in review
The 2018-19 financial year was a period of success for South Eastern Sydney Local Health District, as we continued our transformation through the Journey to Excellence Strategy 2018-2021.

The District’s focus is to provide quality, safe healthcare services and to make sure we care for and support people in or close to their homes, so they can stay as independent as possible, for as long as possible.

In line with one of the District’s priorities – safe, person-centred and integrated care – an innovative new model of care named the Rapid Assessment, Diagnosis and Intervention Unit Sutherland – was launched at Sutherland Hospital. This community-facing unit provides complex medical patients an alternative to presenting to the emergency department, with rapid assessment and intervention.

The community hub at Lexington Place, Maroubra, opened its doors to provide free support to locals across a range of services, including health, housing, social and family support. The Hub@Lexo recognises that creating health and wellbeing in the community requires appropriate partnerships between many organisations.

The District has taken a significant step to recognise and act on climate risk, launching its Environmental Sustainability Plan 2019-2021. The plan acknowledges that climate change is a public health challenge and sets out an ambitious agenda to address the District’s climate risk, improve health, and save money and carbon emissions.

The opening of new services was celebrated across the District in 2018-19, including the opening of the $16 million refurbished Cancer Care Centre at St George Hospital, the launch of Kirketon Road Centre’s open clinic on Crown Street, Surry Hills, and the opening of a publicly funded homebirth service at the Royal Hospital for Women.

Significant progress has been achieved across the District with planned capital works projects, including:

- progress on the $720 million capital works project underway at the Randwick hospitals’ campus. Due for completion in 2022, the Randwick campus will be a world-leading centre for health and wellbeing, research, education and teaching
- a NSW Government announcement of $385 million for a major upgrade of St George Hospital
- a NSW Government announcement of $81.5 million for eight new operating theatres and two endoscopy units at Sutherland Hospital.

South Eastern Sydney Local Health District performance and flow teams have been working collaboratively to plan and strategically implement innovative performance improvement work. With the assistance of predictive analytics, analytics software and clinical dashboards, we have made significant improvements in both process and results. We have also developed a strong focus on our patient’s journey through patient flow strategies and transport projects.
In the 2018-19 reporting period the District treated three per cent (7170) more emergency patients than in the previous year, bringing the total number of emergency department presentations to 235,398. There were 71,037 patients admitted to hospital and 7525 babies born. The District performed 4459 more surgical cases in the 2018-19 reporting period than in the previous year, with 95.2 per cent of all theatre cases carried out on time. It has been a year of outstanding achievements. Thank you to staff, volunteers and consumer representatives for their commitment and hard work to ensure the District continues to provide quality, safe healthcare to our communities.

Delivered integrated healthcare to 300 people each week at the Maroubra Community Hub

Key achievements 2018-19

• Introduced the Midwifery Antenatal and Postnatal Service at The Royal Hospital for Women. This new model of care allows women to access continuity of midwifery care during their pregnancy and postnatal period.
• Opened a community hub at Maroubra to deliver integrated health, social care and wellbeing programs to keep people healthy and improve outcomes for disadvantaged communities in the local area.
• Opened the Rapid Assessment Diagnostic Interventional Unit Sutherland, the first model of its kind in NSW. This model of care is structured on a combination of inpatient general medicine and an emergency department avoidance referral system from GPs and community services and includes a day assessment unit and outpatient clinics.
• Introduced a multidisciplinary Safety Huddle at St George Hospital, to be held within 24 hours of a critical incident to discuss the incident, confirm the severity assessment code and develop a plan to address the immediate needs of the affected family.
• Reduced seclusion rates to below the NSW target through the Mental Health Safety Program.
• Developed the Take Home Naloxone Project to reduce overdose-related deaths and deliver interventions to people at high risk of opioid overdose. This resulted in 10 per cent of clients reporting successful overdose reversals in the first three-month period.
• Developed an online professional development framework for clinical nurse and midwife educators to provide structure and guidance for clinical knowledge, skill and professional development. This resource promotes lifelong learning and aligns to the priority of building the capacity and capability of our workforce.
• Introduced the Mental Health First Aid Project to provide greater assistance to junior doctors in need of psychological or mental health intervention or support. The project also assists managerial staff to identify a junior doctor in need of support.
• Launched gold level improvement training for staff, completing the District’s three-tiered improvement education program. Graduates will be a resource for their service and will support the District in ongoing development of programs through the Improvement Academy.
• Partnered with the University of NSW to secure a $250 million investment in a health translation hub at the Randwick Health and Education Precinct. The hub will deliver state-of-the-art education, training and research rooms and expand ambulatory care clinics in fields such as neuroscience, public and population health.

Demographic summary

South Eastern Sydney Local Health District covers an area from Sydney’s central business district in the north to the Royal National Park in the south and provides healthcare services across a geographic area of about 468 square kilometres. The District also assists the residents of Lord Howe and Norfolk Islands with access to hospital and health services.

Traditional custodians of the lands within the District include the Dharawal, Gadigal, Wangai, Gweagal and Bidjigal peoples.

In 2019, an estimated 947,829 residents live within the District. People of Aboriginal and Torres Strait Islander heritage make up approximately 1 per cent (8724 in 2016) of the population, compared with 3 per cent of the NSW population. The District supports a growing culturally and linguistically diverse population. About 52 per cent of Georges River and Bayside Local Government Area residents were born overseas (compared with 34.5 per cent for NSW), with the largest group born in China. More than 50 per cent of these residents speak a language other than English at home, with Chinese languages being the most common non-English languages. Conversely, residents of the Sutherland Shire are less ethnically diverse than the rest of NSW, with 77.7 per cent born in Australia and 83.1 per cent speaking only English at home.

The population is expected to grow by 1.2 per cent per year (to 2031) with the greatest growth rate expected in older age groups. The growing aged population will result in a steadily increasing demand for health and social care, as older people are proportionally higher users of health services. Much of this will relate to long-term conditions such as diabetes, hypertension, cancer, musculoskeletal impairment and dementia. In the District, 37 per cent of people reported having a long-term health condition and 21 per cent of the population live with multi-morbidities, increasing to 82 per cent for those aged 85 and older.

While residents of the District are among the healthiest in NSW and despite relatively high standards of health and social care, not all residents fare equally well in terms of their health, wellbeing and longevity. There is marked variation between various sub group populations across our District in terms of risk factors and their outcomes.
The District’s population is expected to increase to about 1,071,930 people by 2031. Our population is increasingly multicultural, growing and ageing, with an associated increase in people living with long-term conditions across all age groups. Core consumers of health resources will continue to be people with long-term conditions, including people with multiple long-term conditions and mental health problems. The demand of health services is also influenced by other factors such as carer availability, social isolation and aged care places.

Local government areas
Bayside, City of Sydney (part), Georges River, Randwick, Sutherland Shire, Waverley, Woollahra

Public hospitals
Gower Wilson Multipurpose Service (Lord Howe Island), Prince of Wales Hospital and Health Services, Royal Hospital for Women, St George Hospital and Health Services, Sutherland Hospital and Health Services, Sydney/Sydney Eye Hospital and Health Services

Public nursing home
Garrawarra Centre

Community health centres
Caringbah (at Sutherland Hospital), Engadine, Maroubra, Menai, Randwick (at Prince of Wales Hospital), Rockdale

Child and family health services
Arncliffe, Brighton, Caringbah, Cronulla, Engadine, Gymea, Hurstville, Hurstville South, Kingsgrove, Kogarah, Menai, Miranda, Oatley, Possum Cottage (at Sutherland Hospital), Ramsgate, Riverwood, Rockdale, Sutherland

Oral health clinics
Daceyville, Hurstville, La Perouse, Menai, Randwick (managed by Prince of Wales Hospital), Rockdale, Surry Hills and Sutherland

Third Schedule facilities
Calvary Health Care Sydney, War Memorial Hospital Waverley

Other services
Aboriginal community health (La Perouse), breast screening (Miranda), community mental health (Bondi Junction, Hurstville, Kogarah – Kirk Place, Maroubra Junction), dementia respite care and rehabilitation (Randwick – Annabel House), HIV/AIDS and related programs (Alexandria, Darlinghurst, Surry Hills - Albion Street Centre), disability services (Kogarah), community aged care and rehabilitation (Southcare – Sutherland Hospital), sexual health, youth, drug and alcohol (Darlinghurst – Kirketon Road Clinic), drug and alcohol (Surry Hills – Langton Centre)

Source: HealthStats NSW, Public Health Information Development Unit, Social Health Atlas of Australia, Department of Planning and Environment New South Wales State and Local Government Area Population Projections

**SOUTH WESTERN SYDNEY LOCAL HEALTH DISTRICT**
Liverpool Hospital (Eastern Campus)
Corner of Lachlan and Hart Streets
Liverpool NSW 2170
Locked Bag 7279
Liverpool BC NSW 1871
Telephone: 8738 6000
Facsimile: 8738 6001
Email: SWSLHD-ESU@health.nsw.gov.au
Website: www.swsldh.nsw.gov.au
Business hours: 8.30am-5pm, Monday to Friday

Chief Executive: Amanda Larkin
Amanda Larkin has more than 25 years of experience in health service management, a Bachelor of Social Work and an Associate Diploma in Environmental Service.
She leads more than 15,000 staff and her extensive experience in health management and passion to further develop health and education precincts across the District, places south western Sydney at the forefront of world-class healthcare.
Ms Larkin serves as a board member of the Ingham Institute of Applied Medical Research, South Western Sydney Primary Health Network and Health Infrastructure.
Year in review

It has been fantastic year for South Western Sydney Local Health District, as we build on our delivery of high-quality, safe care. A once-in-a-lifetime commitment of a $2.7 billion capital investment in our hospitals, together with our Transforming Your Experience strategy, has paved the way for us to build the future of health.

Programs such as executive rounding are improving how our leaders listen to staff and how we can better support them. The My Experience Matters Survey, a real-time feedback patient survey, has received more than 4000 replies, helping us to identify areas for improvement. We have taken big strides, and our journey will continue as we aim to positively transform everyone’s experience.

Mental health services for the community and consumers remain a priority for the District. The Macarthur Community Mental Health Service was refurbished, delivering a new purpose-built facility and new mental health courtyards at Liverpool Hospital, providing outdoor spaces for relaxation and exercise and creating a wonderful boost. The District is continuing to focus on decreasing seclusion rates in mental health care and has had outstanding success with the My Choice – Pathway to Community Living project.

The District strengthened its commitment to research and innovation with the launch of the District’s Research Strategy at the annual Health Beyond Research and Innovation Showcase. The Showcase continues to grow and become a popular and sought-after event, with over 1000 people visiting the event across the two days. The District’s prestigious Academic Unit program is also further developing its reputation as an international hub of medical innovation. As the only local health district to fund an academic unit program, there is a deep determination to ensure research and innovation remains a core focus.

Construction has started on both the Bowral and District Hospital and Campbelltown Hospital redevelopments, and planning and scoping works are well underway on the Liverpool Health and Academic Precinct. We are also working towards completing the new emergency department at Fairfield Hospital and planning has begun for the Bankstown-Lidcombe Hospital emergency department. The Bankstown community will also receive a new hospital after a commitment of $1.3 billion during the NSW election campaign.

This is an historic era of development for hospitals and an exciting time for the community. I am delighted South Western Sydney Local Health District continues to deliver world-class care as it evolves and grows with the community. Thank you to District staff for their commitment to excellence in care for the community.

Key achievements 2018-19

- Launched outdoor spaces at the mental health service at Liverpool Hospital, which has positively transformed the experience of consumers. The service has also achieved a significant reduction in episodes of restrictive practice (seclusion and restraint), with the seclusion rate decreasing from 8 per 1000 bed days in July 2018 to 3.3 in March 2019.
- Signed a Statement of Intent with three universities and the Ingham Institute for Applied Medical Research to create a health and academic precinct based around the $740 million Liverpool Hospital redevelopment.
- Continued to roll out the Transforming Your Experience/strategy with outstanding results. Around 85 percent of the leadership team are completing rounding, the Leadership Strategy was launched and Core Chat implemented, helping staff manage difficult conversations.
- Launched the District’s Research Strategy 2023, which will guide the development of more research partnerships, additional PhD students and clinical trials, as well as the investment of more than $6.5 million in academic units.
- Opened a $2 million state-of-the-art cardiac interventional at Liverpool Hospital, a major weapon in the fight against heart disease. The same technology at Bankstown-Lidcombe Hospital has further expanded, so clinicians can now perform coronary stent implantation procedures.
- Achieved a 75 percent reduction in falls at Fairfield Hospital through Aunty Roma’s Falls Prevention Program. Balance, measured by tandem stance, improved by 166 percent in nine weeks, grip strength increased by 56 percent and there was a 100 percent increase in weekly physical activity uptake.
- The Junior Medical Officer (JMO) Evening Team Staffing (JETS) model, introduced into Liverpool Hospital, has led to improvements in patient welfare and safety, response times for Clinical Review Calls and JMO work-life balance. This project is the first successful large-scale implementation of a team-based inpatient after-hours model in NSW.
- More than $2.7 billion has been committed to the redevelopment of south western Sydney hospitals. Construction is underway on the $68.6 million Bowral and District Hospital and the $632 million Campbelltown Hospital redevelopments. Meanwhile, the Liverpool Hospital $740 million redevelopment and Bankstown-Lidcombe Hospital emergency department $25 million redevelopment schematic designs are well underway.
- Launched the District’s 2019-2022 Wellbeing Framework, which aims to help staff improve their personal and professional wellbeing.
- Telstra Health partnered with Liverpool Hospital Cancer Services to implement a patient self-check-in kiosk, which allows patients to leave and receive an SMS when their appointment is due. The new system will reduce the need for patients to stay in waiting areas, and patients and staff have already noted the positive impact of the new system.

Performed 23,215 elective surgeries, exceeding the target of 22,695
Demographic summary

South Western Sydney Local Health District is located in metropolitan Sydney extending to the metropolitan fringe area of the Southern Highlands. It provides healthcare services across a geographic area of approximately 6243 square kilometres.

The traditional custodians of the land covered by the District are the Tharawal, Gundungurra and Dharug nations.

About 966,450 residents live within the District. People of Aboriginal and Torres Strait Islander heritage make up 1.7 per cent (16,533) of the population, with close to 1 in 15 people identifying as Aboriginal. South Western Sydney is also home to a large proportion of humanitarian entrants and refugees in NSW, with almost two-thirds of them living in the District, and almost half in Fairfield.

Over the decade 2016-26, the District’s population is expected to increase to over 1.17 million people. The number of people aged 70 years and older will increase by 53 per cent by 2026. Rapid population growth is expected in the South West Priority Growth Area, resulting in the Camden and Liverpool LGA populations increasing by 83 per cent and 28 per cent respectively by 2026.

With this growth there are changes in the demographics of our community. The older population is expected to increase substantially, but there is also a thriving younger population.

The main health issues facing the District are the increase in diabetes and mental health conditions (around half of the population will experience some form of mental health condition). There are fewer cases of cancer in the District but more deaths. Half of the population is living with at least one long-term health condition such as cancer, diabetes, asthma, a heart or circulatory condition, a mental health condition, a bone or joint condition, or long-term injury.


Local government areas

Camden, Campbelltown, Canterbury-Bankstown (part), Fairfield, Liverpool, Wingecarribee, Wollondilly

Public hospitals

Bankstown-Lidcombe, Bowral and District, Campbelltown, Camden, Fairfield, Liverpool

Community health centres

Bankstown, Bigge Park Centre, Bowral, Cabramatta, Campbelltown (Executive Unit/Triple I), The Corner Youth Health Service (Bankstown), Fairfield, Fairfield Liverpool Youth Health Team, Hoxton Park, Ingleburn, Liverpool, Miller – Budyari, Miller – The Hub, Moorebank, Narellan, Prairiewood (Fairfield Hospital), Rosemeadow, Traxside Youth Health Service (Campbelltown), Wollondilly

Child and family health services


Oral health clinics

Bankstown, Yagoona, Fairfield, Liverpool, Ingleburn, Rosemeadow, Tahmoor, Narellan, Bowral

Third Schedule facilities

Braeside Hospital, Karitane, South West Sydney Scarba Service, NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors

Other services

Aboriginal health, community health, drug health, mental health, population health, BreastScreen NSW, NSW Refugee Health Service (statewide service)
Chief Executive: Andrew Newton

Andrew Newton took up the Chief Executive position in November 2017 after having been General Manager of Westmead and Auburn hospitals for three years. He has significant experience in health service delivery, strategic and operational leadership, and capital development and implementation.

Mr Newton has previously been General Manager of Blacktown Mt Druitt and Dubbo hospitals, General Manager of Rural and Remote Health Services for Greater Western Area Health Services, and Hospital Manager for Lachlan Health Service. Mr Newton started as a nurse at Blacktown Hospital in 1994 after emigrating from the UK. He has a Bachelor of Health Science (nursing), a Masters of Health Management, and a Graduate Diploma of Public Administration.

Year in review

The Southern NSW District is undergoing unprecedented growth in infrastructure, with projects totalling more than $330 million planned or underway. This extensive investment by the NSW Government includes $150 million for redeveloping the Goulburn Health Service, with an upgraded Goulburn Base Hospital, $18.6 million to refurbish Cooma District Hospital and $8 million to redevelop Yass Hospital. Funding for the Braidwood Multipurpose Service redevelopment has been allocated from the $300-million statewide program of works to upgrade multipurpose service facilities in rural and remote communities across NSW.

The government has also spent $2.6 million refurbishing Pambula Hospital, has committed $2.5 million to refurbish Crookwell District Hospital, and a further $150 million is committed to building a new health facility in the Eurobodalla region.

Work has been ongoing on a District restructure to provide further improvements to service delivery and the quality of our patient care.

Emergency departments across the District continued to experience increased demand in 2019. In April to June there were 2411 more emergency presentations compared to the same quarter last year, a 9.2 per cent increase. The percentage of patients leaving the District’s emergency departments within four hours exceeded the Premier’s target, at 83.3 per cent.

The number of elective surgery procedures performed increased by 8.4 per cent compared to the same period last year, to 1432, with the median patient wait times for elective surgery across the District being 141 days for non-urgent elective surgery.

In a first for the District, the new nurse-delegated emergency care model was launched at Bombala Multipurpose Service in September 2018. The model provides timely, quality care for patients with low-risk, low-level conditions presenting to emergency departments or multipurpose services in rural and remote areas.

The nurse practitioner-led model of care at Pambula Assessment, Treatment and Care Centre is also performing well. Since the introduction of the model in December 2018, the practitioners have attended to 1982 patients.

Support for parents in Queanbeyan and Cooma was boosted in July 2018 with a partnership with Tresillian, Australia’s largest early parenting organisation. The hub based at Queanbeyan will help an estimated 1500 families.

Our staff, volunteers, and community and consumer advocates have our thanks for making these achievements possible.
Key achievements 2018-19

- Invested $330 million in infrastructure improvements, including building upgrades and service delivery improvements to local communities.
- Continued the District restructuring to further improve service delivery and the quality of patient care.
- Commenced work on the Eurobodalla Health Service Clinical Service Plan, which will help determine required services, models of care and workforce requirements, to inform infrastructure requirements for the new hospital.
- Showcased the continued high level of patient care and innovation being conducted across the District at the Southern NSW Local Health District Quality Awards.
- Achieved a participation rate of 63 per cent for the annual People Matter Employment Survey.
- Exceeded the Premier’s target for patients leaving emergency departments within four hours, despite 2411 more emergency presentations compared to the same quarter last year (April-June), a 9.2 per cent increase.
- Appointed two medical administrators for South East Regional Hospital, Cooma District Hospital, Queanbeyan District Hospital, Goulburn Base Hospital, Yass District Hospital and Crookwell District Hospital. The effect of this is to make the role of Director Medical Services permanent for the District.
- Implemented the Electronic Medication Management system (eMeds) to provide electronic management of prescribing and dispensing linked with each patients’ Electronic Medical Record (eMR).
- Successfully piloted new guest and patient Wi-Fi at our largest facilities, in preparation for District-wide roll-out.
- Implemented all Leading Better Value Care Tranche 1 initiatives and continued to transition into ongoing clinical practice. Commenced planning for all Tranche 2 initiatives, to determine implementation strategies to progress roll-out across the District.

Demographic summary

Southern NSW Local Health District extends from the NSW South Coast and Southern Tablelands, across the Great Dividing Range and the Snowy Mountains, past Canberra to Goulburn and Crookwell. It provides healthcare services across a geographic area of 44,500 square kilometres.

The population of about 200,176 (2016 census) comprises 2.68 per cent of the total NSW population.

Traditional custodians of the land covered by the District are the Gundungurra, Ngunawal, Ngarigo and Yuin nations.

People of Aboriginal and Torres Strait Islander heritage make up an estimated 7060 of the population, nearly one-third live in the Eurobodalla area.

The main health issues facing the District are those of an ageing population, with 25 per cent of people aged over 60. The median age ranges from 38 in Queanbeyan-Palerang, to 54 in Eurobodalla, compared with 43 in the rest of regional NSW. Eurobodalla has one of the highest proportions of older residents in NSW, 30.6 per cent.

The District contributes significantly to communities, employing around 2000 full-time equivalent staff, and engaging local residents through Community Consultative Committees. The District’s 10 regional hospitals, psychiatric hospital, three multipurpose services, and five community health centres provide a range of services that include emergency, intensive care, coronary care, maternity, mental health services, acute medical and surgical services, and primary and community services.

Local government areas

Bega Valley, Eurobodalla, Goulburn Mulwaree, Queanbeyan-Palerang, Snowy Monaro, Upper Lachlan, Yass Valley

Public hospitals

Hospitals: Batemans Bay, Bega, Cooma, Crookwell, Goulburn, Kenmore, Moruya, Pambula, Queanbeyan, Yass

Multipurpose services: Bombala, Braidwood, Delegate

Community health centres

Bega Valley, Bombala, Braidwood, Cooma, Crookwell, Delegate, Eden, Eurobodalla, Goulburn, Jindabyne, Queanbeyan, Yass

Child and family health services

Karabar

Oral health clinics

Cooma, Goulburn, Moruya, Pambula, Queanbeyan, Yass

Other services

Bourke St Health Service – Goulburn (rehabilitation), Southern Brain Injury Unit – Goulburn
Chief Executive: Dr Teresa Anderson AM, FIPAA, B.App Science (Speech Pathology) PhD

Dr Teresa Anderson is an internationally recognised speech pathologist, with more than 35 years of experience as a clinician and health service executive. She was recognised for her contribution to NSW Health in 2018, appointed a Member of the Order of Australia (AM). Dr Anderson is a Vice-President and Fellow of the NSW Institute of Public Administration Australia, a member of seven medical research, health and primary health network boards, and is an active member of the Sydney Health Partners Governing Council and Executive Management Group, one of the first four centres in Australia designated by the National Health and Medical Research Council as an Advanced Health Research Translation Centre. She is passionate about developing people, programs and services to support and improve the health and wellbeing of all people in the community.

Year in review

This year, our team in Sydney Local Health District had a focus on experience. The experiences of our patients and their loved ones, the experiences of staff working in our organisation and the experience of the District as a leader in healthcare. This was acknowledged with Royal Prince Alfred Hospital (RPA) named in the top 100 ranked hospitals in the world by Newsweek.
hospitals. Together we work towards our vision of excellence in health and healthcare for all.

**Delivered 164,883 occasions of service for healthcare interpreting, an increase of 25.4% on the previous year**

### Key achievements 2018-19

- Turned the sod to officially commence the $341 million redevelopment of Concord Repatriation General Hospital, which will include the nation’s first centre for veterans and their families.
- Announced the $750 million redevelopment of Royal Prince Alfred Hospital (RPA). The redevelopment will include a significant expansion and modernisation of the emergency department and funding for medical imaging, theatres and integrated ambulatory care services.
- Commenced building works for the $6.5 million expansion of the Canterbury Hospital emergency department.
- Opened a new Child and Family Health Centre at Forest Lodge.
- Achieved accreditation for Concord and Canterbury hospitals and Mental Health, Aged Care and Community Health achieved accreditation for Commonwealth funded programs such as Commonwealth Home Support Programmes.
- Appointed Australia’s first Chief Medical Wellness Officer, as well as Chief Information Officers for medical, nursing, allied health and pharmacy.
- Introduced routine domestic violence screening for all mothers and female carers looking after a sick child in Royal Prince Alfred’s children’s ward, the first paediatric ward in Australia to achieve this important initiative.
- Achieved a major milestone for the digital transformation of our services, becoming the first metropolitan local health district to implement Electronic Medication Management systems (eMeds) for patients across all acute facilities.
- Celebrated 10 years of the JobSupport Program helping people with an intellectual disability achieve employment.
- Launched the Sydney Local Health District Diversity Hub and appointed 60 new cultural support workers from communities across the District to help culturally and linguistically diverse patients and their families navigate health services.

### Demographic summary

Sydney Local Health District is located in the centre and inner west of Sydney and provides healthcare services across a geographic area of approximately 126 square kilometres.

Traditional custodians of the land covered by the District are the Gadigal, Wangal and Bediagal people of the Eora nation.

About 700,000 residents live within the District, and more than one million people travel to the District each day to work, study and visit.

People of Aboriginal and Torres Strait Islander heritage make up 1.1 per cent of the population. Almost half of the District’s population speak a language other than English at home, including significant numbers of refugees, asylum seekers and special humanitarian entrants. Almost nine per cent of the District population speaks little or no English.

The population is growing more rapidly than that of NSW, increasing by 115,000 (20 per cent) over the last decade. It is projected to grow by a further 40 per cent by 2036. In keeping with national trends, the proportion of our population aged over 65 is increasing, and is projected to grow from 13 per cent in 2018 to 15 per cent by 2028.

The population is socioeconomically diverse, with pockets of both extreme advantage and extreme disadvantage. The District has a large population of people who are homeless – more than 6000 people.

The number of residents aged over 70 is projected to increase by 65 per cent by 2031. More than 28,000 people with a disability live in the District and there are over 53,000 unpaid carers who provide support across the inner west. Each year, almost 8500 babies are born to mothers residing in the District.

There are relatively high rates of STI notifications such as hepatitis B and gonorrhea compared to other local health districts.

Sources:
2. NSW Department of Planning and Environment 2016

### Local government areas

City of Sydney (part), Inner West, Canterbury and Bankstown (part), Canada Bay, Burwood, Strathfield

### Public hospitals

Balmain Hospital, Canterbury Hospital, Concord Centre for Mental Health, Concord Repatriation General Hospital, Royal Prince Alfred Hospital (RPA), Sydney Dental Hospital, Thomas Walker Hospital

### Community health centres

Marrickville, Croydon, Redfern, Canterbury, Camperdown

### Child and family health services

Canterbury Health Centre: child, adolescent and family health services, child health information link (service centre)
Croydon Health Centre: child, adolescent and family health services, disability specialist unit
Marrickville Health Centre: child and family health services
Camperdown: child and family health services
Early childhood health services: Alexandria Park, Balmain, Belmore, Camperdown, Campsie, Chiswick, Concord West, Croydon, Earlwood, Five Dock, Glebe, Homebush, Lakemba, Leichhardt, Marrickville, Punchbowl (accessed by Child Health Information Link: 9562 5400)

**Oral health clinics**
Canterbury, Concord, Croydon, Marrickville, Sydney Dental Hospital. Dalarinji Oral Health Clinic at Sydney Dental Hospital provides emergency and dental services to Aboriginal people

**Thirds Schedule facilities**
Tresillian Family Care Centres

**Other services**
Aboriginal health; aged, chronic care and rehabilitation services; allied health; BreastScreen services at RPA, Croydon, Campsie and the mobile van; Centre for Education and Workforce Development; Chris O’Brien Lifehouse at RPA; Charles Perkins Centre at RPA; chronic care programs; Concord statewide burns service; Concord Cancer Centre; Concord Centre for Palliative Care; community nursing services; drug health; healthcare interpreter team; heterosexual HIV service; Institute of Academic Surgery; Inside Out Institute; interpreter services; mental health services; multicultural health services; nursing and midwifery services; oral health; planning; population health; public health; RPA Surgical and Robotic Training Institute; sexual health outreach clinics; Sydney Institute for Women, Children and their Families; Sydney Local Health District Research; Sydney Research (including Sydney Local Health District, the University of Sydney and affiliated medical research institutes); Sydney South West Pathology Services (NSW Pathology); Yaralla Estate; youth health outreach clinics

---

**WESTERN NSW LOCAL HEALTH DISTRICT**
29 Hawthorn Street
Dubbo NSW 2830
PO Box 4061
Dubbo NSW 2830
Telephone: 6809 8600
Facsimile: 6841 2236
Email: WNSWLHD-Communications@health.nsw.gov.au
Website: www.wnswlhd.gov.au
Business hours: 8:30am-5pm, Monday to Friday

Chief Executive: Scott McLachlan
Scott McLachlan leads a team driven by a commitment to improve health outcomes for rural people, and deliver compassionate, high-quality and connected health services. Aboriginal and Torres Strait Islander people make up over 11 per cent of the Western NSW Local Health District population and Mr McLachlan has a particular commitment to developing services and places that welcome Aboriginal people and the whole community.

Mr McLachlan’s extensive leadership experience, spanning more than two decades in the public and private health sectors, has shaped his commitment to improving standards of patient care, maintaining authentic community engagement, collaborating with clinicians and leading innovation.

**Year in review**
The Western NSW Local Health District is characterised by its vast size and the nature of the communities within it. Our communities are strong, resilient and diverse – features that have been tested by the
ongoing drought conditions that affect us all. Our health teams have played an important role in responding to challenges of living in a drought-affected region. We have stepped up our response, working with the Rural Adversity Mental Health Program and other partners to support the mental health and wellbeing of drought affected communities.

The District also includes highly disadvantaged populations, which is reflected in a range of health outcomes. Our organisational commitment to being ‘one service across many places’ is recognition that embracing innovation, technology and fresh approaches to health and health service provision, is essential.

Our District is rapidly becoming a partner of choice for health and medical research. In August 2018 we presented our first research strategy, which will drive the development of our research culture. We are continuing to build our capacity and capability to use remote service provision through telehealth and the development of virtual services. This includes the ongoing evolution of our vCare team, which is focused on bringing the right care to patients, through the use of virtual specialist consultations and streamlined patient transport. We also share a focus on safety and quality care. This year we delivered safety huddle training and evaluation at all our sites and we again had over 100 submissions for our Living Quality and Safety Awards program. This year we partnered with the Western Health Research Network to create a series of events highlighting innovation, research, and quality and safety.

Our communities are now better served than ever by medical specialists working from our health services in Bathurst, Orange and Dubbo. We have also been very successful in recruiting rural generalists with advanced skills and we have increased the number of rural generalist training roles offered across the District. These achievements strengthen our capacity to care for patients closer to home and support the sustainability of our health services.

With construction of the $241.3 million Dubbo Hospital redevelopment due to be complete in 2020, and the $35 million Western Cancer Centre scheduled for completion the year after, our District will be intensifying our efforts to bring doctors, medical specialists and other health workers into our communities.

Our staff, volunteers, and community and consumer advocates have our thanks for making these achievements possible.

Key achievements 2018-19

- Exceeded referrals target to the Get Healthy Information and Coaching Service (187 per cent of our target).
- Delivered the MASTER Program, with more than 300 Aboriginal men from 11 communities participating, and more than 100 referrals made to the Get Healthy Information and Coaching Service.
- Delivered safety huddle training, with more than 32 sites using the concept to improve clinical quality and safety.
- Delivered improved maternity services in rural and remote communities through programs that include the First 2000 Days of Life Strategy — implemented at Coonamble, Condobolin, Bourke and Walgett – implementing maternity outreach services and establishing partnerships with Macquarie Homestay in Dubbo and Tresilian.
- Expanded the virtual allied health service to more facilities and launched a virtual occupational therapy home visit service.
- Developed a model of care for the Youth Drug and Alcohol Clinical Support Network targeting people aged 10-18.
- Implemented eMeds in all base and procedural hospital sites.
- Developed a cultural orientation package for overseas trained staff.
- Developed a plan for our intellectual disability health team to support people with chronic and complex health needs.
- Implemented a range of strategies to improve the aged care patient experience, resulting in increased positive patient feedback.

Demographic summary

The Western NSW Local Health District is located west of the Great Dividing Range in the central and north western areas of NSW and provides healthcare services across a geographic area of approximately 247,000 square kilometres.

The Barindji, Barrinbinja, Barundji, Gunu, Kamilaroi, Muruwari, Wailwan, Wiradjuri and Wongaibon people are the traditional custodians of the land covered by the District. About 279,673 residents live within the District. People of Aboriginal and Torres Strait Islander heritage make up 32,160 (approximately 11.5 per cent) of the population. There is low representation of culturally and linguistically diverse communities across the District, apart from the community of Lightning Ridge.

In 2018-19 the population was expected to grow, by 6.6 per cent to 2031. The District has higher percentages of people aged over 65 and under 15 compared to NSW. The District also has some of the most vulnerable populations in NSW, with the lowest socioeconomic status and lowest life expectancy rates.

The District’s population will continue to grow over the next decade. The growing proportions of older and younger people will place more pressure on services such as aged care, palliative care and services for children within the first 2000 days of life.

Source:
1. NSW Department of Planning and Environment, State and Local Government Area Population Projections 2016
Local government areas
Bogan, Bourke, Brewarrina, Cobar, Coonamble, Cowra, Dubbo, Forbes, Gilgandra, Lachlan, Mid-Western, Narromine, Orange, Cabonne, Blayney, Parkes, Walgett, Warren, Warrumbungle, Weddin

Public hospitals
Bathurst, Canowindra, Cobar, Condobolin, Coonabarabran, Cowra, Dubbo, Forbes, Mudgee, Narromine, Orange – Bloomfield Campus, Parkes, Wellington

Multipurpose services: Baradine, Blayney, Bourke, Brewarrina, Collarenebri, Coolah, Coonabarabran, Cowra, Dubbo, Forbes, Gilgandra, Goondiwindi, Cumnock, Molong, Nyngan, Oberon, Peak Hill, Rydalmere, Tenterfield, Trundle, Tullamore, Walgett, Warren

Community health centres
Baradine, Bathurst, Binnaway, Blayney HealthOne, Bourke, Brewarrina, Canowindra, Cobar, Collarenebri, Coolah, Coonabarabran, Coonamble HealthOne, Cowra, Cumnock, Dubbo, Dunedoo, Forbes, Gilgandra, Goondiwindi, Gulgong, Lightning Ridge, Mendooran, Molong HealthOne, Mudgee, Narromine, Nyngan, Oberon, Orange – Bloomfield campus, Orange – Kite Street, Parkes, Peak Hill, Quandialla, Rydalmere, Tenterfield, Tenterfield, Trundle, Tullamore, Walgett, Wanaaring, Warren, Wellington

Child and family health services
Bathurst, Blayney HealthOne, Bourke – outreach to Engonnia, Brewarrina, Canowindra – outreach to Eungowra, Cobar, Collarenebri, Condobolin, Coolah, Coonabarabran – outreach to Baradine and Binnaway, Coonamble HealthOne, Cowra, Dubbo, Dunedoo – outreach to Mendooran, Forbes, Gilgandra, Grenfell – outreach to Quandialla, Gulargambone, Cumnock, Lightning Ridge – outreach to Goondiwindi, Molong HealthOne – outreach to Mendooran, Cumnock, Yeoval and Cudal, Mudgee, Narromine, Nyngan, Oberon, Orange – Bloomfield campus, Parkes, Peak Hill – outreach to Tomingale, Rydalmere, Quandialla, Rydalmere, Tenterfield, Trundle, Tullamore, Walgett, Warren, Wellington

Oral health clinics
Royal Flying Doctors Service: Collarenebri, Goondiwindi, Lightning Ridge

*Part-time clinics operated by staff based at another District dental clinic

Third Schedule facilities
St Vincent’s Outreach Service, Lourdes Hospital and Community Health Service

WESTERN SYDNEY LOCAL HEALTH DISTRICT
Hawkesbury Road
Westmead Hospital
PO Box 574
Wentworthville NSW 2145
Telephone: 8890 9000
Facsimile: 8890 9901
Email: WSLHD-OfficeOfTheCE@health.nsw.gov.au
Website: www.wslhd.health.nsw.gov.au
Business hours: 8.30am-5pm, Monday to Friday

Chief Executive: Graeme Loy (from October 2018)

Graeme Loy has held a number of executive roles during the past 13 years, including Chief Executive for Northern Sydney Local Health District, and was appointed to the role of Chief Executive in October 2018. His knowledge of both clinical and corporate services includes a strong focus on system performance through healthy relationships.

Mr Loy has accumulated significant experience in all aspects of leadership in both the public and private sectors. He takes great pride in being able to deliver highly complex clinical services through high-performing teams.

His breadth of knowledge spans facility, district and statewide environments and enables him to couple strategic direction with the broader improvement and research goals, including ensuring optimal provision of safe, high-quality and timely clinical services in concert with the needs of the community and the health system.
NSW HEALTH Annual Report 2018–19 NSW Health Organisations

Chief Executive: Danny O’Connor (until October 2018)

Danny O’Connor was Chief Executive of the Western Sydney Local Health District from January 2011 until October 2018.

Year in review

Western Sydney Local Health District has an invigorated executive team, committed to delivering high-quality, cost-efficient services, and leading an organisation that staff and the community can be proud of. There has been a focus on organisational culture, with the first step being a series of three World Café forums, allowing 350 staff from across the District to articulate ways in which culture and performance could improve.

A concerted effort to increase staff participation in the annual People Matter Employee Survey followed, achieving an eight per cent increase and record response of 41 per cent. This provided valuable organisational insights, and eight action groups have now been established around central themes to progress a five-year commitment to build a better culture.

To continue this open dialogue between the executive and staff, the Chief Executive continues to work remotely throughout the District, meeting informally with staff and community members in facility cafeterias.

Integral to good culture and good governance is engagement with the workforce. In May 2019, the Western Sydney Local Health District Clinical Council was established to facilitate input from clinical staff from across the District on matters of material importance to the running of health services. Extensive and necessary reform of the intensive care unit at Westmead Hospital has been a priority to regain training accreditation. Initiatives being implemented reflect the broader organisational focus on the creation of supportive work environments. These initiatives include weekly workplace wellbeing sessions for our teams conducted by an expert; ensuring time for education and training is embedded into rosters; and appointing new staff, including an intensive care unit director, staff specialists, junior medical staff and administrative personnel.

The Blacktown and Westmead redevelopments continued to progress on time and on budget. Planning for the creation of a contemporary mental health services model also advanced. The new Westmead Central Acute Services Building was officially topped out in June 2019 by Premier Gladys Berejiklian.

On 24 June 2019, the new Acute Services Building at Blacktown (emergency, birthing, maternity, newborn care, women’s health, paediatrics, intensive care and perioperative services), was handed over for hospital operational commissioning.

Thousands of residents in Western Sydney came closer to having world-class health services on their doorstep when the site for the Rouse Hill Hospital was announced in February. The new Rouse Hill Hospital is designed to complement Blacktown and Mount Druitt hospitals and Westmead Hospital to ensure comprehensive healthcare throughout the North West.

Spending wisely and investing astutely assisted in bringing the 2018-19 end-of-year result back to a near balanced position, a significant debt correction in the space of two years.

Our staff, volunteers, and community and consumer advocates have our thanks for making these achievements possible.

Continued to transform our culture by hosting Three World Café sessions, which drew together 350 staff from across disciplines, facilities and organisational levels

Key achievements 2018-19

• Increased staff participation in the 2019 People Matter Survey, with 41 per cent of Western Sydney Local Health District staff participating – the highest ever District participation rate, up from 33 per cent in 2018 and 22 per cent in 2017. Our staff engagement is building and will give us better data to inform our culture change program into the future.

• Continued to transform our culture by hosting of Three World Café sessions, led by the Chief Executive. The World Cafés were inclusive forums that drew together 350 staff from across disciplines, facilities and organisational levels. The World Café outcomes will inform the development of a District Culture Strategy. Action groups comprising staff representatives will contribute to action plans to improve workplace culture across the District.

• Implemented the Growing Little Language Learners program. In collaboration with the University of Sydney and Cumberland Council, speech pathologists from the child and family health team provided an evidence-based training program for early childhood educators to maximise language development in children. The team was awarded a grant of $102,545 from the Paediatric Innovation Fund Scheme to research the feasibility of using the program at a wider scale across western Sydney.

• Reviewed, redesigned and implemented a new child and family health nursing model of care within integrated and community health to better meet the needs of vulnerable families in Western Sydney.

• Implemented the Safe and Supported at Home program within chronic and complex services to ensure that all eligible clients are identified for ongoing clinical support and referral as required.

• Strengthened the partnership between the District and Silver Chain Community Palliative Care Service. In the 2018-19 financial year, more than 900 people received care from the service.

• Implemented Thriving Families NSW – a program funded by Their Futures Matter to improve responses to young parents with significant vulnerabilities and risk factors.

• Continued leading the Western Sydney Refugee Health Coalition to improve access to services for refugees and asylum seekers, including the Hello Doctor Events, which are held in partnership with
other health and social service providers, councils, settlement services and Western Sydney Primary Health Network.

- Implemented the collective impact project – the Hive Health Project – funded by Family and Community Services and in partnership with The Hive in Mount Druitt. The project aims to provide health assessments and care navigation for vulnerable and at-risk children aged three and four, living in social housing in Willmot and Lethbridge Park, to improve their readiness for school.
- Established the Multicultural Health Committee to drive the development and implementation of district wide strategies to address the needs of culturally and linguistically diverse consumers.

**Demographic summary**

Western Sydney Local Health District is located in western Sydney and provides healthcare services across a geographic area of approximately 780 square kilometres.

Traditional custodians of the land covered by the District are the Darug people.

About one million residents live within the District. The District’s population is projected to grow to 1.35 million by 2031. It will be the most populous District in NSW. People of Aboriginal and Torres Strait Islander heritage make up 13,387 of the population and the majority (9530) live in the Blacktown Local Government Area.

At the 2016 Census just over 50 per cent of residents spoke a language other than English at home, with the most frequent, in descending order, being Arabic, Mandarin, Cantonese, Hindi, Korean, Punjabi, Tagalog and Tamil.

The population is younger than the state average, with 7.8 per cent being pre-school age (0-4 years) compared with 6.5 per cent statewide in 2018. The District’s total fertility rate is higher than the state average.

In 2018, the proportion of the population aged 70 years and older was 7.8 per cent and this is projected to increase to 10.3 per cent by 2030.

One of the main health issues facing residents is Type 2 diabetes: almost half the adult population likely to be affected by diabetes or pre-diabetes. The diabetes mortality rate in the District is significantly higher than the NSW average. More than 50 per cent of the District population is overweight and only about 2.4 per cent of the adult population consume the recommended daily amount of vegetables.

Asthma hospitalisations for all ages and potentially preventable hospitalisations for chronic diseases were also higher than the NSW average.

**Sources:**
1. HealthStats NSW
2. Australian Bureau of Statistics 2018

**Local government areas**

Blacktown, Cumberland, Parramatta, The Hills Shire

**Public hospitals**

Auburn, Blacktown, Cumberland (mental health services), Mount Druitt, Westmead

**Community health centres**

Auburn, Blacktown, Castle Hill, Doonside, Merrylands, Mount Druitt, Parramatta

**Child and family health services**


**Oral health clinics**

Blacktown, Mount Druitt, Westmead

**Other services**

Aboriginal health services, aged day services (Auburn, Baulkham Hills, Blacktown, Ermington, Mount Druitt), Blacktown Women and Girls Health Centre, community drug health services (Auburn, Blacktown, Castle Hill, Cumberland, Mount Druitt, Doonside, North Parramatta, Merrylands, Mount Druitt, Parramatta), community mental health services (Auburn, Blacktown, Castle Hill, Granville, Merrylands, Mount Druitt, Parramatta, Seven Hills, Telopea, Westmead), Blacktown/Mount Druitt sexual assault service, Centre for Population Health, child protection counselling service, Education Centre Against Violence, healthcare interpreter service, High Street Youth Health Service, Multicultural health, New Street Sydney, NSW education program on female genital mutilation, Western Sydney Sexual Health Centre (Parramatta, Mount Druitt), Western area adolescent team, Westmead sexual assault service, Westmead Breast Cancer Institute, BreastScreen (Auburn, Blacktown, Castle Hill, Mount Druitt and Parramatta)