Future Health

Guiding the next decade of care in NSW 2022-2032

Report

NSW GOVERNMENT

Please be aware that this publication contains the images of Aboriginal and Torres Strait Islander people who may now be deceased.

Contents

Foreword from the Minimster for Health

**The Hon. Brad Hazzard MP,
Minister for Health**

The standards of healthcare in NSW are unquestionably among the best in the world, as demonstrated throughout our pandemic response. In the face of countless challenges, our health system and its workforce has shown time and again, the ability to adapt and change to deliver high quality care to the people of NSW.

The pandemic has been a watershed for health networks worldwide. Treatments and technologies which would have taken years, if not decades to materialise, are now embedded.

We are building on those learnings and advancements, and looking to do more. Future Health is a roadmap for how NSW Health meets the increasing health demands and needs of our community.

It has been informed by the viewpoints and experiences of thousands of people who either work in, or work closely with the NSW Health system, as well as from the many patients it cares for.

Activity across the health system in NSW will almost double over the next decade, if today's trends in disease and demand continue. This is a sobering statistic. Rising demand for health services and an ageing population with more complex and chronic conditions are just some of the many challenges we face over the coming decades.

At the same time, advances in technology, ongoing investment in preventative health and innovative models of care will present significant opportunities to build an even stronger, more flexible, patient-centred health system in NSW.

Presently, around two-thirds of the current disease burden in NSW is due to conditions that could be managed outside a hospital setting. Future Health looks to position our health system to support this through greater home and community-based care. At the same time there is continued investment in acute hospital services to ensure patients requiring hospital-delivered treatment receive it as soon as possible.

Crucially, our highly skilled health workforce will be encouraged and supported to deliver high quality and innovative care that meets patients' needs, not only today, but into the future.

I have been privileged to meet thousands of clinicians during my time as NSW Minister for Health. I have every confidence in their dedication and commitment to their patients, to their profession, and to their community in delivering health services fit for the future.

A Message from the Secretary, NSW Health

Susan Pearce,
Secretary, NSW Health

Our health system is high performing and provides excellent outcomes and high-quality care to the people of NSW.

Its ability to continue to perform as well over the next 10 to 20 years will be challenged if the system does not continue to adapt. Health system improvement is never, and never should be, static. While many of the changes our health system needs to make are already under way there is much more to do.

When we first started thinking about what our future health system could look like, some key elements were often mentioned – an enhanced patient experience, the wider use of data and analytics, as well as a growing role for virtual care.

Our experience from the pandemic has shown us how agile and flexible our health system can be.

The Future Health plan builds on the foundations of the previous NSW State Health Plan and continues the work we've done over recent years in areas such as value-based healthcare, the integration of care and in improving the patient experience.

It brings together the collective experience and wisdom of those who use our health services, the people who work in our system, as well as that of our partners in providing care.

The key strategic objectives outlined in this plan have been developed through the input of thousands of individuals who have generously shared their views and aspirations for our health system throughout 2020-21. In particular, I would like to acknowledge the vision and leadership of my predecessor Elizabeth Koff (former Secretary NSW Health) and the significant guidance from the Future Health Steering Committee, co-chaired by Ms Koff and Professor Andrew Wilson.

This wealth of knowledge and expertise has helped us define how we can best address future matters such as:

- the importance of involving patients in their own care, helping them to make their own decisions about the health outcomes that matter most to them

- the value of collaboration and partnerships, and how we can enhance this

- the potential of virtual care tools such as telehealth in our future health system, and what it means for both patients and clinicians

- the need for more choice of care settings in the future – in the community, in the home and virtually.

Future Health provides the strategic framework and priorities for the whole system over the next decade. Realising our vision requires effort from all of us and all parts of NSW Health will have a role to play in leading change.

We will implement the key objectives set out in Future Health and monitor and report on progress across three horizons from 2022 to 2032. A series of Delivery Plans will be developed, with the strategic outcomes and key objectives embedded across the health system through Service Agreements, Annual Business Plans, and local strategic planning. This will enable us to work towards our shared goals.

We will harness our experience to date as we look forward to developing health services over the next decade to meet the needs of patients, the community and our workforce.

Together, we can help make our remarkable health system even stronger and ready to deliver for the next decade.

Scene
Setting

1

Adapting to a changing landscape

The NSW public health system is the largest public health system in Australia, providing safe, high quality healthcare to the citizens of NSW. By global standards the NSW Health system is high performing, delivers safe, quality care, and our population is considered amongst the healthiest in the world.[1,2]

Our patients and consumers speak highly of their experiences with clinicians and health professionals. In the face of challenge, particularly during the COVID-19 pandemic, we saw every part of our health system come together committed to delivering safe, quality healthcare for our patients and communities.

Our system's challenges ahead

Our system's ability to continue to perform well in the future will be challenged if the system does not adapt and change to the stresses in the operating environment which include changing patient needs and growth in the volume and complexity of care required.

By 2061, it is projected that there will be 11.5 million people living in New South Wales, 3.3 million more than in 2020. Life expectancy at birth is projected to reach 91.7 years of age for women and 89.4 for men by 2061, compared to 85.9 for women and 82.2 for men in 2020.[3] It is also noted that one third of the NSW population lives in regional areas, where population growth will be slower but ageing will be faster than in metropolitan locations.

Based on these projections, activity across the health system in NSW will nearly double by 2031 if today's trends in disease and demand continue. This is due to:

- rising demand, at rates beyond that attributed to population growth, especially in mental health, diabetes and communicable diseases;

- changing demographics, with the population of people over 65 likely to account for 45% of health activity if current models and settings of care remain as they are today; and

- growing complexity, with one in four people anticipated to have two or more chronic conditions by 2031.

According to the Australian Burden of Disease Study (2015), over one-third of the current disease burden is likely preventable and due to modifiable risk factors.

Furthermore, while NSW Health presently sees 85% of its spend concentrated in hospital settings, known patient needs, and their experience and outcomes already suggest a need to change current models of care. Patients will increasingly want their care provided within and beyond the hospital setting in ways that are integrated across healthcare providers. For example, it is recognised that today:

- two-thirds of the disease burden in NSW is due to conditions that could largely be managed outside the hospital setting (for example, patients with chronic disease, who currently access high rates of care in all settings) and hospitalisation can exacerbate a condition that could have been preventable via community-based

- aspecific groups in the community experience poorer health outcomes and access to care (for example, people over age 75 and from lower socio-economic backgrounds), which is exacerbated by poor linkages in today's care model provided across the health system in NSW

- the COVID pandemic accelerated the adoption and acceptance of virtual healthcare models to deal with specific types of health concerns.

Technology also has an increasingly important role to play in the future. Advances in personalised medicine, genomics and artificial intelligence will drive increases in the quality of life and overall lifespan, as well as transforming core delivery of healthcare. However, the rapid medical and technological advances also place an increased cost on the system.
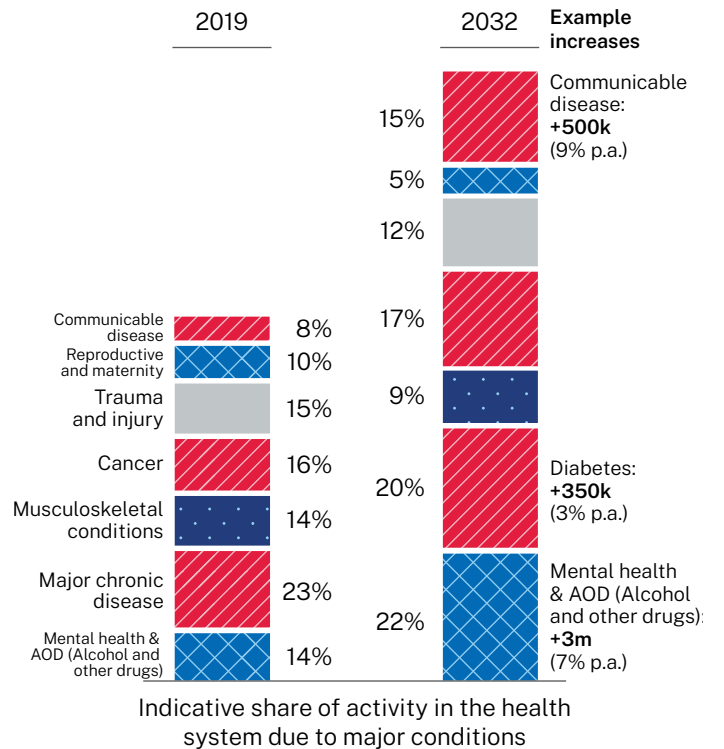
Rising Demand

Nearly 90% of citizens come into contact with the broader health system of NSW each year, and of those, about 30% are accessing NSW Health services.

Population growth, demographic changes and changes in the disease burden mean that the increasing volume of demand is outpacing the population growth rate, especially in mental health, diabetes and other chronic diseases. Communicable disease, such as that experienced by COVID-19, is also predicted to have high growth over the next decade. By 2032, 1.5 million more people will need to access care from the NSW health system compared with today.

In addition, the complexity of demand is increasing due to an increase in the number of co-morbidities. By 2032, at least 750,000 more people will have multiple chronic diseases, increasing the complexity of care they need.

If the health system continues to rely on the current models of care to address this increase and more complex demand, indicative estimates suggest future demand would drive 1.7 times more activity in the health system by 2032.

Projected Scale of Activity Increase in NSW through to 2032

Indicative share of activity in the health system due to major conditions

Changing Demographics

Demographic shifts will contribute to demand pressures on the health system. In particular, people over age 65 with typically high needs for health system support will be a larger proportion of the population in 2031.

Currently, 16% of the NSW population that is age 65+ represents 35% of the activity in the health system. By 2031, 700,000 more people will be over age 65 in NSW, or 22% of the population.

With the anticipated trajectory for the changing age mix of the NSW population, if the health system continues with today's models of care, people over age 65 will account for 45% of healthcare activity in 2031.

This change in demand is likely to put further pressure on the system due to the high rates of co-morbidity in this cohort. By 2031, approximately 25% of people in this cohort will have two or more chronic diseases, typically requiring more complex care.

Effect of Demographic Shifts on the NSW Health System (2019)

Today, people over age 65 account for approx. **35%** of the activity in the health system
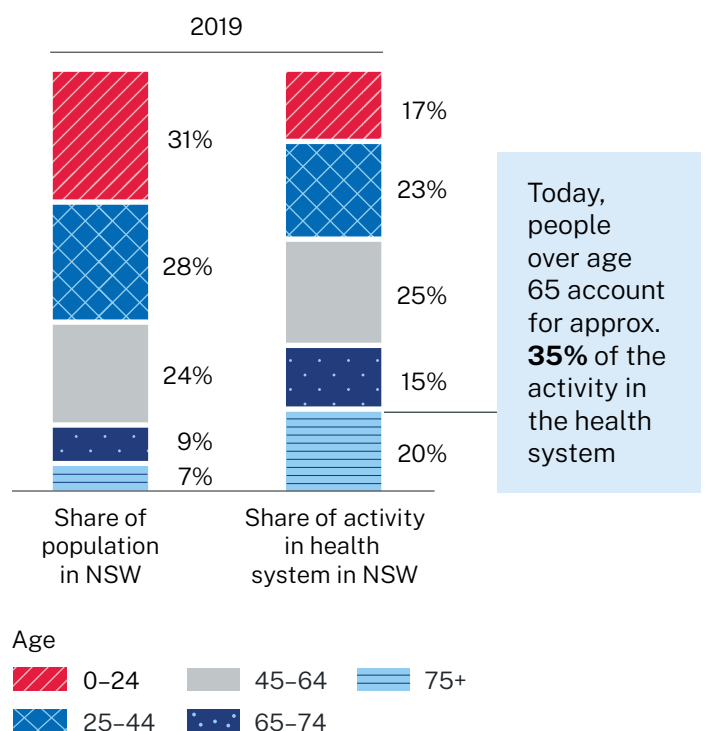
Looking to the future

Health is expected to remain the largest category of recurrent State spending, rising at an annual rate of 5.4 per cent on average and growing from 29 per cent of total expenses in 2018-19 to 38 per cent by 2060-61.[4]

NSW Health spends over $30 billion on healthcare services in NSW:

- This is largely concentrated in hospitals, with 85% of spend on outpatient, ambulatory, emergency, inpatient and sub-acute/rehabilitation care

- Prevention and promotion currently account for 10% of NSW Health expenditure

- The remainder, or about 5%, is invested in community or other care settings.

This distribution of cost reflects the historic hospital-focused approach to healthcare, and has been an appropriate model for decades, given traditional patient needs and methods of service delivery.

The burden of disease in the community that the NSW Health system faces now and will continue to experience in coming decades, requires a different approach. A national focus on keeping people healthy and well, and effective management of chronic conditions is needed to reduce demand for hospital care and keep health spending sustainable, while maintaining optimal health outcomes. This will need to be complemented by greater integration with primary care and non-government organisations.

Looking to the future, there are significant opportunities ahead for the NSW Health system to achieve its vision. This includes investment in preventative health, care in the community, in the home, and through virtual health services. All this needs to be driven by a person-centred approach to healthcare, enabling people to have more control over their own health.

To support this planned shift in healthcare delivery, we need to unlock the full potential of our staff, enhance their skills and capabilities to fit with our future vision for healthcare delivery, and build flexible workplace environments for them to thrive.

Our business will continue to be informed by advances in research, innovation and digital technology and underpinned by an outcomes-focused lens that will deliver a financially and environmentally sustainable health service.

Many of the changes our system needs to make are already underway, and the remaining changes will need to be gradual, evidence-informed and with the full support of our communities, staff and key stakeholders. These are reflected in the six Strategic Outcomes that are the cornerstone of delivering Future Health.

Strategic outcomes

01	Patients and carers have positive experiences and outcomes that matter
02	Safe care is delivered across all settings
03	People are healthy and well
04	Our staff are engaged and well supported
05	Research and innovation, and digital advances inform service delivery
06	The health system is managed sustainably

Engagement in developing the plan

Extensive consultation and engagement with key stakeholders has been used to develop and validate the plan, including:

- Patients, consumer representatives and members of the general public – to gauge their views and ambitions for the NSW health system

- Clinicians from the NSW COVID-19 Clinical Council and over 30 different Communities of Practice – to understand their perspective on the changes needed in the health system

- Targeted engagement with Aboriginal stakeholders, including individuals representing external service providers and consumers

- Over 5,000 other NSW Health clinical and non-clinical staff, representing Local Health Districts and Specialty Health Networks, state-wide health services, shared services, pillars, and the Ministry of Health

- External partners including the Primary Health Networks, Aboriginal community leaders, General Practitioners and Non-Government Organisations.

We thank everyone for their energy and commitment to making this plan a pragmatic and informed pathway to our future.

Future Health:
The Strategic Framework

Our Vision

A sustainable health system that delivers outcomes that matter most to patients and the community, is personalised, invests in wellness and is digitally enabled.

Our Values:

Collaboration
Openness
Respect
Empowerment

The Future Health Strategic Framework is the roadmap for our health system to achieve NSW Health's vision. It will help guide our next decade of care in NSW, while adapting to and addressing the demands and challenges facing our system. The framework is also a reflection of the aspirations of the community, our patients, workforce and partners in care for how they envisage our health system by 2032.

The key objectives are unpacked and discussed in more detail in this strategic plan.

Strategic outcomes	Key objectives
Patients and carers have positive experiences and outcomes that matter: People have more control over their own health, enabling them to make decisions about their care that will achieve the outcomes that matter most to them.	1.1 **Partner with patients and communities** to make decisions about their own care 1.2 **Bring kindness and compassion** into the delivery of personalised and culturally safe care 1.3 **Drive greater health literacy** and access to information 1.4 **Partner with consumers** in co-design and implementation of models of care
Safe care is delivered across all settings: Safe, high quality reliable care is delivered by us and our partners in a sustainable and personalised way, within our hospitals, in communities, at home and virtually.	2.1 **Deliver safe, high quality reliable care** for patients in hospital and other settings 2.2 **Deliver more services** in the home, community and virtual settings 2.3 **Connect with partners** to deliver integrated care services 2.4 **Strengthen equitable outcomes and access** for rural, regional and priority populations 2.5 **Align infrastructure and service planning** around the future care needs
People are healthy and well: Investment is made in keeping people healthy to prevent ill health and tackle health inequality in our communities.	3.1 **Prevent, prepare for, respond to and recover** from pandemic and other threats to population health 3.2 **Get the best start in life** from conception through to age five 3.3 **Make progress towards zero suicides** recognising the devastating impact on society 3.4 **Support healthy ageing** ensuring people can live more years in full health and independently at home 3.5 **Close the gap** by prioritising care and programs for Aboriginal people 3.6 **Support mental health and wellbeing** for our whole community 3.7 **Partner to address the social determinants of ill health** in our communities
Our staff are engaged and well supported: Staff are supported to deliver safe, reliable person-centred care driving the best outcomes and experiences.	4.1 **Build positive work environments** that bring out the best in everyone 4.2 **Strengthen diversity** in our workforce and decision-making 4.3 **Empower staff to work to their full potential** around the future care needs 4.4 **Equip our people with the skills and capabilities** to be an agile, responsive workforce 4.5 **Attract and retain skilled people** who put patients first 4.6 **Unlock the ingenuity of our staff** to build work practices for the future
Research and innovation, and digital advances inform service delivery: Clinical service delivery continues to transform through health and medical research, digital technologies, and data analytics.	5.1 **Advance and translate research and innovation** with institutions, industry partners and patients 5.2 **Ensure health data and information** is high quality, integrated, accessible and utilised 5.3 **Enable targeted evidence-based healthcare** through precision medicine 5.4 **Accelerate digital investments** in systems, infrastructure, security and intelligence
The health system is managed sustainably: The health system is managed with an outcomes-focused lens to deliver a financially and environmentally sustainable future.	6.1 **Drive value based healthcare** that prioritises outcomes and collaboration 6.2 **Commit to an environmentally sustainable** footprint for future healthcare 6.3 **Adapt performance measurement and funding models** to targeted outcomes 6.4 **Align our governance and leaders** to support the system and deliver the outcomes of Future Health

Strategic
Outcomes

2

01. Patients and carers have positive experiences and outcomes that matter

▷ Our future

People have more control over their own health, enabling them to make decisions about their care that will achieve the outcomes that matter most to them.

Why is it important?

Person-centred care is a valued strength of NSW Health and something of which we are proud.[5]

It prioritises safety and quality, and emphasises the importance of delivering care that is personalised to individual needs and preferences. Almost half of Future Health survey respondents ranked person-centred care as their highest priority for how we enhance clinical service delivery over the next decade.[6]

To deliver person-centred care and improve patient experience, we will continue to empower people to partner with clinicians to manage and make decisions about their own care, and ensure they are treated with kindness and respect.

It is important our patients and carers are confident to make decisions about their care. Their ability to engage in their care is often linked to their past experiences and interactions with the health system and can be enabled or limited by their health literacy and access to health information. A person who is engaged in their care is more likely to demonstrate better adherence to treatment, which leads to improved outcomes.

In order to embed person-centred care throughout our business, NSW Health recognises the importance of co-designing its services, systems and ways of working with patients and the community, and ensuring there is equity and inclusion in delivery of care for all patients.

The Elevating the Human Experience strategy was launched in 2020, and encompasses our partnership approach with patients, carers and families to continually improve and develop our services.

Key objectives

The following key objectives will guide implementation over the next decade:

1.1 **Partner with patients and communities** to make decisions about their own care

1.2 **Bring kindness and compassion** into the delivery of personalised and culturally safe care

1.3 **Drive greater health literacy** and access to information

1.4 **Partner with consumers** in co-design and implementation of models of care

Patients as co-pilots, not passengers.

1.1 Partner with patients and communities to make decisions about their own care

Partnering with patients and communities is an important focus area for NSW Health over the next 10 years.[7] More than ever people want to be partners in their own care, and work with the health system staff to understand what is important to them.

Effective partnerships can be achieved if staff are supported to form partnerships with patients and carers so that patients can be actively involved in their own care. A meaningful partnership promotes positive experiences and safe, quality care because care is personalised, and geared to deliver outcomes that matter most.[8]

The focus for our clinicians to deliver good partnering outcomes must include:

- Shared decision making

- Providing support for patients and carers to understand their diagnosis and options available

- Providing tailored options that resonate and are responsive to patient values, preferences and needs, and reducing unnecessary diagnosis, treatment or overtreatment

- Ensuring all staff involved in a patient's care have good communication, for example through case conferencing or multidisciplinary team meetings. This reduces duplication, builds trust and confidence between staff and teams, and promotes safe and quality care that is positive and personal for patients

- Facilitating a balanced partnership with patients and carers and recognising how best to support them to make informed decisions about their care.

Our Aboriginal Health stakeholders noted the importance of recognising cultural influences which may affect someone's ability to make decisions about their health. This includes having an accessible surrounding to make decisions, culturally safe spaces, and not feeling rushed.[9]

> **45 per cent of admitted adults wanted to be more involved in decisions about their care and treatment.**
>
> — **Bureau of Health Information 2020 Adult Admitted Patient Summary**

The benefits of partnering with patients and carers to make decisions about care include:

- Empowering patients to bring their 'expertise' to the table – personal values, cultural preferences, social circumstances, attitudes toward risk, previous or lived experiences, outcomes that matter to them

- Supporting patients to understand their health and the options available to them through meaningful discussions with their clinicians, and accessing information and decision tools

- Being more engaged in their own care can encourage better adherence to treatment and improved experiences and outcomes

- Advocating for the 'person' in the design and delivery of 'person-centred care' services and system

- Strengthening clinical safety and quality for patients because people are better informed about their care

- Strengthening NSW Health's person-centred approach to care and the future design of our health services and system.

There are already many ways in which NSW Health is partnering with patients including:

Establishing patient and consumer leaders to support partner-led delivery of care, including Champions of person-centred care, Agency for Clinical Innovation's Consumer Council, and Care navigators

Developing local solutions to enable collaborative partnerships with patients and carers:

- Innovative local implementation of the Recognise, Engage, Act, Call, Help (R.E.A.C.H) program – a system for patients, their families and carers to raise their worries with staff about changes in a patient's condition.[10]

- Patients of the Mona Vale rehabilitation unit are invited to participate in the handover process and are provided with information to help them lead the handover of care.

- Listening to patient and carer feedback to support service improvement.[11]

- Real-time feedback in emergency departments

- Your Experience of Service (YES) surveys and the Health Carer Experience Survey (CES) to collect patient and carer experiences of public mental health services.

- Using Patient Reported Measures (PRMs) for the integrated and systemic collection of patient experience and outcomes across NSW.

Listening to patient and carer feedback to support service improvement.

1.2 Bring kindness and compassion into the delivery of personalised and culturally safe care

Kindness and compassion are the cornerstone of providing personalised, high quality care. NSW patients and general public consistently rate the following aspects of their care as most important:

- That they are treated with respect and kindness
- Their questions are answered
- That they, their families and carers know what is going on and what to expect.

NSW Health is committed to celebrating and promoting initiatives such as "Kindness Works Here", the "Pandemic Kindness movement" and "World Kindness Day" reminding our staff that even small acts of kindness can make all the difference to patients and their families.

NSW Health promotes a strong, positive culture as embodied by our CORE values of Collaboration, Openness, Respect and Empowerment.

The cultural safety and competency of our health services impacts health outcomes, experiences of care, and accessibility to services for different communities. For Aboriginal and culturally and linguistically diverse (CALD) communities, there is a strong desire to feel culturally respected and heard when attending health services, and to ensure care is culturally appropriate and safe.[12] There is strong evidence that Aboriginal people have higher rates of hospitalisation and a greater burden of disease, but Aboriginal people often do not have equal access to medical services and procedures. The lack of culturally appropriate care can be a barrier to access. For example, some Aboriginal patients prefer to be treated locally rather than travel away from families, and that cultural norms and traditions make travelling for care more difficult and unappealing.[13]

NSW Health will continue to work in partnership with key Aboriginal health stakeholders and service providers, including the Aboriginal Health and Medical Research Council and Aboriginal Community Controlled Health Services. These partnerships are critical to genuine engagement with Aboriginal communities, and in co-designing culturally safe services and care that reflect and address the needs of Aboriginal communities.

Bringing kindness and compassion not only ensures a positive experience for people, during what is likely a challenging time for patients, carers and their families, but can make an enormous difference to outcomes.

At the heart of what we do is always a very fundamental set of relationships between people who are able to help and those at very vulnerable stages of their lives. This happens every day.

— **Secretary, NSW Health**

1.3 Drive greater health literacy and access to information

Health literacy and access to information are critical for empowering patients to make informed decisions. The ability to access, read, understand and use health-related information is essential to make informed health decisions.[14]

Low health literacy can limit someone's ability to fully participate in making decisions about their care. Our clinicians need to be responsive to varying levels of health literacy and support participation for all.

Access to personalised information is an enabler for making decisions about care, as patients rely on information and recommendations from their clinicians. An ongoing challenge for the health system is better access and availability of personalised information to patients. Advances in this area will help patients make more informed and independent decisions.

> I don't think mainstream services such as hospitals make you feel welcome. I feel like my local Aboriginal Medical Service is more set up and culturally appropriate… I feel comfortable there.
>
> **— Aboriginal patient**

> World class health is centred around consumer feedback and co-design, it is about working through the entire patient journey with the consumer at every stage of the end-to-end journey.
>
> **— COVID Community of Practice virtual care session**

1.4 Partner with consumers in co-design and implementation of models of care

Consumer-informed models of care will help to drive new ways of working. A co-design approach is an effective way to represent lived experiences in health system decision-making and recognise their contribution to positive experiences and outcomes for patients and communities.

NSW Health utilises consumer representatives to effectively and consistently reflect diverse perspectives in the co-design and implementation of new models of care. They take up specific roles on behalf of consumers of health services including patients, families, carers, service users or clients, those with lived experience and broader communities. Consumer representatives ensure patient perspectives are included and integral with the overall aim of improving healthcare.

The value added by the consumer representatives can be further strengthened through increased connection, between the consumer representatives amongst each other, and between the representatives and the communities they represent. The increased connections will ensure that diverse perspectives are heard, and will nurture a more skilled, knowledgeable and confident consumer representative base. Building capacity for consumer representatives to partner with NSW Health to tackle strategic health challenges is an important part of managing future change in the health system.

What does success look like?

- People have more control of their own health through closer partnerships with health professionals

- NSW Health staff understand the goals of the individual and use these preferences, as well as best evidence, to share decision making

- Patients, families and carers are shown compassion and kindness

- NSW Health is delivering culturally safe and competent health services in our communities

- Health information is rich in content and highly accessible to help people make informed choices about their care

- Consumer representatives provide highly valuable patient and community perspectives in the co-design and implementation of models of care

02. Safe care is delivered across all settings

Our future

Safe, high quality, reliable healthcare is delivered in a sustainable and personalised way, within our hospitals, in communities, at home and virtually.

Why is it important?

There is a preference amongst patients and the community to be treated closer to home where possible, whether this is in the community, or virtually in the comfort of their home.[15] However, where necessary, complex care will be required to be delivered at specialised sites.

Two thirds of disease burden in NSW are due to conditions that could be largely managed outside of the hospital setting. Moving care to non-hospital environments can help:

- provide more options for patients in how they receive care

- achieve better outcomes and experiences for patients, and

- reduce the burden on acute care and prevent avoidable hospitalisations.

Our clinicians have expressed a need to explore new ways of working which connects health professionals across teams and enables care to be delivered in different settings.[16] Multidisciplinary collaboration brings together professionals from a range of disciplines to deliver comprehensive clinical care.

The collective expertise integrates care for a patient over the course of their care, promotes continuity of care and supports patients to make decisions on where they prefer their care to be delivered.

Our hospitals will continue to be one of the most appropriate care settings for many health conditions. However, the burden of disease in the community that the NSW Health system faces now and will continue to experience in coming decades, requires a blended approach and greater integration with primary care.

Clinical safety is everyone's responsibility. Better patient safety relies on the ongoing commitment from patients, families, carers and all staff to work collaboratively through trust, openness and mutual accountability.

NSW Health promotes and supports equity and inclusion in the design and delivery of care for our patients, particularly our rural, regional and priority populations.

Key objectives

The following key objectives will guide implementation over the next decade:

2.1 Deliver safe, high quality reliable care for patients in hospital and other settings

2.2 Deliver more services in the home, community and virtual settings

2.3 Connect with partners to deliver integrated care services

2.4 Strengthen equitable outcomes and access for rural, regional and priority populations

2.5 Align infrastructure and service planning around the future care needs

2.1 Deliver safe, high quality reliable care for patients in hospital and other settings

Hospitals will always remain at the core of the NSW Health system for patients who cannot be supported in the community, home and virtual settings. NSW Health is committed to continue improving outcomes for patients in hospitals through a number of initiatives:[17]

- strengthening quality improvement in care by reducing unwarranted clinical variation and low-value care, improving cancer care and cancer outcomes

- ensuring emergency department patients are treated within benchmark times across three triage categories

- delivering elective surgery performance in accordance with recognised benchmark times

- increasing access to diagnosis and treatment for rural and regional patients

- reducing re-admission rates to hospitals.

More broadly, NSW Health is driving the continued focus on quality and safety in all care settings by introducing new service models to meet emerging health issues and continuously improve clinical care.

2.2 Deliver more services in the home, community and virtual settings

NSW Health is working towards having more people access care outside hospital settings and provide more options for care in the community and the home, facilitated through strong partnerships with GPs and non-government organisations.[18] There is a shared sentiment that the concentration of services in acute settings is high and is not sustainable nor conducive to optimal patient outcomes and experiences.[19,20]

Enabling more services to be delivered in the home, community and virtually has the potential to:[21]

- improve physical and mental health outcomes for patients

- improve patient experience by offering care in a convenient and comfortable environment and supporting recovery and management outside the hospital

- provide alternative settings of care where there may be limited access e.g. for rural and remote communities

- drive person-centred care and provide personalised care and service options

- reduce frequent and unnecessary admissions

- improve accessibility and remove the impacts of travel e.g. cost, time, and distance

- realise longer term sustainability.

> Some of our mob say that they won't go to the hospital as they don't want to be sent away to Lismore, away from their family.
>
> — **Aboriginal patient**

Virtual care

The use of virtual care in NSW has been evolving for many years through its early origins in telehealth services. Now, with advances in technology, the support for health professionals and benefits for patients are even greater.

Virtual care is one of a number of options for healthcare delivery that safely connects patients with health professionals to deliver care when and where it is needed. Virtual care can be delivered in different ways, including:

- in real time using telephone or video conferencing, a service that is highly utilised for mental health, chronic disease and cancer patients, and can leverage multidisciplinary clinical teams;

- through sending clinical information via email (such as medical images) and providing remote diagnosis or triage;

- by contacting patients via email for the purpose of streamlining pre-admission; and

- by relaying information collected through remote monitoring, outside of a clinical consultation.

Virtual care coexists as a complementary option for patients and communities in addition to face-to-face care. There will be situations where care and treatment require or benefits from face-to-face engagement. However, there is strong sentiment from the system and patients that virtual care is a highly valued option.[22,23,24]

Existing virtual care delivery models, include:

- telehealth, e.g. the NSW Telestroke Service

- virtual wards, virtual consultations and virtual health education for patients and staff

- remote monitoring and video consultations, e.g. virtual ICU support and virtual Hospital in the Home

- real-time, remote patient data monitoring and collection

- regional hub and in-reach services

- virtual connectivity – collaborating with specialist clinicians for expert advice, interpretation services, connecting patients to loved ones

- virtual prevention and screening initiatives, e.g. Breast Screen Remote Assessment, and Go4fun online.

Care in the community and at home

Community-based care and care in the home further complement the virtual care services and involve initiatives that move care outside of the hospital setting.

Community based care includes:

- **Hospital in the Home** – provision of hospital-level care in a patient's home or in the community. Various models of this service delivery are operating in a number of LHDs and Networks.

- **Extended Care Paramedics** – expanded scope of practice for paramedics enabling the provision of a broad range of low acuity care interventions in the community setting following a triple zero call, where hospitalisation is not the best pathway.

- **Rapid Access Clinics** – outpatient clinics established to target specific, high prevalence health concerns in local communities and reduce hospitalisation.
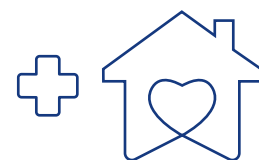
Community-based care and care in the home further complement the virtual care services.

Case studies: Delivering services in the home, community and virtually

The NSW Telestroke Service –hosted by Prince of Wales Hospital, the service offers people living in regional and rural areas increased access to life-saving stroke diagnosis and treatment. It connects local doctors to specialist stroke physicians via video consultation in the local emergency department. The service is already providing consultations to patients at 18 hospitals across regional and rural NSW, with a further five hospitals joining the service by June 2022.

High Risk Foot Services –provides outpatient clinics to treat diabetic high-risk foot disease which reduces hospitalisation for ulcers and infections and amputations. There is data showing that care in this setting results in better patient experiences and avoids significant costs to the system.

Paediatric Network –this NSW integrated care initiative upskills local health services staff in the best ways to utilise telehealth and other virtual care services in order to provide access to specialist paediatric care for children with complex needs.

ED to Community –delivers a tailored intensive case management and specialist care approach to clients in the community to improve their health and reduce the need for hospitalisation. Patients are assigned a case manager who supports them to see a GP and to help plan the care they need. Clients are likely to be socially isolated and disconnected from health and social care services and often attend emergency departments because they do not know where else to go. The pilot demonstrated a significant reduction of around fifty percent emergency presentations for enrolled patients over two years.

Planned Care for Better Health (PCBH) –provides early identification of patients at risk of hospitalisation and strengthens the care provided to them, to improve their experience of receiving care and to keep them healthier over the long term. PCBH coordinates care between the patient, primary care providers, community health providers, and other health and social care providers. By focusing on proactive preventative health, PCBH ensure people stay healthy longer, experience increased quality of life and avoid or reduce instances of hospitalisation.

Rpavirtual –NSW's first virtual hospital, uses technology to deliver healthcare in the community rather than in a hospital. It provides care by phone and video calling and enables remote monitoring of patient data. Patients are loaned an iPad which allows them to view their health data, sync medical device and health app data using Apple Health, and communicate with their remote care team based in Royal Prince Alfred Hospital. Patients can arrange for home visits or be referred to their hospital care team if needed. During the COVID-19 pandemic, rpavirtual ramped up to provide virtual care services to patients testing positive to COVID-19.

Integrated Care Alliance –formed by Hunter New England LHD and Hunter New England Central Coast Primary Health Network, the alliance establishes a jointly owned integrated care plan to deliver innovative, locally relevant solutions to measurably improve the health of their communities.

Aged Care Rapid Assessment and Investigation Unit (ARIA) –established by South West Sydney LHD, this specialist-led multidisciplinary team actively case-finds older patients in Emergency Departments for admission to the ARIA unit, and delivers priority assessment, investigation and integrated care planning.

Pathways to Community Living Initiative –established by Western Sydney LHD, the initiative facilitates inpatient and community mental health teams to work collaboratively to support people with severe mental illness.

2.3 Connect with partners to deliver integrated care services

NSW Health is committed to connecting providers and partners across all settings and locations including primary care and non-governmental organisations to strengthen the integration of care for patients.

Integrated care encourages shared clinical accountability for patient outcomes, supports staff to work at their full potential and scope of practice, and alleviates staff fatigue and burnout. In turn this enhances a patient's experience by streamlining their navigation of the system and providing a seamless experience across the continuum of care.

We have heard experiences of structural silos, hierarchies and ways of working that are not always supportive of multidisciplinary collaboration. NSW Health's efforts to improve the health and wellbeing of patients and communities cannot be achieved in isolation. It is critical to work across health disciplines and with partners outside of NSW Health who directly or indirectly impact health outcomes.

Working with the mindset of 'one system' will help overcome structural barriers across NSW Health and with providers and partners outside of NSW Health. A 'one system' approach will:

- enhance continuity of care for patients moving across settings or systems e.g. discharge to GP, or shifting into community-based care
- promote innovation and co-design to further streamline and integrate a patient's journey
- support a coordinated approach with other sectors to address social determinants of health e.g. connecting with Education and Justice.

Many presentations to Emergency could be avoided with better communication and pathways between hospital and community settings. This would have a great impact on lowering presentations to the Emergency Department and assisting people to better manage their own health.

— Emergency Department COVID Community of Practice

Better integration with primary care to provide more holistic care to community.

— Nepean Blue Mountains LHD clinician virtual care session

NSW Health has a long-standing commitment to integrating care guided by the NSW Health Strategic Framework for Integrating Care. Integrated care initiatives include:

Planned Care for Better Health – providing early identification and coordination of care for patients at risk of hospitalisation.

Emergency Department to Community – delivering a tailored intensive case management and specialist care approach to clients in the community.

Specialist Outreach to Primary Care – building the capability of GPs to provide patients with specialist assessment and care in the community. GPs are linked with medical specialists to enhance their ability to assess and manage a variety of conditions such as early onset dementia, heart disease and diabetes to meet the needs of their patients and the community.

Residential Aged Care (RAC) – promoting partnerships between NSW Health and RAC facilities to better manage the needs of residents in their care. The aged care staff are trained in early identification and management including appropriate escalation pathways through the provision of clear standard operating procedures.

Vulnerable Families – providing care coordination for families who require health and social care support from multiple agencies. Access to better coordinated care ensures families' health and social care needs are met, enabling parents/carers to provide a safe and nurturing environment for their children.

Paediatric Network – upskilling local health services staff using telehealth and other virtual care services, enabling access to specialist paediatric care, for children with complex needs, closer to home.

Collaborative commissioning – identifying and prioritising local health needs and developing care pathways to improve patient and community outcomes. It aims to address the gaps in patient care and embed local accountability to ensure care is truly integrated for patients.

NSW Health will continue to partner with the Commonwealth to progress future national funding streams secured through the signed Addendum to the National Health Reform Agreement, operating from 1 July 2020 to 30 June 2025. The Addendum sets out arrangements over five years for federal funding of public hospitals and national reform, including:

- improving how health, aged care and disability systems intersect
- long-term reforms that improve patient outcomes and
- reduce emergency department demand, avoidable hospital admissions, and extended stays.

2.4 Strengthen equitable outcomes and access for care for rural, regional and priority populations

A person-centred approach will promote and support equity and inclusion in the design and delivery of care for our patients, particularly our priority populations. This includes, but is not limited to, rural and regional communities, Aboriginal and Torres Strait Islanders, people from culturally and linguistically diverse backgrounds (CALD), people with mental illness, people with disabilities, children and young people, victims of violence, abuse and neglect, refugees, and people in low socioeconomic deciles.

NSW Health is committed to a coordinated effort between NSW Health, clinicians, patients and local communities to deliver innovative solutions that address the health needs of our specific communities. Improved access does not simply mean increasing the number or services available. It also requires careful consideration of the demographic attributes unique to each community in the design and delivery of care. A person-centred approach will help address inequitable variations in how care is delivered, accessed for all populations.

> There should be greater access for those that are more vulnerable in our community where access to care is restricted, be it our ageing population, those residing in rural areas, people with mental health issues and our Aboriginal population.
>
> **— Survey respondent**

2.5 Align infrastructure and service planning around the future care needs

Historically NSW Health has focused on delivering acute capacity in hospitals. In 2017-18 approximately 76 per cent of NSW Health's capital expenditure was spent on providing, redeveloping and building acute health services.[25]

Going forward, health infrastructure and service planning must be agile and responsive to changes in demand and future care needs, and accommodate emerging trends in care, particularly supporting digitally enabled care. The 20 Year Health Infrastructure Strategy has identified significant trends that are transforming how patients and clinicians interact, the services that people want, and the skills and infrastructure needed to deliver them. These include demographic and social shifts shaping future demand; the needs and expectations of patients and communities; and research, technology and innovation.

Key priorities for service and infrastructure planning are to be strongly informed by data and analytics, to engage with clinicians and patients early in the process, and to drive collaborative whole-of-system optimisation early in the planning process. This will lead to more affordable and sustainable assets, better re-use of assets, and innovation in the way services can be delivered for patients and communities.

What does success look like?

- People are given choices for the setting in which they receive healthcare services to best suit their needs in a clinically appropriate way

- The health system is set up to deliver increasing volumes of care in community, home and virtual settings in a safe, high quality reliable manner

- People are receiving a more coordinated care experience from NSW Health and its partners in care

- Hospitals are continuing to achieve timely access and quality of care outcomes compared to benchmarks

- Infrastructure and service planning is aligned to changing demand in particular supporting digitally-enabled care settings

- Priority populations have increasingly more equitable outcomes and access to care

> Our approach to future service and infrastructure planning must shift outside of acute care settings towards non-hospital-based services that can service future demand.
>
> **— NSW Health Outcome and Business Plan 2020**

3. People are healthy and well

Our future

Investment is made in keeping people healthy, to prevent ill health and tackle health inequality in our communities.

Why is it important?

The NSW health system cannot rely on treating illness and acute intervention, and will benefit from a shift towards greater prevention, early intervention, and a focus on wellness.[26,27]

Some 38 per cent of the disease burden is preventable and due to modifiable risk factors such as tobacco use, being overweight or obese, high blood pressure or poor diet.[28] An increased focus on promoting positive health behaviours across the population, delivering early risk-based interventions, supporting people to manage chronic conditions, and being responsible for their own health across their lifespan, will not only help strengthen the opportunity for people to benefit from wellness no matter their age, but relieve some of the pressure on the system.

Of key importance over the next decade is a focus on New Beginnings, Towards Zero Suicides, Ageing Well, Mentally Healthy Living and Closing the Gap. We can also enhance our approach through more targeted initiatives such as identifying patients with early markers for chronic disease and embedding prevention and health promotion in clinical settings.

NSW Health acknowledges there is no one-size-fits-all solution to keep people healthy and well, and in our approach to addressing chronic and other health conditions. People are not affected equally or the same. A person-centred approach, and recognition of the broader influences affecting health ensures we provide care that works for and is likely to deliver best outcomes for that person.

There is widespread evidence of a strong relationship between health and social determinants of health. Social determinants of health such as income, education and housing can strengthen or undermine someone's health trajectory and outcomes. Therefore, NSW Health's efforts to support people to be healthy and well, and to address social determinants of health cannot be achieved in isolation and requires us to work collaboratively across health disciplines and with partner agencies and organisations.

Key objectives

The following key objectives will guide implementation over the next decade:

3.1 Prevent, prepare for, respond to and recover from pandemic and other threats to population health

3.2 Get the best start in life from conception through to age five

3.3 Make progress towards zero suicides recognising the devastating impact on society

3.4 Support healthy ageing ensuring people can live more years in full health and independently at home

3.5 Close the gap by prioritising care and programs for Aboriginal people

3.6 Support mental health and wellbeing for our whole community

3.7 Partner to address the social determinants of ill health in our communities

3.1 Prevent, prepare for, respond to and recover from pandemic and other threats to population health

NSW Health will continue to work with partner agencies to prepare for, respond to and recover from hazards which can adversely affect public health or health system performance, such as COVID-19 or natural disasters.

Key initiatives include maximising immunisation; monitoring, investigating and controlling communicable diseases; maintaining safe drinking water; assessing the health impacts of contaminated air, water, land and the built environments; regulating public health threats under the Public Health Act; and promoting safe behaviours.

More generally, population health services aim to create social and physical environments that promote health and reduce preventable health issues. The focus is on providing people with accessible information to encourage healthier choices, particularly working to reduce the harmful use of tobacco, drugs and alcohol and attaining healthy weight.
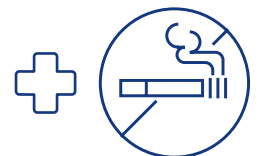
The focus is on providing people with accessible information to encourage healthier choices.

It is well documented that 90% of a child's brain development occurs by age 5.

3.2 Get the best start in life from conception through to age five

It is well documented that 90% of a child's brain development occurs by age 5. Early experiences in the first 2000 days of life can have flow-on impacts in every decade of their lifetime including:[29]

- a predictor of how a child will learn in primary school

- a predictor of school performance, adolescent pregnancy and involvement with the criminal justice system in the adolescent years

- risk of drug and alcohol misuse, antisocial and violent behaviour

- obesity, elevated blood pressure and depression in 20 to 40-year-old people

- a predictor of coronary heart disease and diabetes in 40 to 60-year-old people

- premature ageing and memory loss in older age groups.[30]

NSW Health will support women who are pregnant, their families and communities and work with our partners in care to ensure that the 100,000 babies born each year in our state have the best start in life.[31] This supports the NSW Government's Brighter Beginnings initiative, a whole-of-government approach to improving the lives of parents and families in the first 2000 days of their child's life.[32] NSW Health works with a range of service providers, including other government agencies, to achieve this.

3.3 Make progress towards zero suicides recognising the devastating impact on society

NSW Health is committed to reducing the rate of suicide deaths in NSW by 20%. Every week, an estimated 16 lives are lost to suicide. Every suicide is a devastating tragedy and its impacts are felt across families, friends and communities. NSW Health is leading efforts to roll out a range of initiatives to reduce the rate of suicide deaths in NSW. These initiatives are intended to:[33]

- provide best practice crisis care and support
- build local community resilience
- improve systems and practices.

These initiatives are being delivered with the input from people with a lived experience of suicide. Given the complexity of suicide, NSW Health will also work closely with communities, partners in care, service providers and other government agencies to take focused and coordinated steps to reduce suicide and provide greater support to those in need.

By 2031, more than a fifth (22%) of NSW's population will be over 65.

3.4 Support healthy ageing ensuring people can live more years in full health and independently at home

By 2031, more than a fifth (22%) of NSW's population will be over 65. NSW Health supports having more options available to older people that supports healthy ageing, and to remain longer in their homes or communities. NSW Health is undertaking a range of initiatives that support the NSW Government's response to the opportunities and challenges of an ageing population. Ageing Well in NSW: Seniors Strategy 2021–2031 brings together a raft of work from across the NSW Government in areas such as planning, transport, housing and health.[34]

One of the strategy's key goals is for older people in NSW to live active and healthy lives, with improved physical and mental wellbeing. This means they can continue to stay in their own homes and contribute their skills, knowledge and experience to the economy and their local communities.

NSW Health is working to deliver a more integrated and collaborative approach with older people, and working with community organisations and services, health and mental health providers, aged care and government agencies to foster healthy and active ageing. This will include investment in specialist services and infrastructure for older people, as well as ongoing support for programs designed to support the health and wellbeing of older people.

3.5 Close the gap by prioritising care and programs for Aboriginal people

Closing the gap in health outcomes and improving overall health and wellbeing for Aboriginal people to enjoy long and healthy lives is a key priority for NSW Health and Government.[35] Aboriginal people experience disproportionately heavier burden of health conditions and often face greater barriers to accessing services that help mitigate these.

There are a number of transformative elements NSW Health can apply to enhance the quality and cultural safety of mainstream health service delivery for Aboriginal people and communities. This includes:[36]

• Identifying and mitigating racism, discrimination and unconscious bias in Aboriginal communities' experience of care

• Embedding and promoting cultural safety and appropriateness that reflects Aboriginal social and cultural concepts of health and wellbeing in programs and services

• Delivering services in partnership with Aboriginal organisations, communities and people

• Improving engagement with Aboriginal people.

NSW Health supports a wide range of services through partnership arrangements to address maternity, child and family health; mental health; chronic disease and healthier lifestyles (e.g. overweight and obesity, smoking cessation). There are also opportunities to learn from what works well for Aboriginal communities, such as adopting a wellness-based approach, or in taking learnings from Aboriginal Community Controlled Health Services, which support the delivery of holistic value-based healthcare.[37]

While there is still much work to do, there has been encouraging progress in health outcomes, including a substantial decline in Aboriginal infant mortality, a reduction in the gap in mortality between Aboriginal and non-Aboriginal infants, increased early antenatal visits for Aboriginal mothers, significant improvements in immunisation coverage, reduced smoking rates, and decreased impacts of infectious diseases.[38]

> We cannot apply a generalised approach to mentally healthy living – think about this from an Aboriginal system.
>
> **— Aboriginal Community Controlled Health Service session**

Delivering services in partnership with Aboriginal organisations, communities and people.

3.6 Support mental health and wellbeing for our whole community

Of the eight million people living in New South Wales in 2017-18, approximately 1.3 million will have experienced a mental health challenge and an additional 1.8 million are at risk.[39] Mental health and wellbeing is as important as our physical health. NSW Health is leading efforts to create mental health services that best serve the people it is intended to help.

A long-term ten-year program of reform to NSW's mental health services is currently underway for:[40]

- strengthened prevention and early intervention, with a stronger focus on services for children and young people

- a greater focus on community-based care, striking a better balance between care provided in hospitals, and that provided in the community

- a more responsive system, with improved specialist services for those with complex needs

- better integration between mental health and other providers including justice and human services, other health agencies and Australian Government funded services

- greater investment in developing the mental health workforce – including the peer workforce – as well as Non-Government Organisations capacity to deliver services.

NSW Health's reform program supports building a mental health system that promotes recovery and mentally healthy living –so people can achieve the best quality of life possible. This means supporting people to continue living in their communities with a support network where possible and ensuring individuals with complex needs receive high quality acute and long-stay care.

3.7 Partner to address the social determinants of ill health in our communities

NSW Health is committed to providing care for the whole person including their wellness and social determinants of health. This aligns with the World Health Organization's definition of someone's health being more than just the absence of disease, but rather their complete physical, mental and social wellbeing.[41]

There is widespread evidence indicating the direct and indirect impact of social determinants (such as employment, housing, education and social support) on people's health.[42] For example, people living in the lowest socioeconomic areas compared to the highest socioeconomic areas are 1.6 times more likely to have at least two chronic conditions.[43] Anecdotal evidence from clinicians report people experiencing poverty and disadvantage consistently experience barriers to healthcare and poorer health outcomes.[44]

To support people to be well and to prevent disease and injury, NSW Health commits to coordinate efforts with our stakeholders and partners such as Communities and Justice, Education, Planning, Primary Care and Non-Government Organisations to act collectively on the social determinants of health and promote wellness.

Integrated care is a state-wide program to coordinate and provide seamless, effective and efficient care that reflects the whole of a person's health needs from prevention through to end of life, and across both physical, mental health and social needs.

Wellness is not just physical health but mental and emotional health.
— **General Public, Metro**

What does success look like?

- Reduce the impact of infectious disease and environmental factors including COVID-19 and natural disasters on the wellbeing of the community

- Reduce the harmful use of tobacco, drugs and alcohol

- Strive for healthy weight

- Children get the best possible start to life in their first 2000 days

- NSW Health and its key stakeholders will work in partnership to reduce rates of suicide deaths in NSW

- Our system supports older people to live more years in full health, be independent, and well in their homes

- Improvements are made in health equity, experiences and outcomes for Aboriginal people

- Mental health services are recovery-focused and person-centred

- NSW Health is working collaboratively with other agencies to improve people's health outcomes

4. Our staff are engaged and well supported

Our future

Staff are supported to deliver safe, reliable, person-centred care driving the best outcomes and experiences.

Why is it important?

The way we work has a direct impact on patient experience and outcomes, as well as staff performance and experience. It is important to support and empower our staff to deliver the best outcomes and experiences for our patients and promote and support continuous improvement for clinical safety and quality.

A positive workplace environment and psychological safety is important to staff wellbeing, and in supporting collaborative working, innovation and learning for all clinicians, non-clinicians and volunteers.

The *NSW Health Workforce Plan* identifies a fit-for-purpose workforce with the behaviours and capabilities to ensure we can deliver NSW Health's vision. A diverse workforce will help ensure the way we design and deliver services and care resonate and are responsive to the needs of our communities, reflect the values and behaviours in those communities, and deliver the outcomes that matter.

To keep up with changing health needs and rapid advances in technology and scientific innovations, a program of learning and development, combined with more flexible structures and ways of working will be required to enable collaborative, multidisciplinary and digitally-enabled models of care.

Workforce reforms are challenged by complex interactions and hierarchies and an entrenched professional culture between different disciplines and clinical groups. It is further challenged by rigid structures and industrial awards which do not always align with collaborative and outcomes-focused ways of working. Some of these barriers will need to be unlocked to deliver the work practices that are needed to support the future health system.

Key objectives

The following key objectives will guide implementation over the next decade:

4.1 **Build positive work environments** that bring out the best in everyone

4.2 **Strengthen diversity** in our workforce and decision-making

4.3 **Empower staff to work to their full potential** around the future care needs

4.4 **Equip our people with the skills and capabilities** to be an agile, responsive workforce

4.5 **Attract and retain skilled people** who put patients first

4.6 **Unlock the ingenuity of our staff** to build work practices for the future

The way we work has a direct impact on patient experience and outcomes, as well as staff performance and experience.

4.1 Build positive work environments that bring out the best in everyone

Building a positive workplace environment and culture empowers staff to work, innovate and learn together in a safe place and promotes accountability. This manifests in delivering safe, quality care and outcomes.[45] Clinicians expressed the importance of 'experimentation, openness, courage to talk to anyone without feeling the need to seek permission or fear being punished'.[46]

Our future workplace culture and environment should:

- prioritise staff wellbeing, and recognise burnout and change fatigue in our people

- strengthen psychological safety and team working to ensure patients experience safe, reliable care and better outcomes

- promote an inclusive and supportive culture driven by clear organisational values that reflect how people behave

- drive fairness and equality of opportunities for staff at all levels and in all locations

- recognise success and high performing staff.

Investing in cultural change and prioritising creating a workplace where staff can work at their best will improve the delivery of quality healthcare.

— Future Health Survey

4.2 Strengthen diversity in our workforce and decision-making

There are many dimensions of diversity in our workforce. Our staff are a reflection of the community that they come from, and their experiences. Their understanding of their community needs to be more highly valued in our organisation for us to be successful in delivering health services that truly work for the people it is intended to help.

Key challenges include:

- How we invest and resource our Aboriginal Health workforce to better recognise the knowledge they bring and extent of their activities outside of traditional work hours or settings. This includes greater Aboriginal representation in the NSW Health workforce particularly in leadership roles, and supporting improved recruitment, retention, education and training strategies for Aboriginal staff. Our Aboriginal health workforce is critical to ensuring cultural safety across the health system and is fundamental to supporting Aboriginal patients achieving improved health and wellbeing outcomes.

- Attaining a balance of female representation and equality in the workforce means ensuring that women have all opportunities open to them to participate in management and leadership levels.

- Rural areas have a unique set of challenges in addition to those experienced by the remainder of the health system due to their geographical isolation. The distribution of the workforce, recruitment and retention are significant challenges.

- Our workforce who have disabilities require an increased level of support to ensure they can do their best work when they are at work, and do not face avoidable barriers in the workplace.

> Our workforce diversity should be reflective of the diversity of our communities.
>
> **— eHealth session**

4.3 Empower staff to work to their full potential around the future care needs

Supporting and providing more opportunities for our staff to reach their full potential allows our health system to leverage and enhance their expertise, skills and experiences. By operating at their highest level of training and skills, our workforce is able to spend more time doing what they need to with their patients, to deliver safe, quality care and outcomes that matter.

The NSW Ambulance Extended Care Paramedic Program is an example of an empowered staff program which dispatches specially trained paramedics with extended clinical scope to undertake specific assessment and care management often in response to Residential Aged Care Facilities.

In the future, NSW Health needs to enable delivery of new care models and different ways of working by removing professional silos, promoting collaboration and flexibility across disciplines, and having a workforce working at their full potential.[47]

4.4 Equip our people with the skills and capabilities to be an agile, responsive workforce

NSW Health will ensure our people have the skills, information and capability to deliver care in the future.

Workforce training and development must ensure continued work readiness to address changing health and patient needs, and lead quality improvement for patient safety. We will continue to grow and support a workforce that is highly skilled, digitally enabled, works collaboratively across disciplines and settings, and is supported by a culture of leadership, collaboration and innovation.[48]

In particular, our system has seen growing demand and importance for delivering digitally enabled and virtual care, and the use of Artificial Intelligence and analytics to support decision-making. NSW Health will embed digital literacy, new technical skills and capabilities to use and deliver digitally enabled care, data skills and analytics, and change readiness will be a key focus for workforce development and training.[49]

NSW Health will foster a culture of continuous learning and offer both broad-based and targeted training and development pathways.

> Using pharmacists at the top of their scope reduces medical, nursing and clinic workload. NSW needs to review staffing at a fundamental level to improve patient outcomes and reduce medication errors.
>
> — **Mid North Coast LHD virtual care session**

> People feel like their view is important now – people are getting heard, and people are now more willing to work outside silos and allow their staff to venture beyond the immediate team to capture emerging new knowledge and ways of working.
>
> — **Community of Practice virtual consultation**
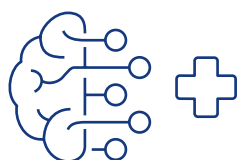
NSW Health will foster a culture of continuous learning and offer both broad-based and targeted training and development pathways.

4.5 Attract and retain skilled people who put patients first

Many NSW citizens and patients speak highly of the NSW Health workforce ranging from their interactions with doctors, nurses, hospital kitchen staff and other public health professionals. There is a high degree of trust and confidence in our health professionals, in particular their professionalism, expertise and genuine interactions.

Our workforce will need to expand over the coming years to meet the changing needs of a diverse population across NSW. NSW Health is building a pipeline of future workforce that are future-ready and will enhance recruitment and retention of quality staff that put patients first.

We will continue to identify and understand factors and drivers of potential change in our workforce model and systems. Accessible and accurate statewide workforce data will enable more effective workforce planning and service delivery. This will help identify potential workforce gaps and trends, emerging disruptions, demand for care and support us to mitigate these in a timely way.

NSW Health continues to make significant investment in our rural health workforce.

Our rural, regional and remote workforce

Around one third of the NSW population lives in regional areas (where 'regional' refers to all areas outside of Greater Sydney, Newcastle and Wollongong).[50] NSW Health recognises that continued work is required to ensure that people living in rural, regional and remote areas of NSW can access the best care and experience good health outcomes, and address gaps in workforce.

NSW Health continues to make significant investment in our rural health workforce. Some of the challenges in attracting medical workforce include workload distribution and sustainability, infrastructure, and professional development opportunities.

Significant work is underway to continue attracting and retaining high quality staff, ensuring a pipeline of rural health workforce into the future, and to address concerns on workload distribution, infrastructure and professional development. Initiatives include:

- Rural Preferential Recruitment Program which supports junior doctors undertaking their first two years of work in a rural location
- Extensive training networks linking metropolitan and rural hospitals in speciality clinical areas
- Clinical placement grants for allied health and nursing and midwifery students to subsidise rural clinical placements
- Rural Allied Health Locum Program to provide locum coverage to sole allied health practitioners so they can access professional development and leave
- Aboriginal Medical Pathways Program for Aboriginal doctors in rural areas.

Significant work is underway to continue attracting and retaining high quality staff.

4.6 Unlock the ingenuity of our staff to build work practices for the future

The systems that govern our industrial and employment arrangements are generally structured around patient care provided in hospital settings and need to better reflect the integration of care across broader health delivery settings.

We need modern systems of employment rules that ensure fairness and safety for our valued workforce and unlock the ingenuity of staff and enable them to use their skills to collaborate and innovate to improve health outcomes.

> ...staff have time, space and energy to be innovative and invest in quality improvement.
>
> **— Hunter New England LHD session**

What does success look like?

- NSW Health demonstrates a positive workplace culture where leaders value and energise staff, and staff wellbeing and psychological safety is prioritised

- Our workforce is diverse at all levels of the system and representative of the people NSW Health serves

- Staff are supported to work to their full potential through extended scope of practice, multi-skilled and combined-function roles

- Staff are provided ongoing opportunities to learn and upskill, so they are fit-for-purpose for now and the future

- Staff are digital-ready, and have the capability and confidence to work in the changing workplace

- NSW Health is a highly valued place to work with good retention rates, and ability to attract skilled people

- Regional, rural and remote workforces better match local demand

- Contemporary employment arrangements are introduced

5. Research and innovation, and digital advances inform service delivery

Our future

Clinical service delivery continues to be transformed through health and medical research, digital technologies, and data analytics.

Why is it important?

Research and innovation are critical to improving safe and quality outcomes and improving experiences for patients and the community.

It creates exciting new opportunities for prevention, diagnosis and treatment, builds our evidence base for informing how we develop and deliver the best care possible and improves outcomes that matter to patients.

Research is energised and enabled through collaboration between multiple organisations and research bodies, and the development of health precincts by NSW Health is aimed at supporting this innovation environment.

Health data and analytics has become essential to the system and used extensively to inform health and service planning and delivery and leveraged to achieve better patient experience and outcomes. In the future, a secure, end-to-end view of patient information and interactions would greatly contribute to safe, high quality and efficient care giving.

The emergence of new technology is increasing capacity to provide targeted healthcare through precision medicine, which will support disease prevention, more accurate prediction, diagnosis, and highly targeted treatments. It must be recognised, however, that technological change drives growth in spending.

Clinicians and patients expect health technology to be part of everyday care. The appetite for and confidence in digital health has increased as a result of changing policies, benefits and successes particularly in the response to COVID-19. New technologies are being incorporated into the suite of healthcare options available to consumers, enabling virtual care and other digitally enabled models. The technology-led innovation within health needs to be supported with accelerated investment in systems, infrastructure, security and intelligence.

Key objectives
The following key objectives will guide implementation over the next decade:

5.1 **Advance and translate research and innovation** with institutions, industry partners and patients

5.2 **Ensure health data and information** is high quality, integrated, accessible and utilised

5.3 **Enable targeted, evidence-based healthcare** through precision medicine

5.4 **Accelerate digital investments** in systems, infrastructure, security and intelligence

NSW Health is committed to strengthening the translation of research and innovation into evidence-informed policy and clinical practice.

5.1 Advance and translate research and innovation with institutions, industry partners and patients

NSW Health is committed to strengthening the translation of research and innovation into evidence-informed policy and clinical practice. We draw on existing and emerging research evidence to guide the delivery of safe, reliable care and to understand how this translates into achieving improved outcomes that matter to our patients and the community.

NSW Health supports our health and medical research workforce to better integrate research and innovation into clinical service delivery. This includes supporting our healthcare professionals to participate and conduct research and addressing identified issues such as demands on time and competing pressures.

Translating health and medical research into better healthcare and clinical practice will require greater collaboration between patients, research organisations, research hubs, research networks, LHDs, specialty networks, and key pillar organisations such as the Agency for Clinical Innovation, Clinical Excellence Commission and the Cancer Institute of NSW. NSW Health's Office for Health and Medical Research is a key support for our research sector to delivering better patient outcomes for NSW.

To enable greater collaboration, NSW Health is leading the Health Precincts Program, as part of a whole-of-government agenda, to leverage opportunities in major precinct developments.

Health Precincts seek to deliver a coordinated approach to medical research, and to leverage health and medical research activity and assets. Precincts and place-based collaboration will support economic activity, develop our workforce, attract industry, and improve the health system and patient outcomes. This will include leading industry attraction and partnership initiatives, identifying new opportunities and supporting Local Health Districts and Specialty Health Networks to develop and expand existing partnerships. Partnerships across government, universities, research institutes and industry will be critical.

The Westmead Health Precinct is one of the largest health, education, research, innovation and training precincts in Australia, featuring four major hospitals, four world-leading medical research institutes, two university campuses and the largest research-intensive pathology services in NSW:

"This is the first time we've brought together Western Sydney Local Health District with the Sydney Children's Hospitals Network, as well as University of Sydney, to create a space of high-quality care, learning and innovation."

5.2 Ensure health data and information is high quality, integrated, accessible and utilised

Health data and analytics can be used to achieve better patient experience and outcomes, including:

- enabling care to be more preventative, personalised, participatory and accessible[51]

- enabling self-management of patient health and wellbeing and to support them through clinical remote monitoring if required

- giving patients access to their own and other relevant data and information to make informed care choices

- using digitally enabled predictive tools to identify patients at high risk of deterioration, or for early warning of developing conditions.

Data and analytics are also critical for health service planning and delivery, including:

- identifying the health needs of the population, and ensuring services are fit-for-purpose. This supports decisions on resource allocation, ensuring it is distributed to an identified need

- measuring and monitoring patient reported experiences and outcomes to understand what initiatives are effective and should be scaled[52]

- promoting and enabling research and innovation.

Our future system should support a seamless, integrated information flow with colleagues within and outside of NSW Health. Data is routinely collected but is often unable to be shared or integrated in real time. This can create duplicative data collection or create information gaps in decision making.

Creating a 'core source' of patient information across systems and settings

Clinical and non-clinical staff support a seamless, integrated way to access and share information. An end-to-end view of patient information and interactions would enable continuity of care and improve experiences for patients and clinicians, promote clinical safety and quality, and reduce unnecessary duplication of care.[53,54]

A common pain point amongst patients is repeating personal or medical information when interacting with staff.[55] Patients agree a secure central repository of patient information would streamline record keeping, reduce administrative burden, and support continuity of care if information was readily accessible to different staff in different settings.[56]

A 'core source' of patient information connecting staff and patients would:

- offer a central information source for all users, including an interface for third parties and patients

- prioritise data privacy and cyber security

- promote continuity of care through seamless access and sharing of information including medical records, imaging, clinician notes across whole of health – acute, community, primary.

It's stressful starting again with each new doctor/specialist, the more information they know on you the better... not having to start from the beginning... when you're really ill and you are not capable of sharing all of the necessary information.

— Patient

The Lumos program is the largest collaboration the NSW Ministry of Health has ever undertaken with Primary Health Networks and general practices to create core sources of patient data. De-identified data from general practices is linked with other health service data, bringing together whole of system information which can help identify the best places and times to intervene or influence healthcare practices to improve patient outcomes and experiences, and the efficiency of health services.

Gathering data on patient experiences and outcomes

The Agency for Clinical Innovation is leading on establishing an integrated collection of patient experiences and outcomes across NSW through a purpose-built, co-designed IT solution known as Health Outcomes and Patient Experience (HOPE).

This IT platform will support the systematic collection and use of Patient Reported Measures (PRMs) across the state. It will enable patients and carers to self-report on experiences and outcomes in care. It will give clinicians access to patient data to inform shared discussions about care and treatment options, further embedding the human-centred approach to care. At a service level, this aggregated data will be used to inform service improvement and care delivery models.

Investment in Information and Communication Technology infrastructure is a good start, but still a way to go – simple things like a web cam and mic [sic] on every computer enables telehealth to occur without needing to find a machine, book a room etc.

— Sydney LHD virtual care session

5.3 Enable targeted, evidence-based healthcare through precision medicine

There is increasing capacity to provide targeted evidence-based healthcare through precision medicine that support disease prevention, more accurate prediction, diagnosis, and highly personalised treatments. This marks a fundamental change in the way healthcare is delivered for our patients.

NSW in partnership with service providers, clinicians, researchers, industry and consumers has established the NSW Health Pathology Clinical Genome and Exome Sequencing Service. It has developed infrastructure to support the management of the genomic data sharing landscape and is leading initiatives to streamline access to services and educate the health workforce as genomics permeates into mainstream clinical care.

The NSW Health Genomics Strategy articulates the vision for clinical genomics in NSW. Genomic and related 'omic medicines have the capacity to provide personalised and targeted healthcare that maximises health outcomes. Genomic technology is already being applied in a range of clinical contexts in NSW. It can provide greater accuracy in determining disease risk, assessing diagnosis and prognosis, and informing the selection of therapeutic options for care.

The strategy makes recommendations for the adoption of genomics and related 'omics technologies into the NSW Health system to be addressed if the promise of precision medicine and personalised care are to be fully realised.

A digitally literate health workforce who are skilled to leverage and deliver virtual care.

5.4 Accelerate digital investments in systems, infrastructure, security and intelligence

NSW Health's commitment to transform the care experience and deliver a wide range of services virtually will need to be supported by appropriate technology. The COVID-19 pandemic prompted an innovative response from our system to maintain clinical safety and excellence in service delivery and access to care for the people of NSW. This accelerated the delivery and demand of digitally enabled and virtual care options, as well as a noticeable increase in the acceptance and appeal of virtual care by patients and clinicians.[57]

Currently there are varied levels and types of digital hardware and software across NSW Health's system. Types of technology include telehealth platforms, videoconferencing technology to support multidisciplinary teams, developing data and quality dashboards, remote monitoring technology. NSW Health is working to support a consistent approach to ensure equitable access and availability of technology and protecting health data systems from ongoing cyber security risks.

Patients and our communities also face challenges in accessing digital hardware and software that supports virtual care. Identified gaps in NSW Health's digital infrastructure include:

- consistent software across settings and systems to support multidisciplinary collaboration

- appropriate hardware for virtual care in all care settings including hospitals, e.g. proper equipment for videoconferencing such as webcams, speakers, and bedside infrastructure

- physical environments that are fit for purpose for clinicians to engage in virtual care or to participate in multidisciplinary teams, e.g. private virtual consultation rooms

- a digitally literate health workforce who are skilled to leverage and deliver virtual care

- a dedicated IT support workforce for virtual care who would provide timely support and training to clinicians and patients.

An unintended consequence in our shift to virtual care is the emergence of a digital divide. For some people and communities, the basic infrastructure to access virtual care is unavailable or inadequate, e.g. reliable internet access or having a mobile device. This means that some people are at risk of not having access to all available care options. Access to virtual care may also be limited by a person's digital literacy and people will have varied confidence and capability to use technology and virtual care, or their cultural preferences or location.

> Investment in foundational digital infrastructure (esp. data systems infrastructure) and institutional competencies that will enable a longer-term transition to value-based care and away from activity-based funding, and also enable us to leverage emerging AI (Artificial intelligence) and automation technologies.
>
> **— Far West Local Health District virtual care session**

What does success look like?

- An increase in translation of innovative health and medical research into evidence-informed policy and safe clinical practice

- Health precincts become the cornerstone for attracting industry participants and stimulating collaborative innovation and research

- Patients have access to personalised information that enables more self-management and lifts their health literacy

- Data analytics are used as a predictive tool to target and shape service delivery

- A 'core source' of patient information brings together health information across disciplines and promotes seamless, multidisciplinary care

- Patient reported experiences and outcomes are systematically collected and analysed

- Precision medicine and the use of genomics is enhanced in mainstream clinical care

- Virtual care is enabled through secure, seamless, accessible technologies

- NSW Health systems are protected from cyber security risks

6. The health system is managed sustainably

Our future

The health system is managed with an outcomes-focused lens to deliver a financially and environmentally sustainable future.

Why is it important?

NSW Health has a responsibility to our health system's future financial and environmental sustainability to enable it to continue delivering safe and quality healthcare over the next decade.

NSW Health's value-based healthcare approach shifts the focus from outputs to outcomes – understanding what matters most to patients and using resources in an optimal way to deliver these outcomes.58 In NSW, value-based healthcare means continually striving to deliver care that improves the health outcomes that matter to patients, patient experiences of receiving care, clinician experiences of providing care as well as the effectiveness and efficiency of that care.

This is a system-wide commitment to achieve a long-term structural and cultural change process to implement a value-based approach to funding and purchasing, and aligning financial incentives to outcomes-based performance measures. A shift from outputs to outcomes also aligns to the NSW Government's Outcome Budgeting reforms for Whole of Government. This has a long-term impact on how we plan, fund and deliver services in the future.

NSW Health faces a growing global challenge of a changing climate and its impact on our health. In addition, the healthcare system is a significant contributor to our carbon footprint. NSW Health has a responsibility to enhance its environmental sustainability through reducing our carbon emissions, minimising waste and managing our resources differently. These will have positive impacts for the health and wellbeing of our citizens and reduce the environmental impact of the health system.

Traditional volume or activity-based funding reforms over the past decade have driven gains in technical efficiency and productivity, increased transparency about the true cost of procedures, and improved patient access by incentivising throughput. However, these funding models in isolation are not well suited to incentivising care that focuses on outcomes.

There is scope within our system to build governance and leadership that supports a joint commitment to work as 'one system' with partners within and outside of NSW Health. This will help build a shared accountability to deliver outcomes.

Key objectives
The following key objectives will guide implementation over the next decade:

6.1 Drive value-based healthcare that prioritises outcomes and collaboration

6.2 Commit to an environmentally sustainable footprint for future healthcare

6.3 Adapt performance measurement and funding models to targeted outcomes

6.4 Align our governance and leaders to support the system and deliver the outcomes of Future Health

6.1 Drive value-based healthcare that prioritises outcomes and collaboration

At its heart, NSW Health's drive for value-based healthcare is about delivering outcomes that matter to patients and using our resources to improve patient and clinician experience, how and where care is delivered, and ensure safe, quality care. Value-based healthcare is a way of organising healthcare that maximises value, where value is defined as the outcomes and experiences that matter most to the people receiving and delivering care relative to the costs of achieving those outcomes.

Embedding value-based healthcare requires significant long-term change. In NSW, this approach involves creating the environment, frameworks, structures and culture that enable our people and services to deliver human-centred care. Work is underway to support this approach through a number of initiatives. This includes scaling and embedding statewide programs and supporting structural system changes across a range of identified enablers such as digital health.

The value-based healthcare statewide programs complement each other and focus on improving outcomes for patients and measuring impact across the four essentials of value. These programs support the treatment and management of specific, chronic, and complex diseases and conditions, as well as building capacity and applying learnings to inform future change.

Structural system changes are driven by local partnerships and coordination of care between NSW Health and other care providers including primary care. Strengthening relationships with primary care will support a 'one health system' approach across care settings, underpinned by new flexible funding models to deliver effective interventions that achieve the outcomes that matter most to patients. Other initiatives include the Patient Reported Measures IT system which aims to allow patients to partner and be involved in decisions about their care and treatment, as well as advanced data linkage platforms such as the Register of Outcomes Value and Experience (ROVE) and Lumos which aim to provide a seamless overview of a patient's journey. Value-based healthcare is also being embedded in clinical support and non-clinical services.

Purchasing and procurement

Under the guidance of NSW Government, NSW Health is exploring ways to create better outcomes through purchasing and procurement models and practices.

NSW Health will apply a value-based approach to purchasing and procurement to make decisions that are efficient, economic and ethical to deliver value for money on a whole of life basis for patients, clinicians and other end-users.[59] This includes:

- reviewing and aligning procurement roles, responsibilities and policies through a value-based lens

- identifying opportunities to reduce procurement-related risk

- supporting Whole of Government Procurement reforms

- optimising purchasing and procurement practices.

6.2 Commit to an environmentally sustainable footprint for future healthcare

Our health and wellbeing are closely linked to the environment in which we live. More than ever, NSW Health is facing challenges related to our changing climate and the environmental impact of healthcare. However, our system and staff have shown resilience and preparedness in response to the impact of drought, devastating bushfires and floods, and global pandemic.

Looking to the future, NSW Health has a responsibility to build our resilience to the effects of changing climate and environment to slow down its impact on our health and wellbeing.

It is estimated Australia's health system contributes 7 per cent of Australia's total carbon footprint, of which 34 per cent is represented by public hospitals.[60] NSW Health is adopting a more environmentally sustainable approach for our health services, including:

- healthier, greener buildings and spaces, with solar generation on NSW Health facilities where possible

- sustainable management of energy, water, waste and other resources such as health consumables

- strengthening and developing sustainable models of care such as Choosing Wisely to minimise low value care and address social determinants of health

- focusing on effective use of technology

- establishing sustainable procurement processes

- building accountability such as through environmental sustainability performance measures

- educating staff about environmental sustainability

- strengthening leadership to drive environmental sustainability.

NSW Health will work in partnership with our key stakeholders to contribute to progressing a more environmentally sustainable footprint for future healthcare. This will support the NSW Government's Net Zero Plan to reduce emissions while growing the economy.

6.3 Adapt performance measurement and funding models to targeted outcomes

Most of our key performance indicators (KPIs) and performance measures are focused on measuring activity and outputs and reflect the current operating models and structures in place.

As we move towards Outcome Budgeting and delivering a value-based healthcare approach, we need to align our measures of success, including our budget, funding models and operational performance and workforce investment, to outcomes.

Outcomes-based performance measures will be used to inform how health services will be provided, organised and funded to improve outcomes that matter most. This supports flexibility to design and deliver care that achieve outcomes that matter most, and to incentivise new ways of working across the system.

> (we need) less focus on KPI benchmarks and more on actual patient outcomes.
>
> **— Emergency Department Community of Practice**

> Future health strategy should have a 'whole of government' leadership and governance, not just 'one team' within NSW Health. Preventing illness begins by collaborating with Councils, Police/Justice, Education, Planning, Transport and Industry to keep our communities healthy.
>
> **— Northern Sydney LHD virtual care session**

6.4 Align our governance and leaders to support the system and deliver the outcomes of Future Health

Our health system seeks a stronger, more collaborative governance and leadership to motivate and support innovation and shared accountability. NSW Health leadership should promote a commitment to outcomes and a whole-of-system collaborative approach.

Operating in a 'one system' mindset will bring staff within and outside of Health together. This will embed shared responsibility and accountability to deliver outcomes for patients and will help shape how we interact with colleagues within and outside of the system. We want to shift away from a culture of competitive behaviour and protectionism, towards building comradery and shared sense of responsibility.

We have heard there are already ways people are coming together as 'one system' within and outside of NSW Health including:

- multidisciplinary teams connecting hospitals and the community
- wellness and prevention interventions
- partnering on Medical Research Future Fund grants
- health and education precincts for research and innovation
- LHDs and Primary Health Networks working together.

Part of the solution to more collaborative leadership is through a balanced and diverse group of leaders, representing our clinical staff and Aboriginal people at all leadership levels. More work is needed to upskill and transition clinical staff into leadership roles to make this a reality.

Underpinning strong collaborative leadership is NSW Health's continued commitment to the principles and practice of robust governance, across all public health organisations, in a way that involves stakeholder and community participation and meets expectations around probity, accountability and transparency.[61]

What does success look like?

- Value-based healthcare principles deliver improvements in patient outcomes, system capacity and partnerships

- Purchasing and procurement decisions deliver value for money on a whole of life basis

- NSW Health has a more environmentally sustainable footprint, including a robust approach to managing energy, water, waste and other resources

- Key performance indicators and measures are aligned to outcomes, including budgetary and operational performance

- NSW Health leaders demonstrate a "one team" mindset within the health system and across government
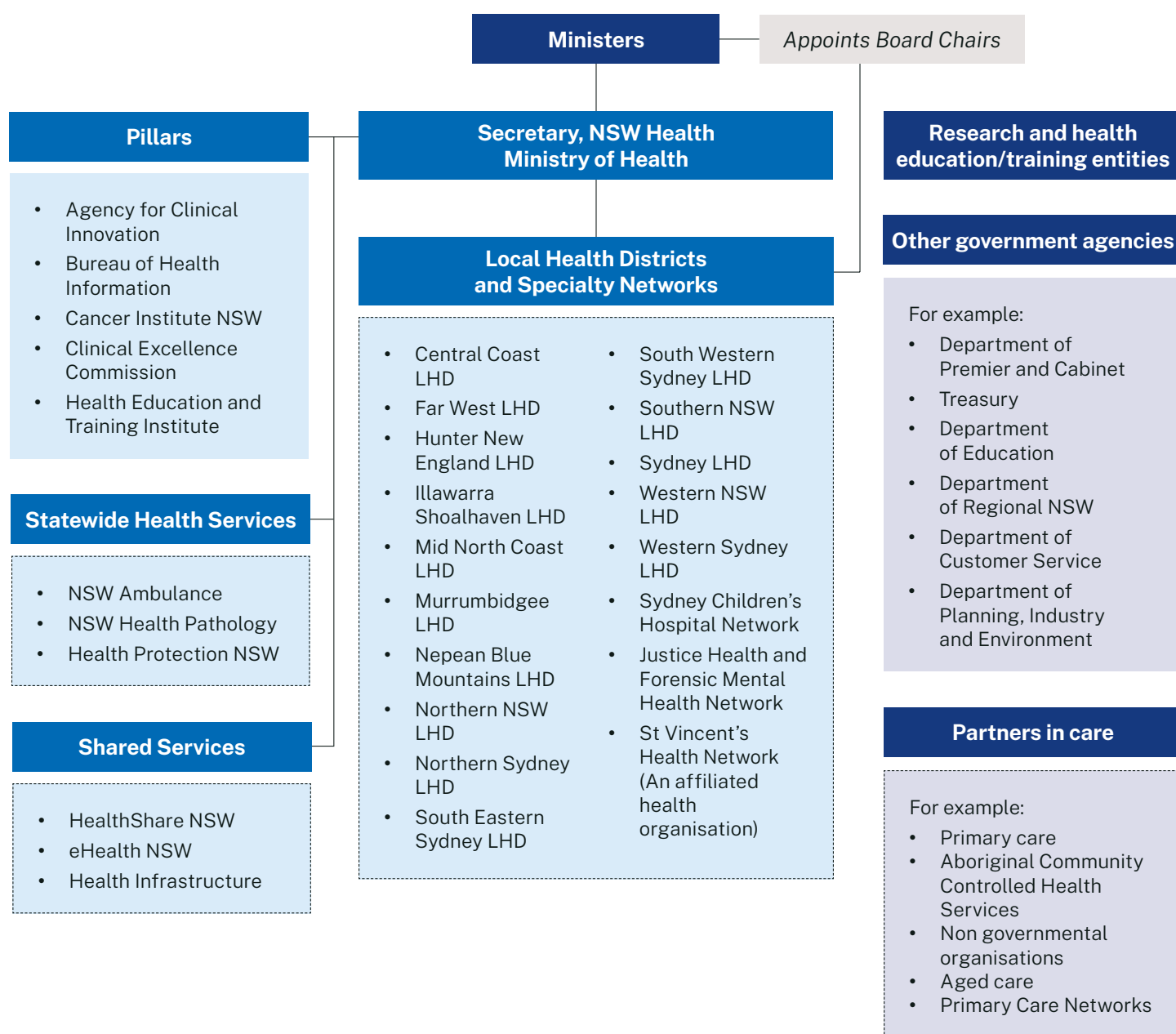
Strategy
into Action

3

Guiding the health system

Future Health is a strategic direction guided by our people – our staff, patients, citizens and key stakeholders including primary care, non-government, and community organisations.

Making it successful requires effort from everyone who works in the system and contributes to good healthcare across NSW. NSW Health will work as a system to implement the key objectives set out in Future Health, and to monitor and report on progress in achieving our vision.

Ministers

Appoints Board Chairs

Pillars

- Agency for Clinical Innovation
- Bureau of Health Information
- Cancer Institute NSW
- Clinical Excellence Commission
- Health Education and Training Institute

Statewide Health Services

- NSW Ambulance
- NSW Health Pathology
- Health Protection NSW

Shared Services

- HealthShare NSW
- eHealth NSW
- Health Infrastructure

Secretary, NSW Health Ministry of Health

Local Health Districts and Specialty Networks

- Central Coast LHD
- Far West LHD
- Hunter New England LHD
- Illawarra Shoalhaven LHD
- Mid North Coast LHD
- Murrumbidgee LHD
- Nepean Blue Mountains LHD
- Northern NSW LHD
- Northern Sydney LHD
- South Eastern Sydney LHD

- South Western Sydney LHD
- Southern NSW LHD
- Sydney LHD
- Western NSW LHD
- Western Sydney LHD
- Sydney Children's Hospital Network
- Justice Health and Forensic Mental Health Network
- St Vincent's Health Network (An affiliated health organisation)

Research and health education/training entities

Other government agencies

For example:
- Department of Premier and Cabinet
- Treasury
- Department of Education
- Department of Regional NSW
- Department of Customer Service
- Department of Planning, Industry and Environment

Partners in care

For example:
- Primary care
- Aboriginal Community Controlled Health Services
- Non governmental organisations
- Aged care
- Primary Care Networks

■ NSW Health   ■ non-NSW Health   ⬚ Service provision   — Accountability relationship

All parts of NSW Health will have a role to play in leading change, and working together:

- **Local Health Districts, Specialty Health Networks and NSW Ambulance** – through front-line service delivery and clinician, patient and community engagement

- **Our Pillars** – the Agency for Clinical Innovation, the Clinical Excellence Commission, Cancer Institute NSW, Bureau of Health Information and the Health Education and Training Institute – by providing expert advice and guidance to our Districts and Networks in consultation with clinicians

- **Key Agencies** – NSW Health Pathology, Office for Health and Medical Research, Health Infrastructure, HealthShare NSW and eHealth NSW – who provide statewide services in support of high quality, value for money patient care

- **Ministry of Health** – as system manager, responsible for purchasing services and monitoring performance to deliver improved health outcomes for the people of NSW.

Governance

There are a number of key NSW Health governance structures that will support the delivery of Future Health:

- **Ministry Executive** supports the Secretary in leading the NSW Health system, oversighting system performance, and managing responses to emerging critical issues

- **Health System Strategy Group** supports the Secretary in setting the strategic direction of the business, planning and prioritising the delivery of Future Heath across the whole system, and ensuring that outcomes are achieved

- **Future Health Program Delivery Board** drives the implementation of smaller number of priority reform areas known as 'flagships', which are fundamental to delivery of the Future Health strategy

- **Senior Executive Forum** informs strategy and shares learning and information to support the delivery of critical priorities and system performance. The Forum also supports the effective operation of the NSW Health system and the management of emerging critical issues.
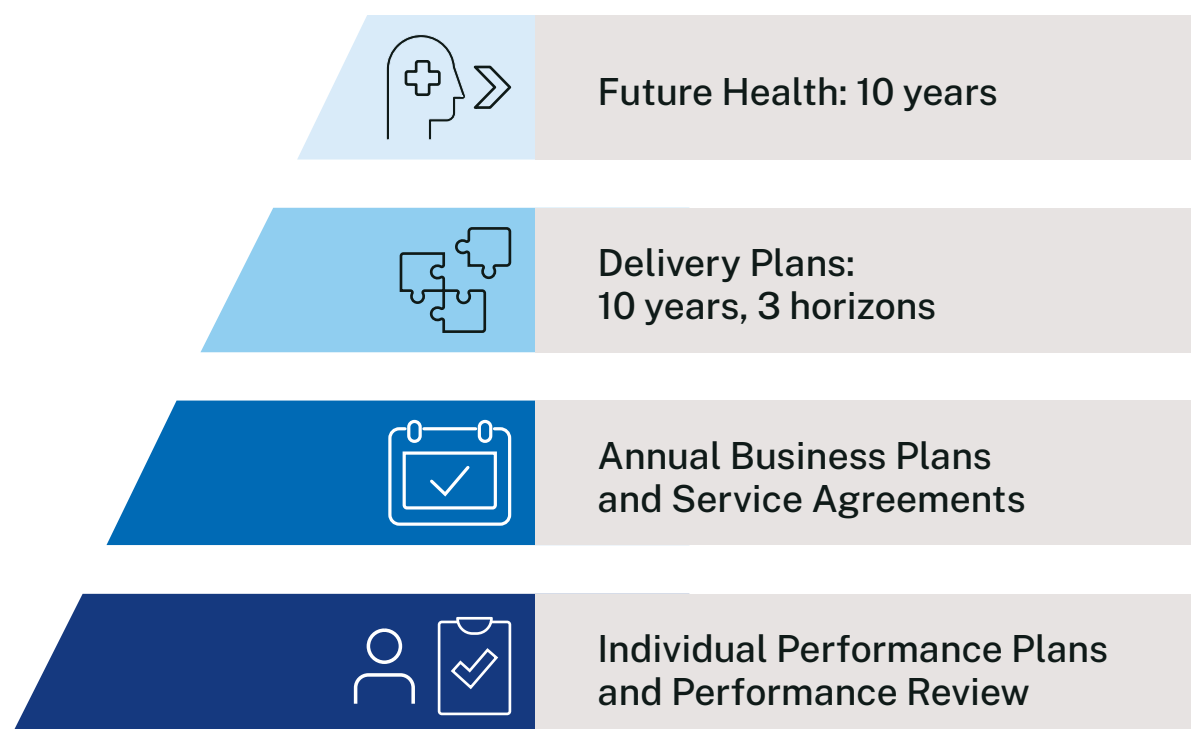
Delivery planning

Future Health provides the strategic framework and priorities for the whole system over the next decade.
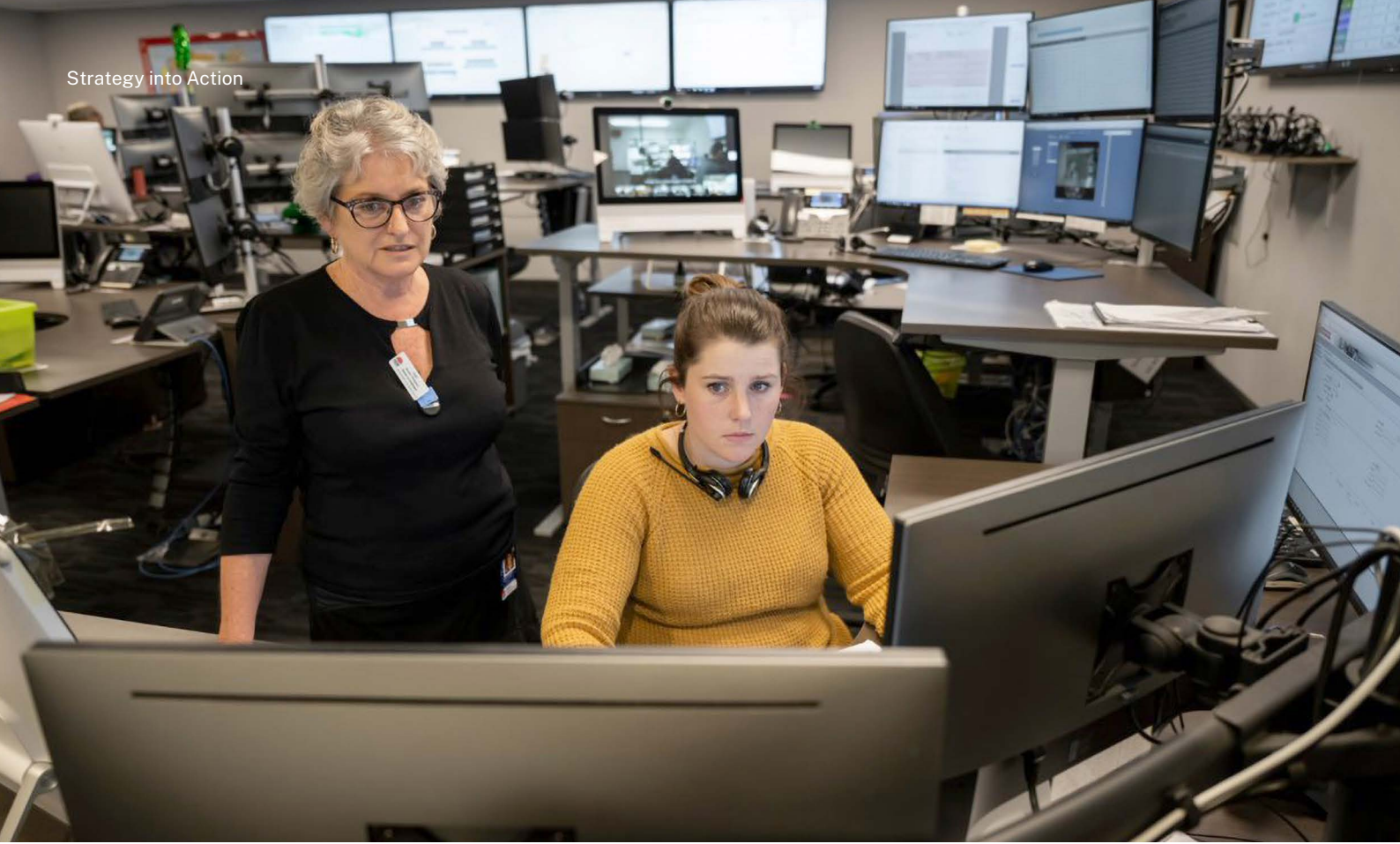
To drive implementation, it will be cascaded into a series of Delivery Plans, each tackling one of the six Strategic Outcomes.

The Delivery Plans will set out the objectives, target outcomes and priority action plans, viewed over three time horizons across the 10-year period.

Lead accountabilities to drive the development of Delivery Plans, manage their implementation and deliver outcomes that will be assigned to senior executives at the Ministry of Health, who will work collaboratively with the rest of the system to make the changes happen. Much change is already in progress around the health system, and the Delivery Plans will seek to re-frame and align work under way, so that we can drive a coordinated outcome.

The Delivery Plans will be cascaded into local Service Agreements and Annual Business Plans, so that each part of our system can be transparently aligned to the overall vision, goals and outcomes. Future Health's Strategic Outcomes and Key Objectives will be applied to local context and settings, to continue building on the work already happening, balance local priorities, and to drive local action to improve services and the health and wellbeing of their communities.

	Future Health: 10 years
	Delivery Plans: 10 years, 3 horizons
	Annual Business Plans and Service Agreements
	Individual Performance Plans and Performance Review

Evaluation and measurement of outcomes

Future Health will ultimately be measured by a set of outcomes focused on health improvement, service delivery, social and environmental impact, and on financial sustainability.

A set of measures will be used to track progress. These will be shared within the system to demonstrate and motivate ongoing learning. These measures will support reporting on the implementation of Future Health.

Responsibilities for delivery will be managed through the NSW Health Performance Framework. Service Agreements are a central component of the Performance Framework and they support the devolution of decision making, responsibility and accountability for safe, high quality, patient centred care.

Monitoring and evaluation are key components of continuous improvement and for determining the extent to which the expected outcomes of Future Health are being met.

NSW Health will make sure the direction set by Future Health will be evaluated and refined as health needs and demands change, and technology continues to evolve. The Ministry will manage any changes in consultation with those best able to make decisions about how Future Health evolves.

Further information

NSW Health is constantly working on priority issues to improve outcomes for patients and the community. There are a number of related strategies, plans and frameworks that provide more insight and deep dive on the strategic themes within Future Health. Related strategies, plans and frameworks:

Patients and carers have positive experiences and outcomes that matter	Elevating the Human Experience – Our Guide to Action (2020)
Safe care is delivered across all settings	20-Year Health Infrastructure Strategy (2020-2040) NSW Health Virtual Care Strategy (2021-2026) NSW Health Facility Planning Process (2020) Strategic Framework for Integrating Care (2020) Towards 2025 NSW Health Pathology Strategic Plan (2020) Their Futures Matter (whole of government)
People are healthy and well	Addendum to the National Health Reform Agreement (2020-25) Aboriginal Health Plan (2013-2023) Integrated Prevention and Response to Violence, Abuse and Neglect Framework (2019) National Agreement on Closing the Gap (2020) First 2000 Days Framework (2019) First 2000 Days Implementation Strategy (2020-2025) Living Well – A Strategic Plan for Mental Health in NSW (2014-2024) Living Well in Focus (2020-2024) NSW Aboriginal Mental Health and Wellbeing Strategy (2020-2025) NSW Family Focused Recovery Framework (2020-2025) NSW HIV Strategy (2021-2025) NSW Strategic Framework and Workforce Plan for Mental Health (2018-2022) NSW Women's Health Framework (2019) Strategic Framework for Suicide Prevention in NSW (2018-2023) Brighter Beginnings (whole of government)
Our staff are engaged and well supported	Health Professionals Workforce Plan (2012-2022) NSW Health Good Health – Great Jobs: Aboriginal Workforce Strategic Framework (2016-2020)
Research and innovation, and digital advances inform service delivery	eHealth Strategy for NSW Health (2016-2026) NSW Health and Medical Research Strategic Review (2012) NSW Health Genomics Strategy Implementation Plan 2021-25 Population Health Research Strategy (2018-2022)
The health system is managed sustainably	Value-based healthcare framework (2020) Outcomes Budgeting (whole of government) 2021-22 NSW Intergenerational Report (2021)

Future Health will inform any new or revised strategic plans and programs in the coming decade.

References

1. Roberts D, Parker J, and Marion G. Switching health from cost reduction to customer care models. Ernst and Young. 2018

2. CSIRO Futures. Future of Health: Shifting Australia's focus from illness treatment to health and wellbeing management. CSIRO. 2018

3. NSW Treasury 2021-22 NSW Intergenerational Report

4. NSW Treasury 2021-22 NSW Intergenerational Report

5. NSW Health, 2020. Elevating the Human Experience: Our guide to action for patient, family, carer and caregiver

6. Bendelta, 2020. Future Health Strategy: Feedback from NSW Health stakeholders (internal only). Note: 2,568 (47%) survey respondents selected this as their top priority.

7. Bendelta, 2020. Future Health Strategy – Feedback from NSW Health stakeholders (internal only). Note: Based on 2,568 responses who had prioritised person-centred care, 70% selected this as their top focus area

8. NSW Health, 2020. Elevating the Human Experience: Our guide to action for patient, family, carer and caregiver

9. 33 Creative, 2020. [Aboriginal stakeholders] Consultation feedback (internal only)

10. NSW Health, 2020. Elevating the Human Experience: Our guide to action for patient, family, carer and caregiver

11. NSW Health, 2020. Elevating the Human Experience: Our guide to action for patient, family, carer and caregiver

12. Kantar, 2020. Future Health Strategy: Research report (internal only)

13. Kantar, 2020. Future Health Strategy: Research report (internal only)

14. Australian Institute of Health and Welfare (AIHW), 2020. Australia's health 2020: data insights

15. Kantar, 2020. Future Health Strategy: Research report (internal only)

16. Bendelta, 2020. [Communities of Practice] Consultation insights (internal only)

17. NSW Health Annual Report 2019-20

18. NSW Health, 2020. NSW Health Outcome and Business Plan (internal only)

19. BCG analysis, 2019. Note: approximately 85% of NSW Health's support is concentrated in the hospital setting

20. NSW Health, 2019. 20-Year Health Infrastructure Strategy

21. NSW Health, 2019. 20-Year Health Infrastructure Strategy

22. Bendelta, 2020. [Communities of Practice] Consultation insights (internal only)

23. Bendelta, 2020. Future Health Strategy – Feedback from NSW Health stakeholders (internal only)

24. Kantar, 2020. Future Health Strategy: Research report (internal only)

25. NSW Health, 2019. 20-Year Health Infrastructure Strategy

26. Bendelta, 2020. [Communities of Practice] Consultation insights (internal only)

27. Bendelta, 2020. Future Health Strategy – Feedback from NSW Health stakeholders (internal only)

28. AIHW, 2019. Australian Burden of Disease Study 2015

29. NSW Department of Education, 2020. Brain development in young children

30. NSW Health, 2019. The First 2000 Days Framework.

31. HealthStats NSW. Total births NSW 2001 to 2019.

32. NSW Government Brighter Beginnings initiative.

33. NSW Health, 2020. Towards Zero Suicides Initiative.

34. NSW Communities and Justice, 2021. Ageing Well in NSW: Seniors Strategy 2021-2031

35. NSW Health, 2012. NSW Health Aboriginal Health Plan 2013-2023

36. National Agreement on Closing the Gap, July 2020.

37. 33 Creative, 2020. [Aboriginal stakeholders] Consultation feedback (internal only)

38. NSW Health 2019-20 Annual Report

39. NSW Treasury 2021-22 NSW Intergenerational Report

40. NSW Health, 2018. NSW Strategic Framework and Workforce Plan for Mental Health 2018–2022

41. World Health Organisation, 2021. Constitution.

42. AIHW, 2020. Australia's health 2020: data insights

43. AIHW, 2016. Australia's health 2016

44. Bendelta, 2020. [Communities of Practice] Consultation insights (internal only)

45. NSW Health (Draft). 2020-2023 Health Workforce Action Plan

46. NSW Health, 2021. NSW Health workforce plan 2021-2031: Action plan 2021

47. NSW Health, 2021. NSW Health workforce plan 2021-2031: Action plan 2021

48. NSW Health, 2019. 20-Year Health Infrastructure Strategy

49. NSW Health. 2020-2023 Health Workforce Action Plan

50. NSW Treasury 2021-22 NSW Intergenerational Report

51. NSW Health, 2020. NSW Health Virtual Care Strategy

52. NSW Health, 2020. Elevating the Human Experience: Our guide to action for patient, family, carer and caregiver

53. NSW Health. eHealth Strategy for NSW Health 2016-2026

54. NSW Health, 2020. NSW Health Virtual Care Strategy

55. Kantar, 2020. Future Health Strategy: Research report (internal only)

56. Kantar, 2020. Future Health Strategy: Research report (internal only)

57. Kantar, 2020. Future Health Strategy: Research report (internal only)

58. NSW Health, 2020. NSW Health Outcome and Business Plan (internal only)

59. NSW Government Procurement Policy Framework 2021

60. Malik A, Lenzen M, McAlister S, McGain F. 2018. The carbon footprint of Australian healthcare. The Lancet Planetary Health 2018;2(1):27-35.

61. NSW Health, 2020. Corporate Governance & Accountability Compendium for NSW Health