Management and accountability

4

Governance

NSW Health relies on frameworks and structures that promote excellence in healthcare management and service delivery to provide a world-class health system that delivers essential services.

Our governance structure, financial frameworks and approach to risk management ensure our commitment to health services are needs-based and we provide safe, high-quality, and patient-centred care for the people of NSW.

NSW Health comprises the NSW Ministry of Health (a public service department under the Government Sector Employment Act 2013) and the various NSW Health organisations making up the NSW public health system, including local health districts and specialty health networks (see the NSW Health organisational chart on page X).

The NSW Ministry of Health is the system manager for NSW Health. NSW Health organisations are governed by an accountable authority – either a board or a chief executive, or both. The Corporate Governance and Accountability Compendium outlines the governance requirements that apply to the organisations that form part of NSW Health and sets out the roles, relationships and responsibilities of each organisation. A copy is available at health.nsw.gov.au

Clinical governance

The NSW Ministry of Health Patient Safety First Unit, in collaboration with the Clinical Excellence Commission, is responsible for monitoring the quality and safety of the NSW public health system and for providing leadership in clinical governance.

NSW Health is committed to partnering with patients, consumers, families and carers in healthcare decision making and improving staff culture and wellbeing to enable provision of high-quality care.

Across NSW Health, clinical governance systems are aligned to the five components of the National Model Clinical Governance Framework:

· Governance, leadership and culture
· Patient safety and quality improvement systems
· Clinical performance and effectiveness
· Safe environment for the delivery of care
· Partnering with consumers.

Incident management in NSW Health is governed by the principles of immediacy, accountability and kindness. Health leaders, clinicians and teams act immediately when people are harmed or at risk of harm. NSW Health supports all who are affected. Our health system is open when incidents occur, and incident reviews drive learning and improvement actions.

Local health districts and specialty health networks have primary responsibility for providing safe, high-quality care for patients. To protect patients from harm and ensure the quality of health services, hospitals, dental services and oral health clinics within hospitals must be accredited. Accreditation is determined by assessment against the National Safety and Quality Health Service Standards, in accordance with the Australian Health Services Safety and Quality Accreditation Scheme. From 1 July 2023, assessments to the Standards transitioned to a short notice assessments program.

The Clinical Excellence Commission risk-assessed notification of 828 medical device, medicine and biological agent issues in 2022-23. Of these, 17 required a system-wide critical response and 47 required an urgent Safety Alert Broadcast. Seventeen critical device issues and 12 urgent medicines issues required rapid activation of an inter-agency management team, each with weekly to fortnightly meetings.

Feedback and complaints

At NSW Health we listen to feedback, and encourage patients, their families and carers to share their healthcare experiences. This is to ensure we meet our commitment of value-based, patient-centred care.

The NSW Health incident management system (ims+) records consumer feedback and complaints. In 2022-23 there were 14,980 complaints recorded, a decrease from 17,806 in the previous year*. The top five issues related to clinical care, communication, timing and access, patient rights and management of facilities.

Finance and performance management

Organisation performance monitoring and review of financial management form a key part of the system of internal controls for public health organisations.

Chief executives and boards are responsible for putting into place appropriate arrangements to:

- ensure the efficiency and effectiveness of resource utilisation by public health organisations
- regularly review the adequacy and effectiveness of organisational financial and performance management arrangements.

NSW Health Performance Framework

The NSW Health Performance Framework (the Framework) outlines the NSW Ministry of Health (the Ministry) process for setting performance expectations and monitoring performance of public sector health and support services.

The Framework clearly outlines the process of assessing the level of performance of each health service. It allows the Ministry to identify and acknowledge sustained high performance with the view for lessons to be shared across NSW Health. Where under performance is identified, the Framework sets out the process to escalate concerns and ensure support is available to remediate performance. The Framework and associated key performance indicators listed in service agreements apply at both whole-of-health-service and facility or service levels, promoting and supporting a high-performance culture.

The Framework applies to:

- The 15 geographical NSW local health districts and other NSW Health services: NSW Ambulance, Sydney Children's Hospitals Network, St Vincent's Health Network, Justice Health and Forensic Mental Health Network and affiliated health organisations
- NSW Health support organisations: Agency for Clinical Innovation, Bureau of Health Information, Cancer Institute NSW, Clinical Excellence Commission, Health Education and Training Institute, HealthShare NSW and NSW Health Pathology.

*These figures exclude complaints recorded by St Vincent's Health Network and are subject to change via ongoing data verification processes.

Service agreements

Service agreements are a central component of the Performance Framework. They clearly set out the service delivery and performance expectations for funding and other support provided to local health districts, other health services and support organisations.

Annual service agreements between the NSW Ministry of Health and local health districts and specialty health networks include budgets for the level and mix of services each health service needs for their communities. Funding decisions consider the outcomes for patients, carers, staff and the public health system, and funding adjustors are used to incentivise value-based care.

Audit and risk management

NSW Health policy requires public health organisations to maintain effective, independent audit frameworks and corporate governance practices consistent with NSW public sector best practices. Enterprise-wide risks are managed through continuous monitoring and risk control (policy, procedures and guidelines), which are reflected in the NSW Health Enterprise-wide Risk Management Policy.

Audit and risk management committees

Each public health organisation must establish an audit and risk management committee, which is a key component in the public health organisation's corporate governance framework. It oversees:

- internal controls and internal audit
- enterprise risk management
- business continuity plans
- disaster recovery plans
- corruption and fraud prevention
- external accountability and external audit
- compliance with applicable laws and regulations.

Internal auditing at the Ministry

Internal Audit provides an independent review and advisory service to the Secretary and the Risk Management and Audit Committee. It provides assurance that the NSW Ministry of Health's financial and operational controls, designed to manage the organisation's risks and achieve its objectives, are operating in an efficient, effective and ethical manner.

Internal Audit assists management in improving business performance, advises on fraud and corruption risks, and internal controls over business functions and processes.

External agency oversight

Several statutory and government agencies are involved in the oversight and governance of NSW public health organisations. These include the NSW Ombudsman, Information and Privacy Commission, Independent Commission Against Corruption, NSW Treasury, Department of Premier and Cabinet, the Auditor-General, Audit Office of NSW and the Public Accounts Committee of the NSW Parliament.

NSW Ombudsman

The NSW Ombudsman tabled one report involving NSW Health during 2022-23. The NSW Child Death Review Team Annual Report 2021-22 was tabled in Parliament on 25 October 2022.

The tabled report, including relevant data and updates on implementation of previous recommendations, was provided by NSW Health and can be accessed on the Ombudsman's website: ombo.nsw.gov.au.

Audit Office of NSW

The Audit Office of NSW fulfils an external oversight function, undertaking financial audits, performance audits and compliance audits each year. In addition to the three types of audits, the Audit Office also tables special reports on internal controls.

In 2022-23, the Audit Office tabled two performance audit reports in Parliament concerning NSW Health:

1. New South Wales COVID-19 Vaccine Rollout
2. Coordination of the Response to COVID-19 (June to November 2021).

The NSW Ministry of Health, together with 24 other large NSW Government agencies, was involved in the preparation of the Auditor General's report: Internal Controls and Governance 2022, tabled on 20 December 2022. The focus of the report was on whole of government internal control risks, controls on information technology, management of cyber risks and risks associated with over reliance on consultants and contractors.

All tabled reports, including the related response from NSW Health on performance audits, are available at audit.nsw.gov.au.

Public Accounts Committee of the NSW Parliament

The Public Accounts Committee reviews performance audit reports tabled by the Auditor-General of NSW in Parliament as part of a 12-month follow-up program, with status updates being sought from NSW Health on the implementation of the audit recommendations that were accepted by NSW Health. In 2022-23, a submission was made to the Committee on the performance audit report *Access to Health Services in Custody,* which was originally tabled on 23 September 2021.

Events arising after the end of the annual reporting period

No other events have arisen subsequent to the end of the annual reporting period that would have a significant effect on financial operations, other operations and clientele and the community that would require the annual report to be amended.

Modern Slavery Act 2018

No specific issues have been raised by the Anti-Slavery Commissioner concerning the operations of NSW Health during the financial year. The Anti-Slavery Commissioner has provided draft Guidance to the Modern Slavery Working Group and NSW Health has provided comments as a member of the group.

NSW Health submitted its annual Modern Slavery Report in December 2022 in relation to the Commonwealth Modern Slavery Act commitments. HealthShare NSW is currently developing a Modern Slavery Action Plan. Modern Slavery guidance is provided in NSW Health's Procurement Policy Procedures.

A Modern Slavery component was included in the NSW Health policy training provided to approximately 700 staff in 2022 and within the ongoing Procurement Academy training.

Internal Audit and Risk Management Attestation

Internal Audit and Risk Management Attestation Statement for the 2022-2023 Financial Year for the NSW Ministry of Health

I, Ms Susan Pearce, Secretary, NSW Health, am of the opinion that the Ministry of Health has internal audit and risk management processes in operation that are, excluding the exemptions or transitional arrangements described below, compliant with the six (6) of the seven (7) Core Requirements set out in the *Internal Audit and Risk Management Policy for the General Government Sector,* specifically:

Core Requirements	Compliant / Non-Compliant / In Transition
Risk Management Framework	
1.1 The Accountable Authority shall accept ultimate responsibility and accountability for risk management in the agency.	*Compliant*
1.2 The Accountable Authority shall establish and maintain a risk management framework that is appropriate for the agency. The Accountable Authority shall ensure the framework is consistent with AS ISO 31000:2018.	*Non-Compliant* *The Ministry is compliant with six of the seven core requirements. The non-compliance is limited to internal reporting, which will be resolved by the end of calendar year 2023.*
Internal Audit Function	
2.1 The Accountable Authority shall establish and maintain an internal audit function that is appropriate for the agency and fit for purpose.	*Compliant*
2.2 The Accountable Authority shall ensure the internal audit function operates consistent with the International Standards for Professional Practice for Internal Auditing.	*Compliant*
2.3 The Accountable Authority shall ensure the agency has an Internal Audit Charter that is consistent with the content of the 'model charter'.	*Compliant*
Audit and Risk Committee	
3.1 The Accountable Authority shall establish and maintain efficient and effective arrangements for independent Audit and Risk Committee oversight to provide advice and guidance to the Accountable Authority on the agency's governance processes, risk management and control frameworks, and tis external accountability obligations.	*Compliant*
3.2 The Accountable Authority shall ensure the Audit and Risk Committee has a Charter that is consistent with the content of the 'model charter'.	*Compliant*

Membership

The Chair and members of the Risk Management and Audit Committee are:

- Ms Carolyn Walsh, Independent Chair (23 March 2020 to 22 March 2024)
- Ms Julie Newman, Independent member (26 June 2021 to 25 June 2023)
- Mr Greg Rochford, Independent member (23 June 2021 to 22 June 2025)
- Ms Rhonda Wheatley, Independent member (9 December 2021 to 9 December 2025)

Departures from Core Requirement

I, Ms Susan Pearce, Secretary, NSW Health, advise that the internal audit and risk management processes for the Ministry of Health depart from the Core Requirements set out in the *Internal Audit and Risk Management Policy for the General Government Sector*.

The circumstances giving rise to the departure have been determined by the Responsible Minister and the Ministry of Health is implementing the following practicable alternative measures to meet the Core Requirements

Departure from Policy/Procedure	Reason for departure and description of practicable alternative measures implemented / being implemented
Core Requirement 1.2 The Accountable Authority shall establish and maintain a risk management framework that is appropriate for the agency. The Accountable Authority shall ensure the framework is consistent with AS ISO 31000:2018.	The Ministry prioritised its system manager role to develop and implement the *Enterprise-wide Risk Management Policy Directive* (PD2022_023) for all of NSW Health in the first instance. The Ministry of Health is now in the process of developing a risk management framework for itself. The risk management framework will be consistent with TPP20-08 and, PD2022_023 and industry standards. The risk management framework is planned to be implemented before the end of the 2023 calendar year.

I, Ms Susan Pearce, Secretary, NSW Health, declare that this Internal Audit and Risk Management Attestation is made in respect of the consolidated accounts, verified through an annual attestation statement submitted to the Ministry of Health by the Chief Executive, of the following controlled entities:

Central Coast Local Health District	The Sydney Children's Hospitals Network
Far West Local Health District	Western NSW Local Health District
Hunter New England Local Health District	Western Sydney Local Health District
Illawarra Shoalhaven Local Health District	Agency for Clinical Innovation
Justice Health & Forensic Mental Health Network	Ambulance Service of NSW
Mid North Coast Local Health District	Bureau of Health Information
Murrumbidgee Local Health District	Cancer Institute NSW
Nepean Blue Mountains Local Health District	Clinical Excellence Commission
Northern NSW Local Health District	eHealth NSW
Northern Sydney Local Health District	HealthShare NSW

South Eastern Sydney Local Health District	Health Education and Training Institute
South Western Sydney Local Health District	Health Infrastructure
Southern NSW Local Health District	NSW Health Pathology
Sydney Local Health District	

Departures from Local Policy

I, Ms Susan Pearce, Secretary, NSW Health, advise that the internal audit and risk management processes for the controlled entities of the Ministry of Health depart from the policy requirements outlined below, as set out in the *Internal Audit* policy (PD2022_022) and *Enterprise-wide Risk Management* (PD2022_023) for the NSW Health.

The circumstances giving rise to these departures have been determined by the Secretary, as system manager, as an exception, and the following practicable alternative measures to meet the core requirements have been implemented.

Departure from Policy/Procedure	Reason for departure and description of practicable alternative measures implemented / being implemented
Local Procedure: PD2022_022 2.1 Chief Audit Executive The Chief Audit Executive must not have the Chief Financial Officer (or equivalent) as a direct report.	One Health Organisation's Chief Operating Officer held the Chief Audit Executive role. The Chief Financial Officer was a direct report of the Chief Operating Officer. The departure from policy will be resolved in the 2023/24 financial year.
Local Procedure: PD2022_022 2.5 Internal Audit The organisation's enterprise-wide risk management framework must be the subject of an internal audit at least once every five years.	One Health organisation sought to complete the internal audit of the framework next financial year due to Enterprise Risk Management personnel and structural reporting changes. The audit is now scheduled in 2023/24 financial year once the changes are established. The organisation's Audit and Risk Committee members are supportive of the approach.
Local Procedure: PD2022_022 2.6 Internal Audit Quality Assurance and Improvement Program An external assessment of the internal audit function is to be conducted at least once every five years by a qualified, independent assessor selected in consultation with the Audit and Risk Committee.	Two Health Organisations did not complete an independent quality assurance review of the Internal Audit function within the five-year period. 1. Delay was due to change in audit model with new auditors and disruptions by COVID. The external review of the Internal Audit function has commenced and will be completed by the end of 2023. 2. The last review was finalised April 2017 and the assessment was instead scheduled as part of the 2022-23 Internal Audit Plan. The external assessment of the internal audit function is scheduled for completion by end of 2023.

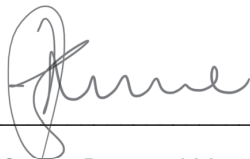|	
Local Procedure: PD2022_022 3.1.1 Appointment of a Chair The Chair of the Audit and Risk Committee is to be appointed for a single term only, of at least three years and not greater than five years. The total period of membership on the Committee must not exceed eight years.	Two NSW Health Organisations sought that the Chair be appointed to the Committee for a single term of less than three years. In both organisations, the previous Chair declined an extension/retired and to retain knowledge within the Committee, proposed offering the position to an existing member of the Committee. As the members were experienced with years already on the Committee, to ensure the total membership did not exceed eight years, appointments under the three-year term were granted exception. One NSW Health organisation sought to extend the term of a Chair which would exceed the eight-year total membership. The extension allowed the transfer of knowledge to a new member of the Committee who would succeed as Chair.

These processes, including the practicable alternative measures implemented, demonstrate that the Ministry of Health has established and maintained frameworks, including systems, processes and procedures for appropriately managing audit and risk within the Ministry of Health.

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Susan Pearce AM
Secretary, NSW Health
Date:

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Louise Derley
Chief Audit Executive, Ministry of Health

Public accountability

Public interest disclosures

NSW Health values the contributions of staff to improve administrative and management practices. Staff can report any alleged wrongdoing under the *Public Interest Disclosures Act 1994*. NSW Health has a Public Interest Disclosures Policy (PD2016_027) which covers management of public interest disclosures across all NSW Health organisations.

During 2022-23 NSW Health organisations received 59 public interest disclosures. Forty-one were made by staff in the course of their day-to-day functions, and 18 fell into the category of 'all other public interest disclosures'.

Of the 59 public interest disclosures received, 53 primarily related to reports alleging corruption and six related to allegations of maladministration.

Across NSW Health, 50 public interest disclosures were finalised during the 2022-23 period.

The number of public interest disclosure reports received in the 2022-23 financial year is up slightly from the 57 reports received in the 2021-22 reporting period.

Public interest disclosure coordinators for NSW Health implement tailored staff awareness strategies to suit their organisational needs. NSW Health organisations used training provided by representatives from the NSW Ombudsman, internal staff briefings, e-learning, and employee induction training to improve awareness. Information about public interest disclosures is available on intranet sites.

NSW Health has also worked during the year in preparing policy, training and implementation resources to support the commencement of the *Public Interest Disclosures Act 2022*, which will commence on 1 October 2023.

Government Information (Public Access) Act 2009

The NSW Ministry of Health regularly reviews information on its website and routinely uploads information that may be of interest to the public. This includes a wide range of publications and resources including reports, fact sheets, brochures and pamphlets. Information is also available in other languages from the NSW Multicultural Health Communication Service website.

During 2022-23 the Ministry received 153 formal access applications under the *Government Information (Public Access) Act 2009* (the GIPA Act), including 36 applications and four appeals carried over from the 2021-22 reporting year. Of the 153 applications received, 23 applications were transferred to other agencies for completion. During this reporting year, 25 applications were initially assessed as invalid, for not complying with the formal requirements of section 41 of the GIPA Act, with nine applications subsequently becoming valid requests.

There were 38 informal GIPA requests processed, 25 external third party consultation requests, as well as 35 disclosure log requests, processed within the 2022-23 reporting period. A total of 108 formal applications were decided within the reporting period. There were a further six applications received that were un-decided, as well as two applications under review, as of 30 June 2023.

Nine internal reviews were conducted in 2022-23, with 25 external reviews completed by the Information Commissioner and the NSW Civil and Administrative Tribunal in this same period. Of the 34 appeals finalised during this reporting year, the original decision was upheld in 30 appeals.

Of the 108 formal access applications decided in 2022-23, the NSW Ministry of Health made six decisions to refuse access to information referred to in Schedule 1 of the GIPA Act (four in full and two in part), where there was a conclusive presumption of overriding public interest against disclosure.

Twenty decisions were made to release information in full, with nine decisions made to refuse access to part of the information requested. A further nine applications resulted in a full refusal of access to some, or all, the information requested. There were a further 49 decisions made that the information requested was not held by the NSW Ministry of Health, and 16 decisions were made that the information is already available to the applicant. In addition, 25 decisions were made to refuse to deal with the application in full or in part, and 12 applications were withdrawn by the applicant.

Statistical information regarding formal access applications received during 2022-23 is provided in the following tables.

Table A: Number of applications by type of applicant and outcome*

	Access granted in full	Access granted in part	Access refused in full	Information not held	Information already available	Refuse to deal with application	Refuse to confirm/ deny whether information is held	Application withdrawn
Media (21)	5	1	1	6	1	6	0	1
Members of Parliament (7)	0	0	1	1	2	3	0	0
Private sector business (19)	3	0	2	5	3	3	0	3
Not for profit organisations or community groups (29)	6	3	2	8	5	3	0	2
Members of the public (application by legal representative) (23)	0	2	0	14	0	4	0	3
Members of the public (other) (41)	6	3	3	15	5	6	0	3
140	20	9	9	49	16	25	0	12

Total = 140 *More than one decision can be made in respect of a particular access application. If so, a recording must be made in relation to each such decision. This also applies to Table B.

Table B: Number of applications by type of application and outcome

	Access granted in full	Access granted in part	Access refused in full	Information not held	Information already available	Refuse to deal with application	Refuse to confirm/ deny whether information is held	Application withdrawn
Personal information applications* (27)	1	2	0	20	0	1	0	3
Access applications (other than personal information applications) (105)	17	6	7	27	16	22	1	9
Access applications that are partly personal information applications and partly other (8)	2	1	2	2	0	1	0	0
140	20	9	9	49	16	24	1	12

TOTAL = 140 *A personal information application is an access application for personal information (as defined in clause 4 of Schedule 4 to the Act) about the applicant (the applicant being an individual). PLEASE NOTE: The total number of decisions in Table B should be the same as Table A.

Table C: Invalid applications

Reason for invalidity	Number of applications
Application does not comply with formal requirements (section 41 of the Act)	25
Application is for excluded information of the agency (section 43 of the Act)	0
Application contravenes restraint order (section 110 of the Act)	0
Total number of invalid applications received	25
Invalid applications that subsequently became valid applications	9

Table D: Conclusive presumption of overriding public interest against disclosure: matters listed in Schedule 1 of the Act

	Number of times consideration used*
Overriding secrecy laws	1
Cabinet information	3
Executive Council information	0
Contempt	0
Legal professional privilege	0
Excluded information	2
Documents affecting law enforcement and public safety	0
Transport safety	0
Adoption	0
Care and protection of children	0
Ministerial code of conduct	0
Aboriginal and environmental heritage	0

More than one public interest consideration may apply in relation to a particular access application and, if so, each such consideration is to be recorded (but only once per application). This also applies in relation to Table E.

Table E: Other public interest considerations against disclosure: matters listed in table to section 14 of the Act

	Number of occasions when application not successful
Responsible and effective government	8
Law enforcement and security	0
Individual rights, judicial processes and natural justice	10
Business interests of agencies and other persons	1
Environment, culture, economy and general matters	0
Secrecy provisions	0
Exempt documents under interstate Freedom of Information legislation	0

Table F: Timeliness

	Number of applications
Decided within the statutory timeframe (20 days plus any extensions)	83
Decided after 35 days (by agreement with applicant)	17
Not decided within time (deemed refusal)	8
Total	108

Table G: Number of applications reviewed under Part 5 of the Act (by type of review and outcome)

	Decision varied	Decision upheld	Total
Internal review	2	7	9
Review by Information Commissioner*	1	17	18
Internal review following recommendation under section 93 of Act	1	3	4
Review by NCAT	0	3	3
Total	4	30	34

*The Information Commissioner does not have the authority to vary decisions but can make recommendations to the original decision-maker. The data in this case indicates that a recommendation to vary or uphold the original decision has been made.

Table H: Applications for review under Part 5 of the Act (by type of applicant)

	Number of applications for review
Applications by access applicants	34
Applications by persons to whom information the subject of access application relates (see section 54 of the Act)	0

Table I: Applications transferred to other agencies under Division 2 of Part 4 of the Act (by type of transfer)

	Number of applications transferred
Agency-initiated transfers	23
Applicant-initiated transfers	0

Legal changes

Acts administered, legislative changes and subordinate legislation.

Acts administered

- Abortion Law Reform Act 2019 No 11
- Anatomy Act 1977 No 126
- Assisted Reproductive Technology Act 2007 No 69
- Cancer Institute (NSW) Act 2003 No 14
- Centenary Institute of Cancer Medicine and Cell Biology Act 1985 No 192
- Drug and Alcohol Treatment Act 2007 No 7
- Drug Misuse and Trafficking Act 1985 No 226, Part 2A, jointly with the Minister for Police
- Fluoridation of Public Water Supplies Act 1957 No 58
- Garvan Institute of Medical Research Act 1984 No 106
- Health Administration Act 1982 No 135
- Health Care Complaints Act 1993 No 105
- Health Care Liability Act 2001 No 42
- Health Practitioner Regulation (Adoption of National Law) Act 2009 No 86 and the Health Practitioner Regulation National Law (NSW) (except parts, the Attorney General)
- Health Professionals (Special Events Exemption) Act 1997 No 90
- Health Records and Information Privacy Act 2002 No 71
- Health Services Act 1997 No 154
- Human Cloning for Reproduction and Other Prohibited Practices Act 2003 No 20
- Human Tissue Act 1983 No 164
- Lunacy and Inebriates (Commonwealth Agreement Ratification) Act 1937 No 37
- Lunacy (Norfolk Island) Agreement Ratification Act 1943 No 32
- Medicines, Poisons and Therapeutic Goods No 73
- Mental Health Act 2007 No 8
- Mental Health and Cognitive Impairment Forensic Provisions Act 2020 No 12, Parts 5 and 7, and Part 9 jointly with the Attorney General, remainder, the Attorney General
- Mental Health Commission Act 2012 No 13
- Poisons and Therapeutic Goods Act 1966 No 31
- Private Health Facilities Act 2007 No 9
- Public Health Act 2010 No 127
- Public Health (Tobacco) Act 2008 No 94
- Research Involving Human Embryos (New South Wales) Act 2003 No 21
- Royal Society for the Welfare of Mothers and Babies' Incorporation Act 1919 No 52, jointly with the Minister for Women
- Saint Vincent's Hospital Act 1912 No 5
- Smoke-free Environment Act 2000 No 69
- Voluntary Assisted Dying Act 2022 No 17

Legislative changes

New Acts

- Medicines, Poisons and Therapeutic Goods Act 2022 No 73

Amending Acts

- Health Legislation (Miscellaneous) Amendment Bill (No 2) 2022

Repealed Acts

Nil

Significant Orders

- Health Services (Transfer of Assets, Rights and Liabilities) Order 2022
- Health Services Amendment (The Agency for Clinical Innovation) Order 2023
- Public Health (COVID-19 General) Order (No 3) 2022
- Public Health (COVID-19 Care Services) Order (No 3) 2022
- Public Health (COVID-19 Self-Isolation) Order (No 3) 2022

Principal regulations made

- Public Health Regulation 2022
- Public Health (Tobacco) Regulation 2022
- Drug and Alcohol Treatment Regulation 2022
- Fluoridation of Public Water Supplies Regulation 2022
- Health Practitioner Regulation (Adoption of National Law) Regulation 2022
- Health Records and Information Privacy Regulation 2022.

Amending regulations made

- Human Tissue Amendment (Blood Donor Certificate) Regulation 2022
- Health Records and Information Privacy Amendment (Disclosure of Health Information) Regulation 2022
- Poisons and Therapeutic Goods Amendment Regulation 2022
- Private Health Facilities Amendment (Birthing on Country Demonstration Facilities) Regulation 2023

Repealed regulations

- Drug and Alcohol Treatment Regulation 2017
- Fluoridation of Public Water Supplies Regulation 2017
- Health Records and Information Privacy Regulation 2017
- Public Health Regulation 2012
- Public Health (Tobacco) Regulation 2016

Cyber security policy attestation

ANNUAL ATTESTATION STATEMENT

Cyber Security Annual Attestation Statement for the 2022-2023 Financial Year for NSW Health.

I, Susan Pearce, am of the opinion that NSW Health has managed cyber security risks in a manner consistent with the Mandatory Requirements set out in the NSW Government Cyber Security Policy.

Governance is in place to manage the cybersecurity maturity and initiatives of NSW Health.

Risks to the information and systems of NSW Health have been assessed and are managed.

The cyber incident response plan for NSW Health has been developed by eHealth NSW. The plan integrates with the security components of business continuity arrangements and has been implemented and tested during the reporting period.

eHealth NSW is responsible for delivery and management of state-wide ICT infrastructure and systems for NSW Health. eHealth NSW has an Information Security Management System (ISMS) and is an ISO27001 certified organisation.

NSW Health is doing the following to continuously improve the management of cyber security governance and resilience:
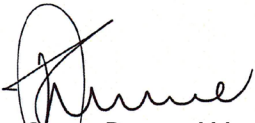
1. Ongoing awareness training of NSW Health staff about cyber safety
2. Providing mandatory training of cyber security fundamentals for all staff
3. Prompt reporting of cyber security incidents to Cyber Security NSW
4. Regular reviews of cyber security risks, treatments, and incidents by the ISMS Steering Committee and the Cyber Security Executive Committee
5. Rapid response to alerts issued on cyber security vulnerabilities
6. Regular patching and hardening activities of workstations and servers
7. Vigilantly monitoring and learning from recent cyber events in other organisations and strengthening our safeguards accordingly
8. Maturity improvements to address the Australian Cyber Security Centre's Essential Eight mitigation controls

This attestation covers the following agencies:

1. Agency for Clinical Innovation
2. Bureau of Health Information
3. Cancer Institute NSW
4. Central Coast LHD
5. Clinical Excellence Commission
6. eHealth NSW
7. Far West LHD
8. Health Care Complaints Commission
9. Health Education and Training Institute
10. Health Infrastructure
11. Health Professional Councils Authority
12. HealthShare NSW
13. Hunter New England LHD
14. Illawarra Shoalhaven LHD
15. Justice Health & Forensic Mental Health Network
16. Mental Health Commission NSW
17. Mid North Coast LHD

18. Murrumbidgee LHD
19. Nepean Blue Mountains LHD
20. Northern NSW LHD
21. Northern Sydney LHD
22. NSW Ambulance
23. NSW Health Pathology
24. NSW Ministry of Health
25. South Eastern Sydney LHD
26. South Western Sydney LHD
27. Southern NSW LHD
28. St Vincent's Health Network
29. Sydney Children's Hospitals Network
30. Sydney LHD
31. Western NSW LHD
32. Western Sydney LHD

Susan Pearce AM   8/9/23

Secretary, NSW Health

Information management

Privacy

The NSW Ministry of Health provides ongoing privacy information and support within the NSW Ministry of Health, and to the NSW public health system.

In 2022-23, work includes:

- Participation in the Mandatory Notification of Data Breach Scheme interagency working group on the Privacy and Personal Information Protection Amendment Act 2022
- Development of a data breach policy in anticipation of the commencement of Mandatory Notification of Data Breach Scheme
- Consultation on amendment to the Health Records and Information Privacy Regulation 2017
- Assisting with responses to cyber-attacks impacting NSW Health organisations
- Providing ongoing privacy advice to COVID-19 response teams
- Review of Privacy Impact Self-Assessment submissions for new Ministry projects and initiatives as part of the Privacy and Security Assurance Framework
- Providing advice to NSW Health organisations in relation to privacy internal reviews
- Review of Privacy Impact Self-Assessment submissions for new Ministry projects and initiatives as part of the Privacy and Security Assurance Framework
- Collaboration with eHealth NSW on the development of the Mobile Clinical Communications policy, the Single Digital Patient Record, the NSW Health Patient App, the Clinical Photography Policy, and systems for sharing health records with general practitioners to support integrated care
- Update of the NSW Health Privacy Management Plan published May 2023
- Update of the NSW Health Privacy Manual for Health Information with publication expected in the first half of the 2023-24 financial year
- Standing up NSW Health Privacy Contact Officer Community of Practice meetings and development of Privacy Contact Officer MS Teams channel and online resources
- Publication of NSW Health Privacy education animation for staff.

Internal Review

The *Privacy and Personal Information Protection Act 1988* provides a formalised structure for managing privacy complaints relating to this Act and the Health Records and *Information Privacy Act 2002.* This process is known as 'internal review'.

During 2022-23, the NSW Ministry of Health received one application for internal review under the *Privacy and Personal Information Protection Act 1988* and *Health Records and Information Privacy Act 2002*. No breach of either Act was found.

Our people

The *NSW Health Workforce Plan 2022-32* is a 10-year strategic statewide workforce plan that aligns with, supports and reinforces NSW Health's Future Health goals.

The plan outlines the NSW Ministry of Health workforce vision and its urgent system priorities to achieve this vision. It builds on the achievements of the Health Professionals Workforce Plan 2012-22 and provides a delivery framework to guide the implementation of Future Health's workforce-related strategies across the health system. It supports the state's health workforce to deliver safe, reliable and person-centred care, driving the best outcomes and experiences for NSW residents.

NSW Health continues to employ graduate nurses and midwives to ensure a sustainable workforce into the future. The NSW Health Nursing and Midwifery Office coordinates the statewide graduate nurse and midwife recruitment with over 3,000 graduates employed across NSW Health in 2022.

A total of 93% of Aboriginal nursing and midwifery GradStart candidates interviewed were offered graduate positions in 2023, and all Aboriginal Nursing and Midwifery Cadetship and Scholarship recipients interviewed were offered graduate positions as nurses or midwives.

NSW Health continued its highly successful annual medical recruitment campaign for Junior Medical Officers who have completed their first two years of postgraduate medical training. The annual recruitment campaign provides an opportunity for junior doctors to apply for positions in a range of specialties including general medicine, intensive and emergency care, pain management and psychiatry. The 2023 campaign resulted in the employment of more than 6,100 Junior Medical Officers for NSW Health, providing junior doctors with a valuable opportunity to work with world-class senior clinicians and to train in rotations across different clinical settings and geographic locations.

In 2023, there were 1,120 medical intern positions, an increase of 46 from 2022. Of these, 176 were rural preferential recruitment positions. Interns recruited through the rural preferential pathway spend their first two years working in a rural location.

Building positive workplace culture

Our workplaces strive to make continuous improvement to workplace culture. Each year, NSW Health makes it a priority to track employee engagement and workplace culture. This is done through the NSW People Matter Employee Survey, the NSW public sector's annual employee opinion survey.

The survey asks employees about their experience and perceptions of a range of workplace issues and practices, including management and leadership, service delivery, employee engagement, diversity and inclusion, public sector values, and unacceptable conduct.

The survey is conducted by the NSW Public Service Commission with assistance from NSW public sector agencies and Big Village, an external service provider. Big Village (which was previously known as ENGINE) is a member of the Association of Market and Social Research Organisations (AMSRO) and adheres to the Privacy (Market and Social Research) Code 2014 (the Code).

Responding to bullying and complaints

NSW Health agencies implemented local strategies to reduce the incidence of bullying and unacceptable behaviour and enhance positive and productive workplace culture. In addition, agencies also implemented the following statewide strategies:

- Anti-bullying management advisors, responsible for collaborating and knowledge sharing on best practice initiatives, using this information pool to improve communication, guide future processes and coach managers on effective bullying management strategies
- The confidential Anti-Bullying Advice Line, responsible for provision of guidance and information to employees about the complaint resolution process
- Bullying data collection where NSW Health organisations are responsible to report individual complaint data to the NSW Ministry of Health, where complaints are initially assessed as potential bullying complaints
- Addressing Grievances and Concerns Managers' and Staff Portal – web portals to support managers and staff across NSW Health to address grievances and concerns, including bullying, appropriately and as soon as they arise
- Bullying Risk Assessment Tool is to be launched to assist health organisations assess the potential of bullying in the workplace with an aim to prevent or minimise the risk of psychological injury.

NSW Health has made a concerted effort to improve the accuracy of bullying complaint reporting. There were 128 bullying complaints between 1 July 2022 to 30 June 2023, up from 66 complaints in 2021-22. These complaints represent 0.09% of the total full-time equivalent staff in the NSW Health System (based on full-time equivalent staff as of 30 June 2023). The NSW Ministry of Health has also implemented an Addressing Grievances and Concerns Staff Portal, which contains extensive tools to educate and assist staff on self-resolving grievances with the other party and to participate in the grievance process when the matter is escalated to their manager.

Workforce diversity

NSW Health welcomes people of diverse backgrounds and recognises the crucial role a sense of belonging plays in delivering an effective, functioning, diverse and inclusive workplace.

The Diversity Inclusion Belonging resource hub provides direction to NSW Health organisations to help them meet the diversity and inclusion targets set under the Premier's Priorities.

The NSW Health human resources information system has been modified to allow a person with disability, an Aboriginal person or a person who is serving, or has served, in the Australian Defence Force to self-identify, resulting in more accurate NSW Health diversity data that reflects our workforce and the community it serves.

Together, the Centre for Aboriginal Health and the Workforce Planning and Talent Development Branch fund 20 cadetships per year as a workforce target and reflects the priorities of the "NSW Health Workforce Plan 2022- 2032". The program has been managed by the Health Education and Training Institute. The Aboriginal Allied Health Cadetship supported 16 Cadets throughout the 2022-2023 financial year.

Aboriginal workforce representation continues to develop across the breadth of role types in NSW Health services. NSW Health continues to set specific workforce targets to drive improvements in the establishment of the Aboriginal Health Practitioner role across clinical multidisciplinary teams.

NSW Health has established a stretch target of 16 Aboriginal people in leadership roles by 2025, exceeding the previous goal of doubling Aboriginal people in leadership roles from five to 10 by 2025 and achieving 11 Aboriginal senior leaders by December 2020.

As of June 2023, 26 Aboriginal people were employed in a senior leadership role.

The cultural safety of NSW Health's Aboriginal workforce and client group continues to be a priority. The focus is to address racism and unconscious bias through the delivery of the Respecting the Difference – an Aboriginal cultural training program – as well as refreshing the program to drive improvements into the future.

Trends in the representation of workforce diversity groups

Workforce Diversity Group	Benchmark	2021	2022	2023
Women	50%	74.6%	74.5%	74.5%
Aboriginal and/or Torres Strait Islander People	3.3%	2.8%	2.9%	2.9%
People whose first language spoken as a child was not English	23.2%	25.2%	24.0%	25.4%
People with disability	5.6%	1.8%	1.7%	1.8%
People with disability requiring work-related adjustment	N/A	0.4%	0.4%	0.4%

Note: **1.** The benchmark of 50% for representation of women across the sector is intended to reflect the gender composition of the NSW community. **2.** The NSW Public Sector Aboriginal Employment Strategy 2014 – 17 introduced an aspirational target of 1.8% by 2021 for each of the sector's salary bands. If the aspirational target of 1.8% is achieved in salary bands not currently at or above 1.8%, the cumulative representation of Aboriginal employees in the sector is expected to reach 3.3%. **3.** A benchmark from the Australian Bureau of Statistics (ABS) Census of Population and Housing has been included for People whose First Language Spoken as a Child was not English. The ABS Census does not provide information about first language, but does provide information about country of birth. The benchmark of 23.2% is the percentage of the NSW general population born in a country where English is not the predominant language. **4.** In December 2017 the NSW Government announced the target of doubling the representation of people with disability in the NSW public sector from an estimated 2.7% to 5.6% by 2027. More information can be found at: Jobs for People with Disability: A plan for the NSW public sector. The benchmark for 'People with Disability Requiring Work-Related Adjustment' was not updated.

Trends in the distribution index for workforce diversity groups

Workforce Diversity Group	Benchmark	2021	2022	2023
Women	100	92	92	93
Aboriginal and/or Torres Strait Islander People	100	76	77	77
People whose first language spoken as a child was not English	100	99	96	95
People with a disability	100	88	88	86
People with a disability requiring work-related adjustment	100	87	88	88

Note: **1.** A Distribution Index score of 100 indicates that the distribution of members of the Workforce Diversity group across salary bands is equivalent to that of the rest of the workforce. A score less than 100 means that members of the Workforce Diversity group tend to be more concentrated at lower salary bands than is the case for other staff. The more pronounced this tendency is, the lower the score will be. In some cases, the index may be more than 100, indicating that members of the Workforce Diversity group tend to be more concentrated at higher salary bands than is the case for other staff. **2.** The Distribution Index is not calculated when the number of employees in the Workforce Diversity group is less than 20 or when the number of other employees is less than 20.

Workplace health and safety

In 2022-23, NSW Health continued to enhance the policy framework to ensure a best practice approach to health and safety.

Policies and guidelines reviewed and released in 2022-23 were:

Work Health and Safety Audits (PD2023_010)

This policy sets out the requirement for NSW Health organisations to undertake work health and safety (WHS) audits. Audits are conducted to determine the effectiveness of management systems, to identify the strengths and opportunities for improvements and to ensure compliance with the WHS legislation and NSW Health policies and procedures. This policy provides a consistent, effective approach for gathering information on which a NSW Health organisation can plan and implement WHS improvements.

Fatigue Management in NSW Health Workplaces (GL2023_012)

This guideline provides a risk management approach for managing work-related fatigue. It includes guidance on identifying areas at increased risk for work-related fatigue, assessing the work, health and safety-related issues and providing strategies to eliminate work-related fatigue as much as possible or to minimise its impact where it cannot be eliminated.

Employee Assistance Programs (PD2022_048)

This policy directive outlines standards for Employee Assistance Programs (EAPs) to ensure employees have access to effective assistance services.

NSW Ministry of Health has also developed a Mental Health and Wellbeing Framework intended to provide strategic direction for the creation of psychologically safe workplaces where psychosocial risks are identified, eliminated or controlled. Work has commenced on an action plan to ensure the implementation of the framework. A program of security audits has commenced across NSW Health workplaces to ensure compliance with NSW Health security standards. A wide range of supporting resources have been developed to assist frontline managers identify and manage security-related risks in their workplaces.

Additionally, a range of training programs have been provided across NSW Health including:

- Certificate II in Security Operations: this is the pre-qualification program to be completed by individuals who are seeking to hold a NSW security licence. This program has allowed hospitals to enhance the existing security workforce.
- Security in the Health Environment: this program builds on the current skills of existing NSW Health security staff to provide effective and appropriate security operations in a therapeutic health environment.
- Security auditor training: this program ensures staff involved in local security auditing have the capability and expertise to undertake robust audits.

Workers compensation

In 2022-23, NSW Health supported its workplaces with a range of practice guides to continue to improve rehabilitation, injury management and recover at work practices.

The NSW Ministry of Health is progressing strategies to:

- facilitate opportunities to enhance recovery at work through the identification and sharing of suitable duties
- identify and mitigate psychosocial issues for workers following a workplace injury
- reduce risk associated with Work Injury Damages (WDI) claims.

Prosecutions under the Work Health and Safety Act 2011

There were no prosecutions against the NSW Ministry of Health under the Work Health and Safety Act in 2022-23.

Research and development

Medical Research Support Program and associated programs

Medical Research Support Program

The NSW Government established the Medical Research Support Program to provide infrastructure funding to health and medical research organisations. The following grants were paid in 2022-23:

Organisation	Amount ($)
Black Dog Institute	$591,979
Centenary Inst of Cancer Medicine & Cell Biology	$1,880,506
Children's Cancer Institute Australia	$942,726
Children's Medical Research Institute	$1,928,971
Garvan Institute of Medical Research	$5,983,412
Ingham Institute for Applied Medical Research	$2,815,554
Victor Chang Cardiac Research Institute Ltd	$1,361,439
Woolcock Institute of Medical Research Ltd	$3,434,807

Schizophrenia Research

Funding supports researchers to undertake schizophrenia research across basic science and pre-clinical research.

Organisation	Amount ($)
University of Newcastle	$249,464
University of NSW	$746,872

Networks

Funding has been provided to the following networks to support statewide research collaboration.

Organisation	Amount ($)
Australian Cardiovascular Alliance Ltd	$165,000
Garvan Institute of Medical Research (NSW Early Phase Clinical Trials Alliance)	$50,000

Genomics

Precision Oncology Screening Platform enabled Clinical trial

This investment supports and leverages the national expansion of the Genomics Cancer Medicine Program.

Organisation	Amount ($)
Australian Genomic Cancer Medicine Centre Ltd	$18,000,000

Paediatric Precision Medicine

Investment in technology and staff to advance paediatric precision medicine to help treat childhood cancer and other genetic disorders

Organisation	Amount ($)
Paediatrio Ltd	$20,000,000

Biobanking

Biospecimen Collections Grant

The Biospecimen Collection Grant forms part of the Sydney Omics Collaborative Initiatives. The funding covers collection, processing and storage, retrieval, and transport of biospecimens to the NSW Health Statewide Biobank

Organisation	Amount ($)
The Sax Institute	$50,000
University of NSW	$24,868
University of Sydney	$236,294
Garvan Institute of Medical Research	$100,000

Medical Devices and Commercialisation

Medical Devices Fund

The Medical Devices Fund is a competitive technology development and commercialisation fund which helps encourage and support investment in the development of medical devices and related technologies in NSW.

Organisation	Amount ($)
Australis Scientific Pty Ltd	$750,000
EMVision Medical Devices Ltd	$2,500,000
Eudaemon Technologies Pty Ltd	$4,035,000

Medical Research Commercialisation Programs

The Medical Research Commercialisation Fund (now Brandon Biocatalyst) was established in 2007 as an investment collaboration that supports early-stage development and commercialisation opportunities from medical research institutes and allied research hospitals in Australia. Brandon Biocatalyst has been working with the NSW institutes over the past five years to increase the capacity to commercialise research discoveries. Through this funding, NSW Health gains access to its expertise, training and mentoring.

The NSW Health Commercialisation Training Program was established in 2014 in partnership with Cicada Innovations. The Program is a suite of training modules designed to ensure promising intellectual property can be commercialised and to upskill and retain talent. Modules cover regulatory and reimbursement, capital raising, business pathways for medical devices, diagnostics, software as a medical device, and therapeutics.

Organisation	Amount ($)
Brandon BioCatalyst	$450,000
Cicada Innovations Pty Ltd	$750,000

Research Grants and Capacity Building Programs

Cardiovascular research capacity

The NSW Cardiovascular Disease Research Capacity Building Program aims to attract and retain high quality cardiovascular researchers in NSW to build a vibrant and highly skilled workforce, with the aim of making NSW the leading state for cardiovascular research in Australia.

Organisation	Amount ($)
National Heart Foundation of Australia (CVRN)	$250,000
The Heart Research Institute Ltd	$999,998
University of NSW	$3,926,817
University of Sydney	$7,541,634

Early mid-career fellowships and PhD programs

The early to mid-career fellowship program provides funding to promote the participation of early to mid-career researchers in high quality research projects across the spectrum, from basic science through to health services and population health research.

NSW Health's PhD program provides for PhD students conducting research in drug development and biopharmaceuticals under the joint supervision of an academic and industry supervisor.

Organisation	Amount ($)
St Vincent's Hospital Sydney Ltd	$499,900
The Heart Research Institute Ltd	$80,000
University of Newcastle	$1,159,987
University of NSW	$1,058,346
University of Sydney	$418,164

Spinal Cord Injury Research Grants

This program provides grants to NSW spinal cord injury researchers to drive cutting-edge, cure and care-related projects.

Organisation	Amount ($)
University of NSW	$1,285,787
University of Sydney	$1,287,207
University of Technology Sydney	$390,690

Translational Research Grants Scheme

The Translational Research Grants Scheme takes an innovative approach to funding priority-driven research led by local health districts and specialty networks in NSW.

Organisation	Amount ($)
University of Newcastle	$494,725
University of Sydney	$902,168
South Eastern Sydney Local Health District	$265,696
Murrumbidgee Local Health District	$98,987
Sydney Children's Hospitals	$223,646
South Western Sydney Local Health District	$166,877
Western NSW Local Health District	$154,065

Rural Regional and Remote Clinical Trial Enabling Program

NSW Health and ACT Health, through Office of Health and Medical Research was awarded $30.6 million over five years from the Commonwealth Medical Research Future Fund for the Rural, Regional, and Remote Clinical Trial Enabling Program. The aim of this program is to deliver increased and more equitable access to clinical trials for patients in rural, regional, and remote NSW and ACT

Organisation	Amount ($)
Canberra Health Services	$383,538
Western NSW Local Health District	$96,030
Hunter New England Local Health District	$131,471
Ministry of Health – Office of Health and Medical Research	$799,877

COVID-19 research funding

The COVID-19 Research Grant is provided to research institutions and universities to support specific research projects, clinical trials and studies. COVID-19 research funding has been a critical component of the state's response to the pandemic.

Organisation	Amount ($)
The Westmead Institute for Medical Research (VIIM)	$371,183
University of NSW (Vaccine Acceleration Research Grants)	$1,000,000
University of Sydney (Vaccine Acceleration Research Grants)	$995,867

Population health and health services research support

The Sax Institute helps policy makers find and use evidence to inform real-world decisions. In 2022-23, NSW Health provided $1.8 million to the Sax Institute to manage several large-scale research assets and platforms, broker evidence reviews on health system priorities, and provide research and evaluation skills training and support.

In 2022-23, the Centre for Epidemiology and Evidence delivered professional development workshops to over 250 NSW Health staff on program evaluation, economic evaluation, program logic, critical appraisal of evidence and analysing health service data.

The Prevention Research Support Program is a competitively funded grant scheme administered by the Centre for Epidemiology and Evidence in alignment with NSW Health priorities. Its purpose is to support research infrastructure and strategies that build research capacity and strengthen prevention and early intervention research that can be translated into policy and practice. The program is well-established, having been implemented in four-year cycles since 2003. Round six of the program commenced in July 2022. A total of nine organisations were funded to the value of $12 million over four years.

Grants paid in 2022-23	Amount ($)	Purpose
Kolling Institute	$135,000	Women and Babies Research
University of Newcastle	$425,000	Priority Research Centre Health Behaviour
University of New South Wales	$480,000	The Kirby Institute
University of New South Wales	$425,000	National Drug and Alcohol Research Centre
University of New South Wales	$300,000	Centre for Primary Health Care and Equity
University of Sydney	$425,000	Prevention Research Collaboration
University of Sydney / Sydney Local Health District	$125,000	Edith Collins Centre
University of Wollongong	$315,000	Early Start
Western Sydney Local Health District	$370,000	Centre for Infectious Diseases and Microbiology - Public Health
TOTAL	$3,000,000	

Equity and diversity

NSW LGBTIQ+ Health Strategy 2022-2027

The NSW LGBTIQ+ Health Strategy 2022-2027 provides direction to all NSW Health organisations and staff, so that collectively the system can deliver the best care to LGBTIQ+ people and work with them to achieve optimal health and wellbeing.

Delivery of the strategy is supported by an implementation plan and guided by a committee comprising representatives from NSW Health, Primary Health Networks, St Vincent's Hospital Sydney, the University of Sydney, the University of NSW and community organisations, including BlaQ Aboriginal Corporation, ACON, The Gender Centre, Twenty10, Trans Pride Australia and Intersex Human Rights Australia.

In the strategy's first year of implementation, NSW Health has realised many significant steps forward:

• Provided funding to establish a LGBTQ+ Health Centre in Sydney
• Facilitated the NSW LGBTIQ+ Health Fund to kickstart over 20 local projects across the health system to achieve actions under the strategy
• Committed funding and strengthened community partnerships to enhance mental health and suicide prevention initiatives in LGBTIQ+ communities
• Provided specialist multidisciplinary health services for trans and gender diverse young people and their families through a statewide service
• Implemented a discovery project to investigate improvements for collecting data in the NSW Health System on gender, sexuality, intersex variations and other variables
• Provided LGBTIQ+ inclusion training in collaboration with Twenty10 and Intersex Human Rights Australia to over 200 staff at the NSW Health head office
• Promoted the strategy to international delegates at the Sydney WorldPride Human Rights Conference 2023
• Delivered a cross-organisational response to support a healthy and safe Sydney WorldPride 2023.

The pivotal strength of the strategy's successful implementation is the partnerships that have been built with communities. These relationships acknowledge the depth of lived experience, trauma, resilience, passion, pride and possibilities.

Disability Inclusion Action Plan

The NSW Health Disability Inclusion Action Plan 2016-2019 supports improved access to quality healthcare and employment for people with disability. It remains ongoing until a new plan is released in early 2024. The new plan will reflect NSW Health's continued commitment to providing equitable and dignified access to services and employment for people regardless of disability and align with Australia's Disability Strategy 2021-2031.

Key achievements in 2022-23 include:

• The Intellectual Disability Health Service (IDHS), which provides clinical assessment and referral for people with intellectual disability and complex health needs, saw 943 clients in 2022. The IDHS also offers advice, education and clinical supports to general practitioners and NSW Health staff to build the capacity of mainstream health services to respond to the needs of people with intellectual disability and their carers.
• In collaboration with the Department of Developmental Disability Neuropsychiatry, University of NSW (3DN):
  - developed easy-read information to help consumers access and understand mental health services in NSW and translated this into three community languages
  - developed an interactive mental health service pathway web tool for people with intellectual disability https://www.3dn.unsw.edu.au/projects/intellectualdisability- mental-health-service-pathway-tool.
• The NSW Agency for Clinical Innovation Transition Care Network has developed a series of easy-to-read fact sheets to support consumers moving from paediatric to adult health services. A carer fact sheet has also been developed to support young people with an intellectual disability transitioning to adult health services.
• The Centre for Oral Health Strategy launched the NSW Oral Health Strategic Plan 2022-2032 to ensure the delivery of culturally safe and responsive care, and launched several initiatives to support the plan's implementation. These include a workforce capacity building program and a project to improve health literacy and oral health information for carers. Both initiatives have engaged consumers and key stakeholders to develop appropriate resources which include videos, tip sheets and corresponding information in an easy-to-read format.

NSW Carers (Recognition) Act 2010

NSW Health recognises and acknowledges carers' unique knowledge and experience. Carers play an important role in supporting the health and wellbeing of people across the state. NSW Health seeks to provide timely, responsive, appropriate and accessible supports through a variety of initiatives and programs across the state.

NSW Health has begun the review and update of the *NSW Health Recognition and Support for Carers: Key Directions*. This document is designed to provide a framework for NSW Health's response to the needs of carers across the NSW public health system. The updated document will focus on the three main groups of carers involved with NSW Health's services – carers of patients, patients who are carers, and NSW Health staff who are carers, outlining system-level work that enables support for these groups.

This year NSW Health also partnered with Department of Communities and Justice and committed to several actions in the *NSW Carers Strategy Action Plan 2023–2024*. Work has started to review NSW Health's approach to data around carers and to implement the Family and Carer Mental Health Program evaluation recommendations. NSW Health is also committed to reviewing available resources and information for carers, which will commence in coming months.

NSW Health local carer support services across NSW continue to assist carers to access appropriate services and current information, as well as raise awareness of carers and their needs.

Multicultural health

Multicultural NSW oversees the Multicultural Policies and Services Program.

It is a whole-of-government initiative focused on ensuring government agencies implement the principles of multiculturalism through their strategic plans and deliver inclusive and equitable services to the public.

In 2022-23 NSW Health has continued to ensure the health system is accessible and responsive to the needs of culturally and linguistically diverse (CALD) people.

The *NSW Health Plan for Healthy Culturally and Linguistically Diverse Communities 2019-2023* aligns with the Multicultural Policies and Services Program Framework and is a statewide policy for meeting the health needs of CALD consumers in NSW. The plan focuses on access and quality of healthcare; health literacy; cultural responsiveness; and understanding community health needs.

In 2022-23 NSW Health published the *NSW Refugee Health Plan 2022-27*. The plan outlines NSW Health's commitment to meeting the health needs of people from refugee backgrounds. The plan takes a culturally responsive, trauma-informed, and strengths-based approach to support people from refugee backgrounds to be healthy, thriving members of NSW.

In 2021-22 the Health and Social Policy Branch launched a new NSW Refugee Health Flexible Fund which provided over $2 million across a two-year period to 15 initiatives which aim to improve health access, equity and outcomes for patients from refugee backgrounds.

Initiatives have focused on creating and improving culturally appropriate models of care, improving access to in-language health resources and information, cultural sensitivity education and awareness for NSW Health staff, and empowering refugee patients, their families and carers to be more involved in their care.

NSW Health improves access and quality of care for people from culturally and linguistically diverse backgrounds

Examples of significant work across each of the outcomes outlined in the *NSW Health Plan for Healthy Culturally and Linguistically Diverse Communities 2019-2023* and *Multicultural Policies and Services Program Framework* include:

Cancer Institute NSW

Cancer Institute NSW supported improvements in patient-centred care through enhancing its patient-reported measures program. The program collects feedback about cancer patients' experiences and outcomes, supporting discussions with patients and provision of tailored information and support. Surveys from the program were expanded to include an additional eight languages (Arabic, Vietnamese, Chinese simplified, Chinese traditional, Korean, Greek, Spanish and Italian) to increase accessibility for culturally and linguistically diverse (CALD) people. Multicultural consumers were actively engaged throughout the design and roll-out of the surveys. The surveys will allow CALD patients to provide feedback in their language on how care is affecting their wellbeing, which will enable clinicians to respond appropriately.

Centre for Oral Health Strategy

The Refugee and Asylum Seeker Oral Health Project has been running since 2021 and aims to promote culturally sensitive oral health care and improve access to preventive oral health advice and care. The project partners with local health district's oral health services, refugee health services and multicultural health services, as well as local organisations. The program has now expanded across two metropolitan local health districts and has streamlined processes for refugee and asylum seeker patients, including improving access to interpreter services. This has enabled people from multicultural communities to prioritise dental care.

South Western Sydney Local Health District

The Natural Helper program is a consumer-partnership initiative which aims to better support patients from CALD backgrounds. The program enables healthcare providers working in chronic and complex care clinics to work with a volunteer consumer mentor from a CALD community.

The consumer mentor has lived experience of a chronic condition, has successfully navigated healthcare for their condition and identifies with one of the target CALD communities. They volunteer in participating clinics, engage with healthcare providers on a regular basis and are matched with consenting patients for up to six months. They provide social and emotional support to patients, while also reinforcing messages from the healthcare team and encouraging patients to adopt an active role in their chronic disease management. Thirteen consumer mentors from Arabic, Assyrian and Vietnamese backgrounds are participating in the program.

Sydney Children's Hospitals Network

The Sydney Children's Hospitals Network is delivering the Providing Enhanced Access to Healthcare project. The project aims to respond to the needs of CALD, refugee and asylum seeker communities by identifying issues and solutions through co-design. Key priorities identified through the project so far include:

- Enhancing access to medications: a patient resource is being developed to simplify the process of accessing and renewing medications to reduce patients and families needing to return to the hospital. This resource will be translated into a range of languages.
- Developing solutions to improve access to care, including prioritising waitlists for CALD and refugee patients with chronic and complex conditions and/or disability: A statement of intent is being developed which outlines the network's intention to support and prioritise care for priority populations, including refugees. Guidelines for implementation will be developed in conjunction with this statement.
- Enhancing care coordination, including a single point of contact and flexibility of appointment times.

Western Sydney Local Health District

The Western Sydney Local Health District successfully secured funding to continue 20 years of ground-breaking work by its GambleAware Multicultural Service, which provides gambling counselling to CALD communities across NSW. Counselling is tailored to different cultural and linguistic needs and includes established referral pathways to care. The purpose of the model is to upskill 10 mainstream GambleAware providers across metropolitan Sydney, regional and rural NSW to work with CALD communities.

The district's Health Care Interpreter Service and Clinical Research Support Unit collaborated on a project which sought to prioritise CALD and deaf patients' access to interpreter services for consultations related to clinical trials. This initiative is the first in NSW Health and has resulted in a dramatic increase in the number of CALD patients accessing lifesaving or life prolonging clinical trials.

Health Education and Training Institute (HETI)

Health Education and Training Institute Higher Education delivers a unit called Diversity and mental health. The unit helps builds capability and understanding of culturally inclusive practice in mental health, with emphasis on meeting diverse needs. The unit can contribute towards professional development or award study.

Hunter New England Local Health District

The Hunter New England Local Health District received funding to deliver two programs:

• Lost in Translation is aimed at improving outcomes for multicultural cancer patients by focusing on improving models of cancer care. Enhanced models of care will be delivered at the Calvary Mater Hospital in Newcastle.

• Speaking your Language is aimed at destigmatising and simplifying bowel cancer screening for CALD communities. The program will provide community education in Arabic, Chinese, Kurmanji, Vietnamese and English.

Southern NSW Local Health District

The Population Health team at Southern NSW Local Health District has initiated a Multicultural Healthy Eating program in collaboration with local multicultural centres. The seven-week program provides healthy eating and active living messages. Evaluation has shown improved intake of fruit and vegetables, water and increased exercise.

Mental Health Branch, NSW Ministry of Health

The Ministry has funded the delivery of the Mental Health Community Living Supports for Refugees program. The program provides trauma-informed, recovery-oriented, culturally safe and responsive psychosocial supports to refugees and asylum seekers experiencing psychological distress, mental ill health and impaired functioning. The purpose of the program is to enable participants to recover and live independently in the community. Evaluation of the program shows that 165 consumers have received support from the program, which is more than double the minimum contracted benchmark of 79 consumers. The evaluation also showed the program is well received by consumers and the sector.

NSW Ambulance

NSW Ambulance is developing a Consumer and Community Engagement Framework and Patient Charter. This work included consultation with 11 consumers and two consumer representatives, including consumers from CALD backgrounds. The draft Patient Charter includes statements that support people from CALD backgrounds to be active partners in their healthcare.

NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors

NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors has developed multiple projects which focus on supporting the Ukrainian community. Projects focus on mental health literacy and suicide prevention, community connections, youth projects and activities, supporting families in cultural transition, and wider community engagement and capacity building.

Sydney Local Health District

The Breast Cancer Concierge Program delivers one-to-one, in-language phone support from trained, bilingual 'concierges'. The program aims to assist CALD patients, families and carers with health system navigation and support after a diagnosis of breast cancer. The district will continue to support improvements to the program based on evaluation outcomes and quality improvements programs.

South Eastern Sydney Local Health District

South Eastern Sydney Local Health District, in partnership with the NSW Multicultural Health Communication Service, published the Developing health resources for people from refugee backgrounds: Best practice guide for NSW Health staff. The guide highlights the need for greater health resources targeted towards CALD communities, including the need for audio-visual resources which are informed by the expertise of key stakeholders in NSW Health and community organisations who work with refugee communities. The guide was developed based on consultation with CALD communities.

Centre for Population Health, NSW Ministry of Health

The Centre for Population Health has a range of population health strategies with a focus on priority populations including CALD background. These include:

• NSW Hepatitis C Strategy 2022-2025, released in July 2022

• NSW Healthy Eating and Active Living Strategy 2022-2032, released in September 2022

• NSW Sexually Transmissible Infections Strategy 2022-2026, released in September 2022

• NSW Hepatitis B Strategy 2023-2026, released in February 2023.

The strategies commit to partnering with priority populations to effectively implement each strategy and reach key populations. Actions across the strategies include strengthening access to information and support programs to address inequities and meet the needs of individuals and communities, including in key settings such as early childcare centres, schools, custodial and maternity settings.

These actions consider new models of care and modes of delivery to provide equitable access to support and make access to information more accessible and consistent.

St Vincent's Health Network Sydney

St Joseph's Hospital improved access to interpreting services through developing and implementing a new online system for booking interpreters and introducing video interpreting.

NSW Health supports people from culturally and linguistically diverse backgrounds to be active partners in their healthcare

Agency for Clinical Innovation

The Agency for Clinical Innovation continued to develop the Health Outcome Patient Experience (HOPE) platform in partnership with eHealth NSW and the NSW Ministry of Health. The purpose of the platform is to store and manage information provided by patients through online surveys, enabling patients and multidisciplinary care teams to capture, review and act on data in a timely and holistic way. CALD patients and carers from 10 language groups were included in the development and user acceptance testing of the platform. Interpreters, CALD patients and carers were also involved in developing a report on the cultural appropriateness of various quality of life and mental health assessment tools.

South Western Sydney Local Health District

Changing Life Keep Your Balance is a seven-session community education program which aims to support vulnerable CALD communities in South Western Sydney who have been disproportionally impacted by the COVID-19 pandemic. The program seeks to support healthy lifestyle choices and enhance mental health and wellbeing. A total of 18 programs were delivered in 118 sessions, reaching 225 members from various CALD communities in South Western Sydney. Program evaluation shows that participants had improved mental health literacy, stress management, mental health status and family relationships, and that family members also benefited from the program.

Cancer Institute NSW

Cancer Institute NSW engaged CALD consumers to develop a variety of print, web and audio-visual resources on cancer prevention, screening, care and clinical trials. The resources were developed in 38 languages and support increased cancer literacy and improved patient experience for multicultural communities.

Central Coast Local Health District

As part of the Central Coast Multicultural Interagency, The Central Coast Local Health District delivered four community interpreter workshops to Adult Migrant English Program students at both Gosford and Wyong TAFE. There were 108 participants from 21 countries, with information provided about interpreter access and usage, and how staff and consumers could provide feedback to the district.

Illawarra Shoalhaven Local Health District

Illawarra Shoalhaven Local Health District, in collaboration with Cancer Institute NSW, developed the Healthy Living and Cancer Screening project which aims to improve equity of outcomes for people affected by cancer from CALD backgrounds. The project specifically targeted the Macedonian community, with the Macedonian Welfare Association engaged to support the design, implementation and evaluation of the 12-month project. A key output of the project was a radio script promoting bowel cancer screening, which was developed in partnership with the Multicultural Health Communication Service. Macedonian consumers were directly involved in developing the script, with consumer representatives doing voiceovers. The project was evaluated with high levels of satisfaction, significant increase in screening knowledge and high levels of intention to engage in bowel screening tests.

Murrumbidgee Local Health District

The Enhancing Paediatrics in Primary Care model seeks to provide support to general practitioners to care for children within the Murrumbidgee region who are experiencing behavioural and/or developmental concerns. Input was sought from CALD and refugee consumers during the planning phase, including on the development and implementation of the Child and Family Health nursing clinic for refugee families within the Wagga Multicultural centre.

Nepean Blue Mountains Local Health District

Nepean Blue Mountains Local Health District's multicultural health service, in partnership with Nepean Redevelopment, engaged multicultural communities to seek input into the design and function of the upcoming Penrith Community Health Centre. Translated community surveys in six languages were used to conduct broad consultation with 11 different communities (online, group and individual consultations).

NSW Transcultural Mental Health Centre

Western Sydney Local Health District LHD received funding to establish a Transcultural Mental Health Line. The district engaged with National Accreditation Authority for Translators and Interpreters (NAATI) accredited translators to develop a range of resources to promote and operationalise the health line.

Content was developed and cultural relevance tested through bilingual clinicians and CALD community members. This ensured resources were simple in design, images were accurate, information was jargon-free and resources were robust to use across a variety of online, media and print platforms. In total, 226 resources were developed in 42 community languages. The centre will use these tools to engage with communities to promote access and uptake of the health line.

Western Sydney Local Health District

The NSW Education Program on Female Genital Mutilation/Cutting aims to support women and girls affected by, or at risk of, female genital mutilation/cutting practice. The program has conducted consultations with bilingual community educators and leaders, as well as 416 community members from seven practicing communities, to understand the views, experiences and drivers around the practice. These consultations have assisted in identifying current community needs, and enablers, and barriers to preventing the harmful behaviour. Findings from the research will inform recommendations for tailoring the existing program to appropriately respond to the needs of communities.

NSW Health is responsive to people's individual needs, language and culture

South Eastern Sydney Local Health District

The Multicultural Media Online Conference is hosted by the NSW Multicultural Health Communication Service, delivered in partnership with the NSW Ministry of Health and supported by Multicultural NSW. The forum is conducted fortnightly and covers current public health priorities, such as COVID-19, influenza and oral health. Attendees include multicultural media representatives from community newspapers, radio and television. A moderated panel of expert speakers cover key topics and answer questions.

NSW Transcultural Mental Health Centre

The NSW Transcultural Mental Health Centre has a multipronged approach to building cultural responsiveness of its staff and sessional workers. This includes:

- Sessional bulletins which share the latest research, policies and resources in the transcultural mental health sector. Six bulletins were distributed in 2022-23 with the aim to improve workforce knowledge of cultural responsiveness. Each issue also highlights training opportunities to enhance skills in working with diverse communities.
- The clinical supervision program provides monthly group supervision for clinical staff and sessional workforce to support cultural responsiveness across their work. In 2022-23, there were 428 hours of supervision completed with an average of 21 attendees each month.

- The centre workforce has access to an expansive professional development program to build skills in specific areas of culturally responsive practice. Topics in 2022-23 included:
  - CALD communities and war-related post-traumatic stress disorder
  - Mental health education and interventions for culturally diverse families
  - Diverse sexual orientation and gender identities in CALD communities.

eHealth NSW

eHealth NSW established a Diversity Council in November 2022 which aims to generate awareness and celebrate eHealth NSW's diverse workforce. The initial focus has been to update the eHealth NSW culture calendar to ensure important cultural and religious dates are acknowledged and celebrated throughout the year. The Diversity Council is also establishing networks across the organisation to support people from culturally and linguistically diverse (CALD) and other backgrounds. The networks will educate and support existing staff through storytelling, mentoring and supporting new staff.

Justice Health Forensic Mental Health Network

Justice Health NSW is developing a Trauma Informed Care and Cultural Responsiveness Framework specific to the Justice Health NSW population and context. The framework is being developed using a co-design methodology with patients and staff, including those from CALD backgrounds. It will include strategies and core competencies for staff, as well as implementation guidelines for managers, which will help to support a trauma-informed and culturally responsive workforce.

Centre for Oral Health Strategy

In collaboration with the NSW Refugee Health Service, the Centre for Oral Health Strategy encourages oral health teams across NSW to access the specific Refugee Health Service's Trauma-Informed Care training. Since its inception in 2021, more than 150 oral health staff have participated in the training. Reported benefits include improved knowledge and awareness of the various forms of trauma experienced by CALD patients. Trauma-Informed Care for health professionals is also available through Health Education and Training Institute, and oral health staff are regularly encouraged to complete this module.

Western NSW Local Health District

The Organisational Development Unit and Employee Assistance Program team at Western NSW Local Health District collaborated to provide advice and support to new CALD staff working in rural and remote areas. The unit is also planning a program to support and facilitate a leadership development network to promote diversity and inclusion, including to support CALD staff.

Sydney Local Health District

Sydney Local Health District hosted the Canterbury Leaders Forum which seeks to engage with CALD community leaders in the Canterbury area around health issues raised by the local community. Various projects have been initiated and enhanced as part of this initiative, including the localised Canterbury Pitch, offering funding of up to $50,000 for community-based organisations to deliver new and innovative ways to work with CALD communities in the Canterbury area.

NSW Health understands the needs, experiences and identities of culturally and linguistically diverse (CALD) communities

Bureau of Health Information

The Bureau of Health Information, in partnership with Health and Social Policy Branch, is currently examining the experiences of linguistically diverse people who attended NSW public hospitals and healthcare facilities. The analysis will enable a better understanding of the experiences of people who mainly speak a language other than English at home and how this differs from people who mainly speak English. Analyses will explore trends over time and key drivers of overall ratings of care. Patient comments will be used to provide further contextual insights. The information will inform a first ever Insights Report which is due for publication in late 2023.

Clinical Excellence Commission

The Clinical Excellence Commission supported the establishment of the Mental Health Patient Safety Program which oversees a range of initiatives that aim to create psychologically safe environments and embed cultural safety principles. Initiatives include:

- Mental Health Transforming Safety Culture Partnership Program
- Restorative Just and Learning Culture Program
- Seclusion Reduction Action Learning Network.

The Mental Health Patient Safety Program also supports local health districts and speciality health networks' mental health services in accessing and understanding data for system improvement.

This includes partnering with local health districts and speciality health networks to develop data dashboards which include mental health service measures. The data aims to guide consumer safety outcomes, including for at-risk groups relevant to the districts and networks' population.

St Vincent's Health Network Sydney

St Vincent's Health Network Sydney conducted a research project to better understand the use and need for interpreter services by CALD patients in a hospital rehabilitation setting and how this relates to clinical outcomes. This includes:

- Publication of a research paper on interpreters and rehabilitation outcomes
- A stakeholder survey to understand barriers, enablers and learning needs of rehabilitation professionals
- Creation of a national dataset to understand rehabilitation outcomes for CALD patients nationally.

Western Sydney Local Health District

In 2023, Western Sydney Local Health District's Epidemiology and Health Analytics team developed the Epidemiological Profile of Pacific People to examine the health of the Pacific Islander population in Australia. The profile highlighted that Pacific people experience poorer health, present to hospital late and have reduced engagement with health services.

In June 2023, the first Pacific Communities Health Forum, *Towards Holistic Health for Pacific Communities*, was organised to share the perspectives, needs and experiences of Pacific people and discuss pathways to improve engagement and health outcomes. The forum was attended by over 100 Pacific community/religious leaders and members, as well as health leaders from community health and acute services. It was an important step to establish trust and respectful relationships with the Pacific community and to work collaboratively to develop more holistic, culturally safe and responsive approaches to improve health.

Northern Sydney Local Health District

The Northern Sydney Local Health District Health Promotion Service surveyed 212 primary schools to better understand the health needs of CALD students and better direct attention and resources. Fifteen schools were identified where more than 80% of the student population speak a language other than English at home. Based on the survey findings, the service will ensure that these schools receive intensive support and additional resources from the School Years team in 2023-24.