

Central Coast Local Health District

# Safety and Quality Account

2022-23 Report  
2023-24 Future Priorities







## Acknowledgement of Country

Central Coast Local Health District acknowledges that we are located on the lands of Australia's first people. The traditional custodians of the land covered by our District are the Darkinjung people.

We pay respect to these lands that provide for us. We acknowledge and pay respect to the Aboriginal ancestors that walked and managed these lands for many generations before us.

We acknowledge and recognise all Aboriginal people who have come from their own country and who now call this country their home. We acknowledge our Elders, both past and present, our elders are our knowledge holders, teachers and pioneers.

We also acknowledge our Aboriginal youth who are our hope and who are our future leaders.

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# Statement on Safety and Quality

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Central Coast Local Health District (the District) is committed to providing safe, high quality health care services to members of the Central Coast community and visitors to our region. Caring for the Coast is the strategy we apply to everything we do. Our vision, **Caring for the Coast – every patient every time**, remains strong, and our purpose to enhance the health and wellbeing of our community continues to drive how we plan for and deliver our health care services.

The purpose of this Safety and Quality Account is to highlight the improvements in patient safety and quality of care achieved over the past year, and to keep our community informed about the District's priorities for 2023 to 2024.

As the Chief Executive and Board Chair, we are pleased to present our Safety and Quality Account for 2022-2023. It showcases the District's progress and achievements over the past 12 months and shares the areas we will work on in the coming year to ensure that we continue to deliver on our promise of Caring for the Coast – every patient, every time.



**Scott McLachlan**  
Chief Executive



**Professor  
Donald MacLellan**  
Board Chairperson

# Our Vision and Purpose

**Caring for the Coast** sets out our shared vision, purpose and strategic priorities. Our vision is to deliver exceptional care by caring for our patients, our community and our staff. Our purpose is to enhance the health and wellbeing of our community by working with them to agree on health priorities and the best way to address these and to maintain accessible, high quality and integrated services.

## Our Strategic priorities 2022-23

Our District identified the following three safety and quality priorities for the period 2021-22:

### Priority 1

Improving the District's performance on all Hospital Acquired Complication (HAC) rates to within target by June 2023.

The District has seen considerable improvement in Hospital Acquired Complications (HACs) during 2022-23 with 10 of 14 HACs now performing within target as of May 2023. Continued focus is required to reduce complications in falls, healthcare associated infections, respiratory illnesses and delirium. The respiratory and delirium HACs are both close to converting to performing however, a targeted focus on falls and Hospital Acquired Infections (HAI) inclusive of hand hygiene needs to remain a key focus for the District.

Due to the improvement of 10 HACs now performing, the funding adjutor for the financial year 2023/24 has improved by 92% to -\$41k from a negative penalty of -\$571k in 2022/23.

### Priority 2

Implementation and monitoring of the Towards Zero Suicide initiatives including; Zero Suicides in Care, Alternatives to Emergency Departments, and Assertive Suicide Prevention Outreach Teams as outlined in the service agreement.

A strong governance structure surrounding Towards Zero Suicide has been established and has oversight by the District Director of Medical Services as we aim to achieve zero suicides on the Central Coast. At present our suicide rate on the Central Coast remains high, our suicides involving patients within our care remains stable. To provide assurance in processes, an external review of our Acute Care Mental Health teams is underway and the findings and recommendations from this report will be monitored through the Clinical Safety, Quality and Governance Committee and the Health Care Quality Committee.





### Priority 3

Ensuring safe and timely access to care by meeting service agreement transfer of care and admitted emergency treatment performance indicators.

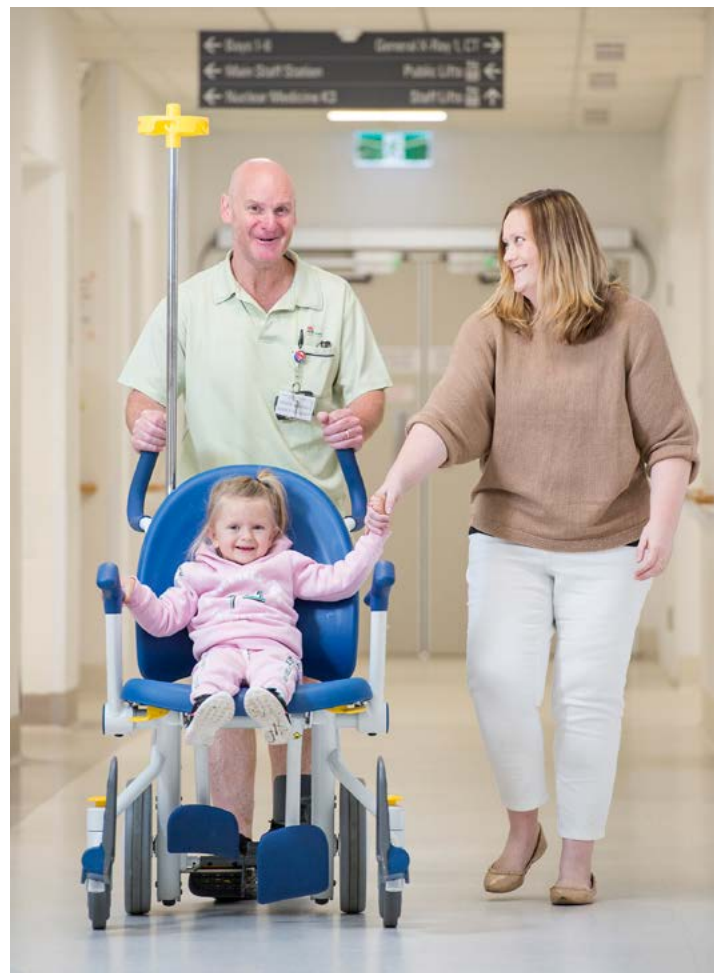
Ensuring safe and timely access to care continues to be an area requiring targeted improvement and is being monitored through the IMPACT program which reviews patient flow to identify areas for improvement, local site based committees, a District Access Demand and Capacity Committee and via the Finance and Performance Board sub-committee. There has been substantial improvement noted over the last 12 months with Triage 2 on time performance and transfer of care nearing performing and underperforming respectively.

The most significant access improvement in June 2023 was the completion of the **planned surgery recovery program**. There were no surgical cases waiting longer than clinically appropriate as of 30 June 2023. This has been a significant and sustained effort across the LHD and in partnership with private providers. Strategies are being finalised to minimise patients waiting longer than clinically necessary going into the future including ensuring ongoing theatre efficiency through the roll out of Our Path to Excellence in both operating theatres in cycle two currently underway. We are reviewing the oversight and governance across the waiting list management to learn from and implement strategies which helped in the recovery process, and we are looking forward to detailed surgical services planning by speciality following the completion of the District Clinical Services Plan.

### Priority 4

Ensuring patients and carers have positive experience and outcomes that matter as measured by the service agreement targets for the adult admitted and emergency patient experience and engagement index.

This priority has seen a slight improvement and will be a key priority for the coming twelve months as the newly established Consumer network and Consumer Community Committee commences.





**Patients**

Exceptional patient experience and outcomes



**Community**

A healthy, engaged and empowered community



**Staff**

A valued, respected, engaged and high performing workforce



**Resources**

Financially responsible and sustainable



**Future**

High quality, integrated, innovative services



Results statement

Enablers





# Snapshot

## 2022-2023 Achievements



### Caring for our Patients

#### Hospital Acquired Complications (HACs)

The District continues to improve performance in HACs with 10 of 14 HACs now performing as of May 2023. Non-performing HACs continue to be an ongoing focus for the District with deep dives and specialty reviews conducted for these areas with medical education, coding education and clinical documentation education provided to ensure the care provided is safe, high quality and the District continues to improve performance in these areas.

#### Older Persons Patient Safety Program – Wyong

In June 2022, the District partnered with the Clinical Excellence Commission (CEC) for 12 months to improve the care and experience for older people admitted to Wyong Hospital. The two wards with the highest falls rate were identified for the initial implementation of the program. To date, one ward has reduced the median number of falls per month from 12 (April to December 2022) to 8 (January to June 2023). The other ward continues to have variation month to month. Ongoing implementation of the program will be required to ensure sustainability of the improvements made.



### Caring for our Community

#### Central Coast Connections Expo

The District's Carer Support Unit secured a Ministry of Health grant, which was matched by CCLHD, to facilitate the inaugural Central Coast Connections Expo on 3 May 2023 during Human Experience Week. Over 300 people attended, with over 50 services and support groups hosting stalls. Keynote speakers included Humanitarian Sarah Morse and Quest for Life Chief Executive Officer Petrea King. The Glen Women performed a moving and beautiful dance.

Over 100 participants provided written feedback. 75% of responders rated the Expo as excellent and 25% as good. 61% of responders said the Expo exceeded their expectations and 38% said it met their expectations. Participants told us they felt inspired, hopeful, motivated, joyful and grateful after attending this workshop.

*“Very positive and inspired to do the best I can do and more informed about the importance of connection, belonging and community.”*





## Caring for our staff

### Improved Recruitment Processes

The Recruitment Unit has been able to streamline recruitment processes, enhance customer service, implement and run education sessions and communicate clear consistent messaging. As a result, the District has decreased the average time taken per recruitment episode from 86 business days in August 2022 to an average of 32.4 days.



## Caring for our Resources

### Rooftop Solar Panel Program

The 1.360 MWp large scale solar PV system installation at Gosford Hospital was completed and now supplies approximately 13% of total electricity consumed by the site. The installation of the 696 MWp carpark solar PV system at Wyong Hospital was also completed and this also supplies approximately 13% of total site electricity consumption.



## Caring for our Future

### Practice-Based Research

Nurses and midwives are actively engaged in practice-based research across CCLHD, leading the way to ensure patient care is based on best available evidence. In 2022-23, the Nursing and Midwifery Directorate supported 14 ethics approved investigator-led projects.



# 2022-2023 Year in Review at Central Coast Local Health District



**151,422**

Emergency  
Department  
Presentations



**95,158**

Admissions  
to Hospital



**1,002,699**

Occasions of  
Service Provided



**23,099**

Surgical operations



**2,855**

Mothers gave birth to

**2,896**

Babies



**689,446**

Outpatient or  
Non-Admitted  
Occasions of Service



**242,508**

Home-Based  
Occasions of Service



**27,700**

Dental Weighted  
Activity Units (DWAUs)



**17**

Significant adverse  
events

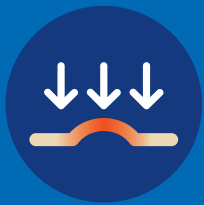


**6**

Inpatient fall resulting  
in death

**68**

Harm Score 2  
inpatient falls  
resulting in  
serious harm



**2**

Harm Score 2  
Pressure Injuries



**3**

Harm Score 2 Blood  
Stream Infections



**5,338**

Rapid Response Calls



**191**

REACH (patient and  
family activated rapid  
response) calls  
(Gosford 150 /  
Wyong 41)

# Central Coast

Mangrove Mountain



Gosford



Wyong



Lake Haven



Toukley



Long Jetty



Erina



Woy Woy



Kincumber



## KEY



Hospital with  
Emergency Department



Hospital without  
Emergency Department



Healthcare Centre



Community Health

## Geographical Profile

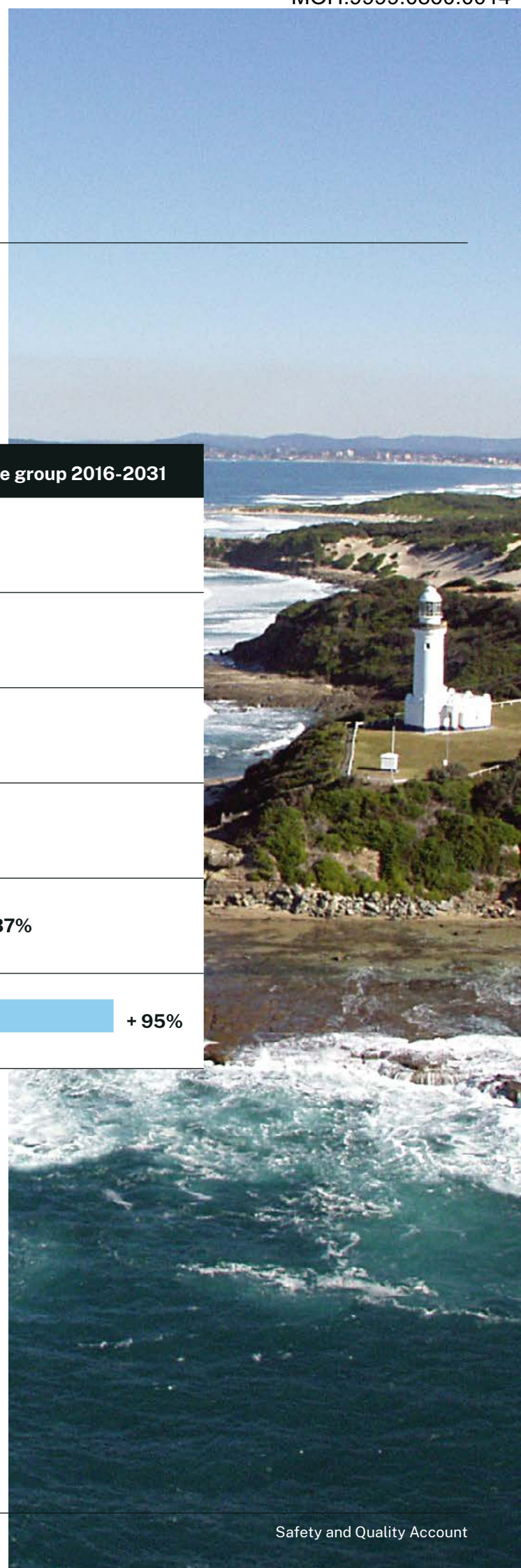
The District is nestled north of metropolitan Sydney and south of the Hunter Valley and provides health care services across a geographical area of approximately 1853 square kilometres. Our District, covers the Central Coast Local Government Area and works in liaison with the Hunter New England Central Coast Primary Health Network.

# Our Growing Community

The population of the Central Coast is projected to increase to more than 400,000 people by 2041. This is an increase of approximately 57,000 people (or 16 per cent) from 2021. There is projected to be an increase in the Central Coast population across all age groups.

	2021	2031	Growth by age group 2016-2031
<b>0-4</b>	19,582	22,057	+13%
<b>0-15</b>	49,104	50,033	+2%
<b>16-44</b>	116,563	136,432	+17%
<b>45-69</b>	108,112	115,636	+7%
<b>70-84</b>	43,725	59,821	+37%
<b>85+</b>	10,389	20,286	+95%
	<b>347,475</b>	<b>404,265</b>	<b>+16%</b>

An additional 16,096 older people aged 70-84 years (37 per cent increase) are expected on the Central Coast by 2041, and an additional 9,897 people aged over 85 years (95 per cent increase) by 2041.



# Our Population



## Socio-Economic Profile

Compared to NSW residents as a whole, Central Coast residents are:

- older;
- more likely to be born in Australia;
- more likely to have not completed Year 12 or equivalent education or attended university; and
- have a lower socio-economic status than the NSW average with this more pronounced in the northern parts of the region.

## Aboriginal and Torres Strait Islander people

We have a proud Aboriginal community on the Central Coast with 17,047 Aboriginal residents in 2021 (4.9 per cent of the population). The Central Coast Aboriginal population is expected to grow at twice the rate of the non-Aboriginal population. Meeting the health service needs of this large Aboriginal population is essential, as is providing culturally appropriate and culturally safe services.

The Aboriginal population is also a younger population with a median age of 23 years, compared to 43 years for Central Coast residents overall. In 2021, 34 percent of the Aboriginal population were aged 0-14 years, compared to 17 percent for the non-Aboriginal population on the Central Coast.

## Culturally and Linguistically Diverse Populations

Central Coast residents are becoming increasingly diverse. In 2021, more than 72,000 Central Coast residents were born outside Australia, including more than 19,000 born in non-English speaking countries. The top non-English speaking countries of birth for Central Coast residents were the Philippines, India, South Africa, and China.

Migrants from non-English speaking countries living in Australia for more than 10 years experienced poorer mental health and self-assessed health. In 2021, more than 3,000 Central Coast residents reported having low English proficiency. English proficiency can impact socio-economic status and the ability to access health services and employment.

Innovative use of technology to support the healthcare access needs of people from culturally and linguistically diverse populations, implemented early in the COVID-19 pandemic, continued in 2022-2023. This includes video-interpreting, language cue cards, and CALD Assist and Vocab communication apps pre-installed on iPads used in clinical services.



## People Living with Disability

On the Central Coast, 24,360 residents (or 7 per cent of the population) needed assistance for their disability in 2021. Every census count, the number of residents with a disability has increased.



	2011	2016	2021
<b>Number of Central Coast residents needing assistance for their disability</b>	17,933	21,082	24,360

The District recognises the importance of disability inclusion in health service delivery and its impact on the lives of people with a disability. The CCLHD Disability Inclusion Plan 2020-2023 continued to build upon the high levels of care provided and work towards proactively identifying and removing barriers faced by staff and consumers with a disability. Some achievements with redevelopments have included incorporated hearing loops, dedicated Changing Place facilities, audio announcements in elevators, and accessible counters.

## Carers

Carers are people who provide unpaid support to family or friends with a disability, illness or health condition. In the 2021 Census, 12.5% of the Central Coast population reported providing unpaid assistance to a person with a disability, health condition or due to old age (compared to 11.5% of the NSW population). The role of carers is often hidden. However, their contribution to community care is immeasurable. With the ageing of the population, increasing complexity and high levels of health risk and disadvantage, there is likely to be a greater need for caring roles in future years.

## Increasing Complexity and Prevalence of Chronic Conditions

Chronic conditions can have a substantial impact on a person's health and the need for health services. In 2021, more than 20% people on the Central Coast had one long term health condition, compared to 18% of people in NSW. Eight per cent of Central Coast residents had two long term health conditions (compared to 6 per cent of the NSW population); and 4.4% of Central Coast residents had three or more long term health conditions (compared to 3 per cent of the NSW population).

In 2021, 1.1% of Central Coast adult residents reported that they have dementia as a long-term health condition, (compared to 0.8% of the NSW population). With the ageing of the population, it is expected that the number of people with dementia, and the demand for dementia health and social care services, will continue to increase in future years.



## Our Health – how we compare

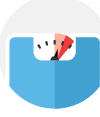



### Lower life expectancy

Life expectancy on the Central Coast is slightly lower than for NSW overall, with Central Coast residents experiencing 83.2 years life expectancy compared to 84.5 years for NSW in 2020.

The Aboriginal population in NSW in 2018 had a lower life expectancy than the non-Aboriginal population by approximately 10 years, with 71.6 years for Aboriginal males and 75.6 years for Aboriginal females.

### High levels of health risk

A higher proportion of people on the Central Coast are obese, drink alcohol at risky levels, smoke daily and have high or very high levels of psychological distress compared to NSW.

Factor		Central Coast	NSW
Obese		26.5%	23.2%
Smoke daily		10.3%	8.2%
Risky alcohol consumption		35.6%	26.7%
High or very high psychological distress		7%	5.5%

### High levels of disadvantage and vulnerable communities

The Central Coast community has low education levels, relatively low household incomes and areas of high disadvantage. These aspects all impact negatively on health outcomes.

# Key Facilities and Services



## 1

**Principal referral hospital**

- Gosford



## 1

**Major metropolitan hospital**

- Wyong



## 1

**Sub-acute hospital**

- Woy Woy



## 11

**Community and early childhood centres**



## 2

**Emergency Departments**

- Gosford and Wyong



## 4

**Renal dialysis units**

- Lakehaven Community Health Centre, Long Jetty Healthcare Centre, Gosford Hospital



## 3

**Oral health clinics**

- Gosford, Wyong, Woy Woy Hospitals

## Our District provides public health services to the Central Coast community.

The region is served by two acute hospitals:

- **Gosford Hospital** which is a principal referral hospital providing a comprehensive range of secondary level services including medical and surgical specialties, maternity, paediatrics, mental health, and some complex and tertiary level services, including trauma, interventional cardiology and cancer care. Services are provided in admitted, ambulatory and outpatient settings.
- **Wyong Hospital** which is considered a major metropolitan hospital providing a comprehensive range of secondary level services including emergency, surgery, stroke, acute medical, aged care, rehabilitation and mental health inpatient services as well as outpatient and ambulatory services.

Our District also has two sub-acute facilities located at:

- **Woy Woy Hospital** which provides inpatient and outpatient services with a range of community health services located onsite. Inpatient services are provided as part of the clinical stream of aged care, sub-acute and complex care services.
- **Long Jetty Healthcare Centre**, which provides a range of community and outpatient health care services, including renal dialysis and specialist palliative care.

The geographical region is supported by eleven sites where community and early childhood health services are provided. Community health centres provide a range of services to the people of the Central Coast. The mix of services available at each community health centre varies and can include antenatal services, child and family health, youth health, community nursing, ongoing and complex care, sexual health, mental health, drug and alcohol, and allied health services including physiotherapy, occupational therapy, speech pathology, audiology, podiatry and nutrition.

There are also three satellite dialysis units located at Lakehaven Community Health Centre, Long Jetty Healthcare Centre and onsite at Gosford Hospital.

There are three oral health clinics located at Gosford, Wyong, and Woy Woy Hospitals.

In June 2022, system partners CCLHD, Hunter New England Central Coast Primary Health Network (PHN) and Ambulance NSW collectively undertook a codesign process to identify gaps and enablers to critically provide connected care for Elderly and Frail Patients across the continuum to prevent unnecessary ED presentations.

Four initiatives were developed in partnership, which aim to critically close the gaps in the Elderly and Frail health pathway. Initiatives build on and leverage existing models to achieve economies of scale, centralise access and risk stratification and foster meaningful partnerships across PHN, NSW Ambulance and LHD to ensure proactive management of Elderly and Frail patients. Initiatives leverage CCLHD's virtual care service offering to optimise use of scarce resources and ensure more care can be delivered in the community.

Implementation of these initiatives has measurable benefits for the safety, quality and experience of care for Elderly and Frail people living on the Central Coast.

# Safety and Quality Governance

A strong safety and quality governance structure is in place in the District to review key performance indicators, incidents and patient feedback, plus escalate issues as required. CCLHD is committed to strengthening the consumer and patient experience, the way staff partner with patients and acknowledging the powerful voice of our consumers.

## Health Care Quality Committee (HCQC)

The HCQC is our District Board subcommittee, responsible for ensuring strong clinical governance is maintained, and for monitoring the safety and quality of the health care services within our District. The HCQC reports to our District Board, any issues of concern related to the governance, safety or quality of the services we deliver.

## Clinical Safety, Quality and Governance Committee (CSQGC)

This committee oversees the operationalisation of the safety and quality systems within a clinical risk management framework. Key responsibilities include identification of clinical improvement and innovation opportunities and monitoring compliance with the requirements of the National Safety and Quality Health Service (NSQHS) Standards.

## Directorate Patient Safety & Quality Committees

These directorate and operational safety and quality committees are aligned to the National Standards and are overseen by the CSQGC. Key performance indicators and quality and safety priorities relevant to each directorate are presented and discussed with recommendations made for challenges experienced.

## Clinical Safety and Risk Committees (CSR)

The CSR Committees across the District are responsible for ensuring quality and safety clinical care is maintained, monitored, evaluated and improved, on behalf of the clinical areas they represent. The committees report to the Clinical Safety, Quality and Governance Committee.

## National Standards Committees (NSC)

These committees are aligned to the eight National Safety and Quality Health Standards to oversee the District's safety and quality systems and strategies for achieving the standards. They are overseen by the CSQGC.

## Board Consumer Community Committee (CCC)

The CCLHD Board Consumer Community Committee has undergone a review in 2022-23 which coincided with a review by the

Ministry of Health Rural and Regional health division into the role and function of Local Health Advisory Committees. The refreshed Committee will enhance and strengthen the District's operations and performance in relation to opportunities and strategies to partner with consumers, patients and the community in their health care.

## Safety and Quality Governance Structure

The following frameworks and plans are in place to direct safety and quality initiatives throughout the District.



# Safety and Quality Planning

## CCLHD Clinical Governance Framework (2020-2023)

The Clinical Governance Framework supports the delivery of safe, high quality health care services to the residents of, and visitors to, the Central Coast community. The framework is integrated with the Caring for the Coast strategy, the District's Culture Plan and the Consumer Participation Framework, as the system by which the governing body, managers, clinicians and staff share accountability for the quality of care provided, with a focus on minimising risks, continuously improving and fostering an environment of excellence in care for patients and our community. The framework outlines systems and processes to ensure that our patients and consumers receive high quality, safe patient care, through maintaining high standards of clinical performance, clinical risk management, monitoring and evaluation and ongoing professional development. This includes well-developed processes to take action to manage adverse events as well as improve patient and family experiences.



## Clinical Services Plan 2023-2028

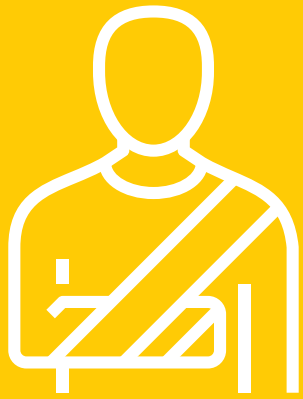
Finalisation of the District's Clinical Services Plan (CSP) 2023-2028 continues with the final Plan due in July 2023. The stages in developing the plan have included:

1. Review of the CCLHD Clinical Services Plan 2017-2022 and background
2. Service activity analysis – historic and projected
3. Confirmation of service directions and priorities
4. Finalising the Plan for delivery in July 2023



# Caring for our Patients

Exceptional patient experience and outcomes





The delivery of high quality and safe health care to our patients ensures successful patient outcomes and positive experiences for patients and staff. Listening to our patients and their carers to involve them in their health care and learning from the outcome of the care we provide ensures that our District continues to deliver high quality and safe health care that meets the needs of our consumers and carers.

Outlined below are some of the key achievements for 2022-2023.

## Our Path to Excellence

We want to ensure that we provide timely, safe, quality care for every patient, every time they come into contact with our services. We know that our community continues to grow and their healthcare needs have become more complex. Our challenge is to evolve what we currently do and find new and better ways to provide the care and support that our patients need so that we can become a place of excellence.

Our Path to Excellence, an organisational improvement and innovation capability framework program launched in March 2023, is an opportunity to reshape the way we work within and between teams, to remove some of the barriers to great patient care and to improve how we communicate, solve problems and tackle our daily challenges. It has been designed to support the spread and embedding of improvement capability activities into all facets of the organisation. The District is providing intensive support from specialist improvement partners to help teams develop consistent ways of working. This will also include developing tailored solutions to meet the specific needs of individual teams.

Our Path to Excellence is being delivered in cycles, with approximately 10 teams or units involved in each cycle which lasts for 12 weeks. The improvement partners will spend time getting to know each team and how they currently work. They will work alongside teams to develop consistent ways of working using a set of practical tools. It is expected that all clinical and non-clinical teams will have the opportunity to go through this process over the next 2 years.

During each cycle, participating units have opportunities to come together to share experiences and problem solve as well as leverage learnings from units that have already completed a cycle. Once teams have completed their cycle, they will be connected with other relevant teams to support one another to ensure consistent ways of working are sustained. Our team of improvement partners will also provide ongoing support.

Our focus is to improve how we: manage our services on a daily basis; collaborate and communicate within and between teams; problem solve; provide our people with the right management and leadership skills; and track and celebrate our success.

## Towards Zero Suicide

Suicide prevention is everyone's business. Across NSW the majority of people who die by suicide are in contact with broader health services and are unknown to mental health services. The Central Coast is consistent with this approach and we are working on improving psychological safety for patients and staff across all our services. Between January 2015 and December 2019, 52 % of people who died by suicide on the Central Coast had no contact with mental health services in the five years before death, consistent with the statewide average of 54%. Males and people aged 65 and over had the lowest rates of contact with community, hospital, and Emergency Department mental health services in the five years before death by suicide compared with other groups on the Central Coast.

The District has made the following progress in implementing the statewide Towards Zero Suicide Initiative in 2022-23:

- establishment of a range of governance, leadership and reporting structures to monitor progress, including regular reports to the Clinical Services Healthcare & Quality Committee (CSHCQC), District Toward Zero Steering Committee, Board Health Care and Quality Committee and the Community Suicide Prevention Alliance;
- completion of the refurbishment of the Gosford Safe Haven facility and planning of the Wyong Safe Haven underway; and
- recruitment of staff to the Gosford Safe Haven completed.



Including consumers in the design of services is evident through the Gosford Safe Haven which commenced in May 2023. The Safe Haven service is part of a state-wide program, offering a no-wrong-door approach to individuals experiencing suicidal crises. The service has been designed in collaboration with service users and care providers. The Safe Haven peer-led service is operated by individuals with lived experience of suicidal crisis and recovery. The service aims to create a supportive community where individuals can share their experiences, receive validation, and gain insight into their own experiences. Access to the Safe Haven is available to everyone, with no referral or engagement with other CCLHD services required. We offer support, assistance with safety planning, and referral or connections with other community services.

District priorities for the next 12 months include getting Wyong Safe Haven open, staffed and operational and supporting suicide prevention as "Everybody's Business", challenging the perception that suicide is solely a "mental health issue."



## Through thick and thin: A novel EMR solution for thickened fluids and non-compliant medications

Over the past two years, Pharmacy, Speech Pathology, Nutrition, Nursing and ICT have used a collaborative approach to solving the complex clinical problem of administration of medications in thin fluid form for patients with dysphagia who have been recommended thickened fluids. Two key changes have been implemented:

1. clinicians receive an EMR alert when there is a mis-match in compliance of liquid medications and thickened fluids; for example, a medical officer is alerted if they order liquid Panadol for a patient with dysphagia on extremely thick fluids; and
2. a guideline outlining alternative medication form or safe administration options when a patient with dysphagia on thickened fluids requires a liquid medication is hyperlinked in the eMR alerts.

In a six-month period, more than 2500 alerts were triggered (an average of 14 alerts per day) highlighting potential or actual risk for our vulnerable patients and providing support and resources to staff in changing practice. These resources were acknowledged as the first of its kind across Australia.



## Nutritional Model for Patients with Hip Fractures

People admitted to hospital with hip fractures (fractured neck of femur) are at high risk of malnutrition and require nutrition support to minimise the risk of postoperative complications and optimise recovery.

The Nutrition team developed and implemented a 14-day pathway for nutrition care of these patients, with the majority of the nutrition care and monitoring undertaken by dietitian assistants completing allocated tasks on certain days. The assistants monitor intake and supplement preferences in consultation with the patient and refer to the dietitian if patients are identified “at risk”.

This pathway was piloted at Gosford Hospital and will be rolled out at Wyong Hospital later in 2023.

## Where is Your Birthplace?

The Women Children and Families Directorate is implementing the “Where is Your Birthplace?” project in collaboration with the Agency for Clinical Innovation, with the goal of providing alternative, publicly funded birthplace options for women assessed to be at low risk of complications.

A convenience sample of 130 pregnant women or women who had given birth in the past twelve months were invited to complete a survey examining their preferences for birthing options across the District. This sample provided a wide cross section representative of women accessing numerous models of care across both the public and private sector and supported widely representative consumer engagement. This survey demonstrated that 48% of women were dissatisfied with the only currently available, publicly funded birthplace option (Gosford Hospital); and 13.8% of women indicated a preference for publicly funded homebirth.

The Project Team, Sponsors and Steering Committee determined that implementing a publicly funded homebirth model of care was feasible and, along with the Homebirth Working Party, are now in the implementation phase. The homebirth service will be an additional model of care offered by the Central Coast Midwifery Group Practice (CCMGP). As part of the implementation of the project, CCMGP midwives who opt to be providers of the new model of care will be credentialed.

## Safe and Timely Access to Care

The District’s performance against access metrics including transfer of care, admitted emergency treatment performance and triage on time are continuing to improve, but remain underperforming. Detailed action plans are in place at each acute hospital site and for initiatives at a district level. Oversight and governance of progress against these plans and monitoring of performance occurs through local, and district committees and through the District’s Organisational Performance Framework.

Ongoing improvement is a dynamic process with completed initiatives transferring into business as usual with regular monitoring and new initiatives developed and implemented in response to emerging opportunities. For example, the completion of an Emergency Department (ED) Peer Review Assessment has stimulated development of further actions plans for change within the ED. Key to success is the multifaceted approach across the spectrum of care delivery including collaboration and partnerships between inpatient and community services and with other service providers including NSW Ambulance, the private hospitals and primary care providers.

# Improving the Patient Experience



In 2022-2023 the Consumer and Community Advisory Committee underwent an extensive review of its Terms of Reference and agenda with the following aims: first, to increase consumer participation and second, to strengthen the community voice to the Board regarding consumer and carer experience of health care within our services. The Committee has now been renamed the Consumer Community Committee and is chaired by a member of the Board. A Consumer Engagement Strategy is being developed to broaden consumer engagement across community groups to ensure our services are developed and improved utilising the feedback of people with lived experiences.

The Consumer and Carer Engagement Team within the Clinical Safety, Quality and Governance Directorate is responsible for liaising with consumers and carers to receive feedback on the services we deliver. The Team also supports our staff to implement Patient Reported Experience Measures (PREMS) to ensure that the services we deliver are continuously enhanced in response to consumer feedback.

Throughout 2022–2023 the Consumer and Carer Engagement Team has supported the District through the following activities:

- promoted the NSW Ministry of Health initiative, Elevating the Human Experience Guide to Action, as well as strong local staff and consumer participation in Ministry of Health enabler working groups;
- coordinated and supported the Board Consumer Community Committee;
- partnered with the Agency for Clinical Innovation (ACI) to continue implementing Patient Reported Measures within the Leading Better Value Care Program;
- continued to support and implement Patient Reported Experience Measures (PREMS) in the inpatient units across the District;
- used patient feedback data from a range of sources (the Bureau of Health Information, Ministry of Health and consumers via surveys, patient comment cards, how was your experience brochures, patient-reported measures, and consumer feedback) to inform quality improvement initiatives and improve patient experiences and outcomes;
- reviewed current consumer feedback reporting capability and developed user-friendly reports for all key stakeholders;
- provided education on use of the Consumer Feedback Dashboard and monthly targeted feedback data to clinical teams;
- partnered with staff and the community to promote the identification, acknowledgement and support of carers;
- provided support to carers and referral to appropriate services; and
- provided district-wide consumer feedback training for staff.

We have partnered with our consumers to gain their feedback in health care decision making and the co-design of services including:

- the Wyong hospital redevelopment and stage three refurbishment of key areas including the new Carers Retreat, Wyong Cancer Day Unit and outpatient Maternity Services;
- involvement of consumers on Quality and Safety committees, clinical redesign and other quality improvement initiatives, recruitment panels and workforce education; and
- coordinating recruitment of an expanded consumer network with improved engagement and governance.

A key focus for 2022–2023 was expanding ways to provide our consumers and carers with opportunities to provide feedback on their experience within our services. This has been achieved through providing improved options for our consumers to provide point of care feedback including complaints, compliments and suggestions. The feedback provided allows the Consumer and Carer Engagement team to identify trends, determine areas within our District that would benefit from learning from patient experience, improve the safety and quality of the services we deliver and reduce the number of complaints received. In addition, consumer feedback is shared in our District staff newsletter, CCLHD Facebook page, at Safety and Quality Meetings, at the Health Care Quality Committee and at Board meetings.

In 2022-2023 our Consumer Experience Consultant team:

- continued to co-ordinate and document open disclosure and resolution meetings with consumers. Actions identified from these meetings were shared with key clinicians and tracked to completion. Feedback was provided to consumers and the Health Care Complaints Commission to identify how the District has made changes to prevent future harm;
- continued the Dedicated Family Contact role to provide support and continuity for patients and families through the Serious Adverse Event Review (SAER) process. The patient/family experience is a key aspect of our District's incident investigation framework as part of our commitment to improving the safety and quality of the services we deliver;
- continued using patient stories as a result of adverse events and complaints as part of staff education;
- expanded use of patient stories highlighting innovative practice developed by clinical teams to improve not only clinical outcomes but the overall patient experience;

- actively encouraged the use of the consumer feedback dashboard which tracks numbers and themes of complaints per ward/service to enable managers and executives to identify trends and improvement opportunities. Education has been provided to services to increase the utilisation of the dashboard;
- provided ongoing support to the District for ims+, the online platform for reporting incidents and near misses; and
- shared compliments to recognise staff and teams who have provided a valued patient experience.

## Complaints

The District has consistently met the target for complaints acknowledged within 5 calendar days during 2022-2023, with 99% of complaints acknowledged within 5 days. In addition, the District was consistently above the target of 80% of complaints closed within 35 calendar days for every month during 2022-2023.

Complaint numbers have been stable for the period of 2022-2023 compared to the previous year. Key complaint themes experienced were: coordination of patient care, service availability/delays, inadequate examination/treatment and communication between consumers and clinicians.

## Key priorities for 2022-2023

Key priorities for the District in 2023-2024 in relation to consumer feedback and experience will be:

- continue providing education to staff on addressing complaints at the point of care;
- further expand the use of point of care consumer and carer feedback using a variety of modalities to increase opportunities to improve services based on consumer experience;
- provide safe high-quality care that consumers value and engage with, measured by complaint and compliments data and overall consumer feedback; and
- expand the “Our Path to Excellence” program to support and facilitate improvements in the patient experience while accessing care and services.

# Partnering with Patients, Consumers and Carers

## Carer Recognition and Engagement

A carer is an individual who provides care and support to a family member or friend who lives with a disability, mental illness, medical condition (including terminal or chronic illness) or who is frail and aged. The CCLHD Carer Support Unit (CSU) aims to improve the responsiveness of the District to the needs of carers, and foster engagement with carers as essential partners in health care (NSW Carers Recognition Act 2010 and NSW Carers Strategy).

During the period between July 2022 and June 2023, the CSU has:

- provided 1019 carer consultations, which resulted in 1528 occasions of service;
- partnered with the Trustee and Guardian, Services Australia and Carer Gateway to facilitate a Planning Ahead workshop for local carers at Mingara on 18 October 2022, Woy Woy on 5 December 2022 and The Entrance on 29 June 2023. These workshops focused on Enduring Power of Attorney and Guardianship, Wills, Advance Care Planning and Directives, as well as emotional, practical and financial supports for carers;
- Planning Ahead workshops were also held for CCLHD staff on 22 March and 25 May, with the aim of assisting those staff who are also carers, and giving staff knowledge and confidence to promote planning ahead tools to patients and carers;
- partnered with “Quest for Life” to facilitate a self-care workshop for carers at Central Coast Leagues Club on 17 March 2023. Thirty carers attended the full day workshop and the feedback was excellent;
- partnered with Dr Anna Schutz, Neurologist and Neurophysiologist and the Motor Neurone Disease Multi-Disciplinary Research Team to offer individual face to face carer support to carers attending the MND Clinic at Erina;
- partnered with Social Futures to host monthly face to face consultations with carers at the Carer Lounge, Gosford Hospital. This face-to-face opportunity assist carers to understand the National Disability Insurance Scheme, eligibility criteria, medical evidence required, application and appeals process; and
- partnered with some very generous local women and three dedicated CSU volunteers who contribute to the creation of beautiful sensory blankets (also known as fiddle blankets) for people living with dementia. These sensory blankets have been shown to reduce the stress, agitation and restlessness sometimes experienced by people living with dementia. In the past twelve months the CSU has donated 185 sensory blankets to CCLHD patients.



*“We have found the blankets are a welcome distraction. They preoccupy the patient and in turn they leave their drips and drains alone. This enables their treatment to continue which is vital for their recovery.”*



## Pets are Family Too photographic exhibition and launch

The CSU and the CCLHD Public Health Unit are leading the “Pets are Family Too” Research project to increase the opportunity for inpatients to have safe and equitable visits from their own pets and to improve the experiences of patients, carers, staff and pets. The CSU was particularly keen to be involved in this research as it provides opportunities for staff to identify, acknowledge, support and partner with carers. It was also an opportunity for carers to be able to do something joyful for the person they care for while they are in hospital. A Translational Research Grant application to support extension of the research has been submitted.

To increase awareness of this research, the CSU partnered with Central Coast Art Gallery to engage professional photographer, Hilda Bezuidenhout to take photos of patients, carers and staff with patient’s own pets. These photos were exhibited at Gosford Hospital.

*“I just visited the ‘Pets are Family Too’ exhibition and was very impressed, the photos are lovely and the stories about the patient’s journeys are truly heart-warming. What an excellent initiative that has created many happy and beneficial patient outcomes.”*



## Human Experience Week Exhibition

The CSU also coordinated the Human Experience Week exhibition at Gosford Hospital, showcasing “Story Cloths” created by CCLHD staff and photographs taken by Photographer Hilda Bezuidenhout.

# Volunteer Services

The Volunteer Service has resumed with no restrictions however, with COVID-19 cases in the community, together with the vulnerability of many of our volunteers, we continued to see a phased return of volunteers and some resignations. Despite this, we have seen a significant increase in volunteer contributions compared to the two previous years. From 1 July 2022 to 30 June 2023, over 18,500 hours were completed by 142 active volunteers. Volunteer recruitment continued with intakes in February and June 2023, welcoming 22 new volunteers to the team.

Volunteer support continued to evolve throughout the year, with increased requests for support for one-off tasks such as assisting with events. New volunteer roles have also been developed and implemented across the District. New support roles commenced in the Wyong Hospital Emergency Department, Miri Miri Inpatient Unit, the Mental Health Op Shops at Gosford and Wyong, K9 Inpatient Unit at Gosford, Health Information Services and Research Office. Community volunteering program opportunities have continued, with 32 hours completed by Duke of Edinburgh students and 24 hours by Bachelor of Paramedicine students.

On September 29, 2022, the CCLHD Volunteers won the Centre for Volunteering – Central Coast Region - Team of the Year Award. We then represented the District and region at the Centre for Volunteering State Awards on December 10. While we didn't take home the win on that occasion, we were humbled to be able to represent the District and stand alongside so many other worthwhile volunteering teams.

On November 28, 2022, we celebrated the completion of the Volunteer Taster Program. Twenty-nine nursing and medical students engaged in the program, completing over 500 hours of volunteering. The research has found that the students achieved a significant increase in empathy. A subgroup analysis of the student cohorts suggests that medical students had a more substantial jump in empathy after the volunteering intervention. It was also found that the program benefited the students as they gained new perspectives on the patient experience, improved confidence in their patient communication, developed a quality-focused mindset considering patient safety issues and gained a stronger sense of their professional identity. We presented the Taster Program at the NSW Health Elevating the Human Experience Program on May 4, 2023.





# Compliments

## **Just wanted to pass on my thanks and appreciation to the team at Wyong ED.**

*My fiancé came to ED after a head knock and unconsciousness the night before and I was so happy to see the team take care of him how they did. He was seen quickly, CTB done and cleared all the while the whole team was lovely. Triage nurse and nurse overseeing his care once he received a bed were so pleasant, doctors all lovely and helpful and was a good experience all around for a worrying moment*

*.... Please pass on my thanks and keep up the great work in spite of resourcing challenges I'm sure you're facing!*

## **Wyong and Gosford Paediatric ED**

*Our short stay in emergency at both Wyong and Gosford hospital paediatric ED were extremely high quality. The nurses and doctors were so thorough and so personable and caring, this hard time was made easier by the staff. Forever grateful.*

## **Coordinated, compassionate care**

*I wish to acknowledge the excellent care my husband and I received in Triage. My husband was unwell and he was triaged brilliantly, saw a resident immediately, CT done, bloods done and admitted. By 7 pm the evening after staff had spoken to his Neuro Surgery Team at RNS he was transferred. Six days with them to diagnose and begin treatment then he was back here to Wyong where he continues to receive outstanding care. All the staff including ancillary have been so willing to listening and actioning the right road forward for my husband and myself.*

## **Our Nursing staff**

*I can't think of anything that could improve the already excellent nurses and staff. The nurses are compassionate, caring, knowledgeable and funny. They smile all day no matter how hard or long they work. I am not good at writing these things, but without the nurses I have had, it would have been a lot harder for me to cope.*

## **Gosford Emergency Department**

*The Consumer Feedback Department recently received a call from the daughter of a patient who presented to Gosford ED and was subsequently admitted to K6. The patient's family was extremely complimentary of the care that their mother received "from the moment of arrival to the ED". ...The triage nurse came straight out, and they wheeled her straight through. The young ED doctor was beautiful with her and made sure he got all of the information from the previous hospital where she had surgery, even though (patient's daughter) thinks he needed to stay back to do this. All the staff who cared for her in ED were extremely kind and caring and looked after her so well. (Patient) was then admitted to K6 where she had several rapid responses and all the staff from ward nurses to the rapid response team and cardiac doctor who came to assist were fantastic. ...(Patient's daughter) credits the wonderful treatment of all staff involved in (Patient's) care as the reason she is still with them today and wishes to pass on her sincere thanks to all.*



**To all the staff at the Diabetes Centre**

*[The diagnosis] was certainly a shock & challenge for us, however the care we received from admission in the ED to children's ward we knew we were in safe hands. As parents we had to be told 3 times, yes your son has type 1 diabetes. When we met the staff from your service, we were treated with such kindness and quality care was received. We appreciate your time & patience.*

**Wyong Hospital Emergency Department**

*I want to pass on my compliments for the Concierge at Wyong hospital ED ..... She was genuinely caring and empathetic. A beautiful soul and credit to the health care industry.*

**Dear staff at Gosford hospital in Ward K1**

*On behalf of my family, I would like to convey my sincere thanks for the care, concern and kindness you showed to my husband who passed away in the ward at 6am on Sunday 20 November. Thank you so much to the skilled doctors and nurses who made sure that in his final hours he was comfortable and peaceful and not in any pain or agitation. Thank you also for the respect and kindness that you showed him and us, in patiently explaining the situation and allowing us to share those final precious hours with him. He passed away with peace and dignity and we are so grateful that he was under your care.*

*Thank you so much!*

**Thank  
you**

# Caring for our Community

A healthy, engaged and empowered community



# Caring for our Community Plan 2021-2031

The District launched its Caring for our Community Plan 2021-2031 in 2021. The plan identifies the following four key areas as the focus for actions to improve the health and wellbeing of the Central Coast community over the next ten years:

- our community, patients, families and carers;
- our services;
- our staff; and
- our facilities.

Outcomes to 2031 are articulated for each focus area along with the actions that the District will take towards these. Five key enablers support these focus areas and are essential in achieving the vision outlined in the Plan: governance and leadership; safety, quality and continuous improvement; partnerships, collaboration and integration; innovation and technology; and research.

## Hospital in The Home (HiTH)

Hospital in The Home is a new model of care which allows suitable patients to receive high quality, acute care from the comfort of their own home, while freeing up hospital beds for others. Patients are admitted into a virtual ward by a doctor and receive daily clinical care and support in their home.

Stephen of Kariong was facing a lengthy stay in hospital for treatment for an acute infection and said it was a big relief to be able to receive that treatment at home. "I was anxious about being in hospital for a long time because I had no one to care for my dogs," Stephen said. "Before I knew about Hospital in The Home, I seriously considered asking the surgeon to amputate my finger so I could get home to look after them. I'm so grateful for the care I have been able to receive at home."



## Hospital in The Home – Rapid Assessment to Care and Evaluation (RACE)

HiTH-RACE is a home-based service with a multidisciplinary team of allied health professionals supported by the Central Coast Health at Home medical team. Their mission is to enhance health outcomes for older individuals by reducing hospital stays, preventing admissions, improving communication among care providers, and empowering patients and caregivers. Despite incomplete recruitment, the team exceeded their admissions key performance indicator within just two months. They have reduced the overall length of stay for eligible patients by 2.93 days over a two-month average, enabling patients to be discharged earlier from the hospital. The RACE service has admitted 112 patients since mid-January 2023, with 33 patients admitted during May 2023 and 37 patients admitted in June 2023.

The RACE Medical Lead commenced the end of May 2023 and has improved the clinical workflows, reducing the time taken to transfer patients from Emergency Department. RACE has also been developing the non-admitted activity to reduce length of stay for hospital patients and provide alternate pathways by receiving referrals for patients from Paramedics, General Practitioners and Central Coast Health@Home service who are at risk of clinical deterioration and presenting to ED. Patient feedback through Patient Reported Experience Measures reflects a high level of positive experiences. HiTH-RACE's notable qualities encompass their integrated and coordinated care approach, responsiveness to demand, and successfully delivering safe rapid post-acute care.

## Hyperemesis Gravidarum Hospital in The Home (HiTH)

The Hospital in The Home model of care is now also being made available to women with hyperemesis gravidarum (HG), a severe form of nausea and vomiting experienced in pregnancy. HG can cause dehydration and weight loss which, in the past, has required admission into hospital. The HG Hospital in the Home service provides a virtual ward in which patients can receive daily clinical care and support at home.

## Healthy Jarums

The Healthy Jarums initiative was developed under a partnership between Aboriginal Health, Allied Health, the Aboriginal Education Consultative Group, Bungree Aboriginal Association, Ngilyang, CCLHD Health Promotion and the Epicentre at San Remo. The project aims to screen Aboriginal children starting kindergarten for early stage health issues. Disciplines involved in the screening are audiology, physiotherapy, speech pathology, occupational therapy, social work and nutrition. The screening program aims to ensure children are referred into treatment for early intervention.



## Aged Care Assessment Services

There has been an ongoing focus to streamline access to the District's Aged Care Assessment Services. These services provide comprehensive clinical and non-clinical home support assessments as part of Aged Care Assessment Program (ACAP), Regional Assessment Service (RAS) and Australian National Age Care Classification (AN-ACC). The intake model for these services is being streamlined in preparation for changes as part of the Commonwealth Department of Health and Aged Care new Single Aged Care Assessment Service. This has included a review of intake processes; alignment of position descriptions, grading and reporting lines; and staff training and call scripts. The service will continue to streamline referral processes and create service efficiencies.

### “Many Hands” (Gawal Matjorr)

The Many Hands project was a year-long, extensive collaboration between CCLHD Staff, local government, local stakeholders, federal and state funding bodies, headspace National, an Aboriginal Elder, Aboriginal staff, and young people. This diverse group worked together to design and build an Aboriginal therapeutic cultural and outdoor therapy garden at headspace Lake Haven. The Aboriginal Cultural Garden, which has been named Gawal Matjorr (Many Hands) is an enriching natural environment that encompasses Aboriginal storytelling/art, Aboriginal edible garden, a large yarning circle, individual therapy circles, a walk and talk track, a water garden, native trees and is filled with Aboriginal song lines and natural spaces to improve and enhance the social and emotional wellbeing of all young people who enter the space.





## Integrated Care

Working closely with Hunter New England Central Coast Primary Health Network (HNECCPHN) under the Central Coast Health Alliance, a formal partnership seeks to leverage shared priorities across health and to implement collaborative healthcare solutions where a coordinated approach will provide better access, quality, and experience for Central Coast residents. In a co-design process with local stakeholders across hospital and primary care sectors, we will be embarking on a new model of care for chronic pain management that seeks to improve the accessibility and affordability of accessing care for people living with chronic pain on the Central Coast.

The GP Collaborative Panel is a long-standing partnership with local GPs and the HNECCPHN. The Panel fosters effective partnerships between hospitals, general practices, and the PHN to deliver comprehensive, person-centred, and coordinated care. The Panel identifies priorities aligned with the needs of GPs and the community, ensuring targeted improvements, and enhancing the healthcare system for better health outcomes and experiences on the Central Coast.

At CCLHD, our integrated care approach also focuses on delivering comprehensive and effective care that caters to the diverse health needs of our community. To achieve this, we have embraced two state-wide Ministry of Health Initiatives: Planned Care for Better Health, in place since 2021, and ED to Community, launched in January 2023. These initiatives aim to establish seamless connections between patients and suitable community services, leveraging digital healthcare tools to enhance communication and improve overall health outcomes and experiences.

Planned Care for Better Health continued in 2022-23. Individuals who have been discharged from acute settings with complex or chronic health needs are proactively identified, engaged in development of their personalised care plan, and aided by our Care Coordination and Care Navigation services to seamlessly connect with suitable community-based and primary health services. The Central Coast Health@Home service has focused on providing pathways for Ambulances as part of a virtual triage initiative. The strategy is a nurse led integrated model of care that provides triage, consultancy, clinical support and advice for GPs, NSW Ambulance, home care providers and Residential Aged Care Facility (RACF) staff. The Emergency Department to Community (EDC) Pathway was established in February 2023. The EDC pathway provides an intensive case management approach for people who present to an Emergency Department 10 times or more in a twelve-month period. The model aims to provide more coordinated care and complements existing services as part of the broader Out of Hospital Care initiatives. Over 30 patients have participated in the EDC pathways in the first 6 months of the program.

We are proud of the collaboration between our Integrated Chronic Care and Aboriginal Chronic Care teams. By working together we seek to improve care delivery to First Nations people, enhance collaboration between Nunyara Aboriginal Health and Chronic, Complex, and Community Services, and increase the engagement of First Nations individuals with community-based health care providers.

# Caring for our Staff

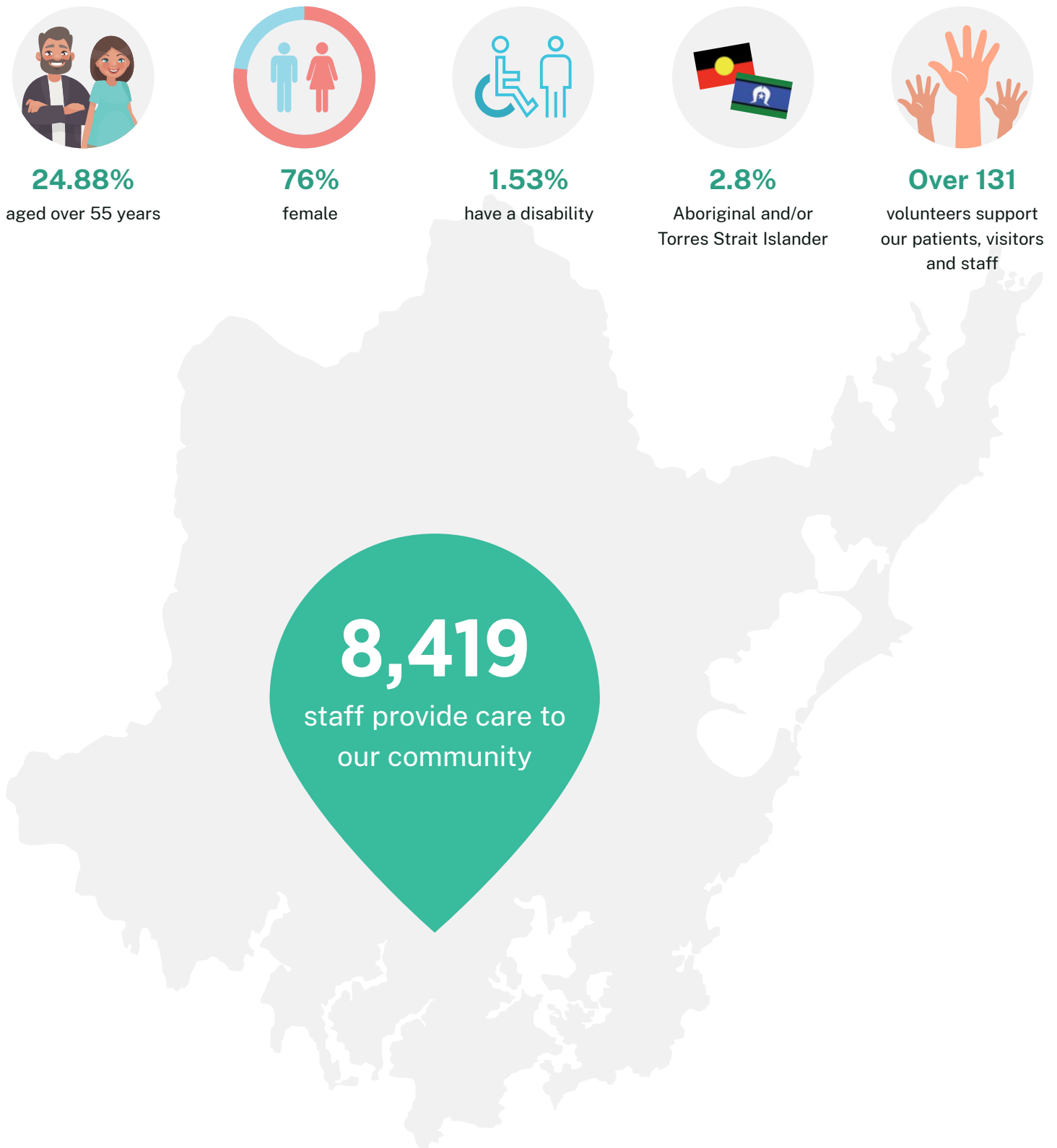
A valued, respected, engaged and high performing workforce



# Staffing Profile

Our District is the largest employer in the region, currently employing 8,722 staff to provide care to the Central Coast community. Staffing includes a mixture of clinical, support, administrative and maintenance staff. Our District workforce is 76% female and 24% of our staff are aged over 55 years. We are a leading employer of choice for Aboriginal people on the Central Coast and proudly employ approximately 3% of the total workforce that identify as Aboriginal or Torres Strait Islander people. Our District currently employs 1.5% of staff who identify as having a disability and is supported by 129 volunteers across our District.

## Our workforce



# Workforce Strategy

Work on the five-year workforce strategy continues with the current focus on

- talent attraction;
- leadership development;
- building workforce capacity;
- staff engagement and development; and
- keeping staff well and in the workplace.

This 2018-2023 strategy aligns with the District's strategic and operational priorities. Workforce is also a key consideration in the development of the next iteration of the District's Clinical Services Plan.

The District is also continuing to develop the Aboriginal Workforce Plan for 2023-2026. This is a key workforce initiative, given the importance of improving Aboriginal recruitment and retention practices and professional development pathways for Aboriginal employees. A consultant has been engaged to develop the CCLHD Aboriginal Workforce Plan which will be included as a pillar of the District's Aboriginal Health Plan. It is estimated the plan will be finalised late 2023 and will also align with the NSW Health Good Health Great Jobs Aboriginal Workforce Strategic Framework.

Currently, CCLHD supports approximately 30 trainees and cadets (school-aged to Master's degree students) who are completing their studies across nursing, midwifery, mental health, allied health and population health.

## Mental Health Pathways in Practice (MHPiP)

Mental Health Pathways in Practice (MHPiP) aims to enhance mental health clinical practice and improve consumer health outcomes. It also builds the core capabilities of mental health nurses and allied health staff working in mental health services through knowledge acquisition and workplace activities in clinical practice.

Mental Health Pathways in Practice is a key strategy for the District to support individual clinician's professional growth. In 2022, MHPiP was introduced for the first time to all midyear new graduates within mental health. An evaluation was completed to assess their pre and post learning. The results showed that there was an increase in staff interested in a career in mental health for 85 per cent of new graduate staff. We now have a number of MHPiP facilitators across the District.

*"Facilitating New Grads using the MHPiP gives a good structure of introducing Mental Health Nursing to novice nurses.*

*It provides space for facilitators in determining New Grads' understanding of the role and scope of Mental Health Clinicians. It provides a great resource that is current, and evidence based that can be easy to follow. We utilised MHPiP in discussion as a group to reflect current experiences related to the topic". (Facilitator and CNE, Wyong Hospital)*

## Recruitment Streamlined

Over the 2022-2023 year, the District's average recruitment episode time to completion has decreased from 86 business days in August 2022 to an average of 32.4 at June 2023. This has been due to strong leadership, team building and review of processes in the Recruitment Unit. As a result, the Unit has been able to streamline recruitment processes, provide improved customer service, implement and run education sessions and communicate clear consistent messaging across the CCLHD. The Recruitment team has been nominated as Team of the Year in the 2022-2023 Caring for the Coast Awards.



# Nursing Unit Manager ↘



# Caring for the Coast Awards 2022

The aim of the Caring for the Coast Awards is to recognise and reward our staff and volunteers for their outstanding contribution and achievements in improving the quality and safety of the health care we deliver to the Central Coast community.

The winners of the 2022 Caring for the Coast Awards were announced at a gala dinner held at The Entertainment Grounds in Gosford on 16 November 2022. The winners of each category in the 2021 Awards were:

## Team of the Year

### COVID Vaccination Program Team

New and existing staff came together in response to the COVID-19 pandemic, to form a phenomenal team coordinating our local vaccination program. Despite facing constant changes and challenges throughout the year, the team has vaccinated 149,000 people, including all CCLHD staff, local emergency services, aged and disability services, along with outreach clinics to vulnerable people in group homes, community centres, members of the local Aboriginal community, and the general public. The team worked hard, and created a close knit, supportive environment to keep staff morale high. Fostering this welcoming, respectful and collaborative atmosphere helped them to deliver an excellent service and keep our community safe with the successful roll-out of the vaccination program.

## Staff Member of the Year

### Kami Dibden, Volunteer Services Manager

Kami was also a finalist at the 24th Annual NSW Health Awards 2022

Kami has been instrumental in strengthening and supporting our volunteer services across CCLHD. Among her colleagues and volunteers she is highly respected and trusted. She has implemented a number of new improvement initiatives including setting up a digital sign-in system for the volunteers and developing specific volunteering roles with standard operating procedures. Kami is an effective communicator and collaborator. She kept the volunteering team engaged and connected throughout COVID-19 with the introduction of the “help from home” program. Our volunteers all say they enjoy coming to work because of Kami’s joy and positivity.

## People and Culture Award

### William McClean, Team Leader, ACAT

William McClean is a team leader for the Aged Care Assessment Services. William is a natural leader, who motivates and inspires other staff and helps to set and maintain the bar for positive workplace culture. He has an engaging manner and is collaborative and patient-centred when dealing with any challenges. Ensuring older people receive dignity and respect in all aspects of their care is one of William’s passions. He maintains a clinical load, no matter how busy he gets in his leadership role, to help him better understand the pressures and challenges of the service. William has been involved in a host of key projects that support service performance, client wellbeing, staff morale and contribute to positive organisational culture.

## Volunteer of the Year

### Judy Rumsey

From Wig Wam to Staff Health, patient-facing and behind the scenes, Judy is here to help with a commitment that is second-to-none. There is never a time when Judy has said no to a request and if she misses a volunteering day due to illness or a holiday, she works another day. The COVID stand-down didn’t stop her either. As soon as the call for help went out, Judy replied and was more than happy to drive in, collect the work, take it home, and get it done. Not only is Judy committed to her work for the District, but she has also created and led a support network with other volunteers, past and present.

## Excellence in Patient Experience and Safety

### Subcutaneous Immunoglobulin (SCIg) Home-based Therapy Program – Community Pharmacy Collaboration

This project team were also finalists in the 24th Annual NSW Health Awards 2022

Immunoglobulin is a plasma-derived blood product used in the treatment of a range of autoimmune conditions. Patients usually receive intravenous infusions in hospital every month and for many, this is a life-long requirement. Subcutaneous Immunoglobulin (SCIg) provides an alternative to intravenous infusions and offers patients convenience and autonomy, avoiding the constraints of hospital schedules. Until recently SCIg was only made available to patients willing to travel outside of CCLHD. A local SCIg program has now been established and is available to all eligible patients. Those who have transitioned to SCIg have all reported improvements to their quality of life and health outcomes. To ensure sustainability of the SCIg program, an integrated care approach involving community pharmacies has been established to enable dispensing of immunoglobulin in locations accessible to patients. This collaboration has reduced the burden on hospital pharmacies and allowed for program expansion.

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## Keeping our People Healthy Award

### Heal-Thy-Self (CoastCanCare/ Carer Support Unit)

The Heal-Thy-Self collaboration between the Carer Support Unit (CSU) and CoastCanCare focuses on evidence based holistic wellness programs and information bulletins for Central Coast locals affected by cancer. Adults living with cancer and their carers can take part in free classes including art therapy, yoga and journaling to help them look beyond the cancer diagnosis and enjoy life. This collaboration has resulted in a substantial increase in CSU carer consultations. Today cancer is one of the main reasons carers connect with the CSU. This holistic approach and access to a diverse range of free therapies and information is “keeping locals healthy”.

## Excellence in Research and Innovation

### SLAM-B: Self-administration of Bortezomib for Patients with Myeloma: A Pilot Study

The SLAM-B project pilots a new model of care for eligible myeloma patients using self-administration of Bortezomib chemotherapy in the home setting. The model of care will potentially improve quality of life by reducing hospital visits, reducing infection risk and giving back a degree of control for a patient group with incurable cancer. Following a period of training, patients/ carers complete a competency tool prior to sign-off as eligible for the home program. Day one of each treatment cycle is delivered in the Cancer Day Unit; subsequent injections for the cycle are self/carer-administered at home. Prior to each self-administered injection in the home, a telehealth ‘myeloma pre-chemotherapy’ assessment is undertaken. The multidisciplinary team have worked together to achieve the shared goal of developing an evidence-based model of care that improves service delivery and patient care.

## Excellence in Aboriginal Healthcare

### Healthy Jarjums (Nunyara/Allied Health)

Healthy Jarjums was a health promotion project run for Aboriginal and Torres Strait Islander families targeting children starting Kindergarten in 2022. The project aimed to provide health information to Aboriginal and Torres Strait Islander families, with screening and referral for children, as appropriate, to community services in speech pathology, dental, audiology, nutrition, physiotherapy and occupational therapy. The event aimed to provide this health information in a culturally sensitive and inclusive environment while gauging child development against the five key domains of motor skill development, emotional health, social knowledge, language skills and general knowledge and providing support to Aboriginal and Torres Strait Islander families to meet these domains.

**The District was fortunate to have Central Real, The University of Newcastle and SalaryPackagingPLUS as our sponsors for the 2022 Awards; their ongoing support is greatly appreciated. The finalists for the 2023 Caring for the Coast Awards have been decided, and the announcement of the winner in each category will take place later in 2023.**



# Caring for the Coast Awards 2023

The finalists for each category in the 2023 Awards are listed below, in no particular order.

## Team of the Year

### Nursing and Midwifery Directorate

The Nursing and Midwifery Directorate consists of Nursing and Midwife leaders who work across CCLHD providing leadership and expertise in Nursing and Midwifery Workforce development, Research, Education and Clinical Practice Improvement. A standout achievement this year was the creation of the innovative 'O Week' event which saw 138 new graduate registered nurses orientated and provided with key education and learnings prior to commencing in the clinical areas.

### Nutrition services

The Nutrition team is cohesive, caring and supportive. They go above and beyond to look after their patients and each other. The team has sought out additional ways to support each other and recognise successes, and rallied during times of stress and short staffing to maintain an excellent service to our patients.

### Recruitment services

With solid leadership, The Recruitment Unit has been able to streamline recruitment processes, solidify solid and trustworthy customer service, implement and run education sessions and communicate clear consistent messaging across the CCLHD.

The District has decreased the average recruitment episode from 86 business days in August 2022 to an average of 32.4.

## Staff Member of the Year

### Catherine Palmer – Clinical Midwife Educator

Cath is a Clinical Midwifery Educator, holding the postnatal care portfolio. She is legendary for her wealth of knowledge in the care of the postnatal woman and newborn infant, specialising in lactation. Within her role as CME, she supports numerous staff and students. Additionally, Cath facilitates Perinatal Safety Education days monthly, SCORPIO breastfeeding workshops three times a year, as well as assisting the CMC for Lactation and Infant Feeding in facilitating an Advanced Lactation Skills day annually. Cath is a dynamic team member who works collaboratively to provide innovative and interactive education to all members of Maternity Services.

### Jessica Mulcahy – Recruitment Manager, Workforce

Jessica Mulcahy is the Recruitment Manager for the CCLHD. Her team describes her as inspirational in how she has used her 25 years' experience in recruitment to turn around long standing recruitment processes to achieve significant improvements in recruitment times, customer service and team morale. This has been achieved by redirecting the focus to the candidate experience and helping hiring managers understand their responsibilities in the process.

### Leanne Andrew – Project Officer, Health Promotion

Leanne is a qualified registered nurse who has dedicated her career to health promotion and disease prevention, acknowledging the power of enabling communities to prioritise the wellbeing of individuals, families and neighbours. Leanne is passionate about connecting and empowering people and one of her notable qualities is the respectful relationships Leanne achieves with all those she collaborates with. Leanne goes above and beyond her role, for example, she volunteers during her weekend to clean graffiti in the San Remo area. Most recently Leanne led a large-scale community project, Activate Your Space (AYS), in the Blue Haven and San Remo area, an identified area of high-level disadvantage and health inequities. Her ability to engage local people resulted in this project's ongoing success for these communities.

## Volunteer of the Year

### Gail McKenna

Gail celebrates her 10 year volunteering anniversary this year and will tell you she is looking forward to another 10+ years more. Gail received Cancer Treatment through CCLHD and tells of the wonderful care and treatment she received. Being a cancer patient gave Gail an insight into what patient's experience and she knew firsthand what an impact the staff and volunteers could have, and she wanted to do that for others. Gail tells us she loves her role just as much if not more than when she started. Feeling more connected to the District now, she has increased her volunteering commitment to 2 days per week, also volunteering in the Cancer Day unit and is the first one to put her hand up to help when Kami sends a 'can you help SOS message.'

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### Noeline Darcy

After moving from Fiji to Australia, her husband finally convinced her to move to the Central Coast by telling her, 'The village and community will need you'. Sadly, Noelene's husband passed away before they could arrange the move, but Noeline was determined to bravely make the move by herself. Noeline didn't waste any time connecting with her new community by taking on a variety of volunteering roles, and within a few weeks she was volunteering at Wyong Hospital. Fast forward to 2023 and an incredible 20 years later, and she still loves every minute of her volunteering role. Volunteering has created a new community for Noeline where she feels valued and part of the team.

### Sue Newham

Sue Newham has been a volunteer for the past 8 years every Wednesday in the inpatient Oncology Haematology ward K8. During Sue's time with K8 she has been actively engaged in the care we provide to our cancer patients, always wanting to improve their experience. Sue demonstrates the CORE values and behaviours and role models the friendly, positive approach to the volunteer role that is required. Sue is a valued member of the K8 team.

### Excellence in Patient Experience and Safety Improving Paediatric Pathways to Care

The Wyong Paediatric Unit (WPU) Outpatient Clinic receives referrals from General Practitioners, but the length of time children were waiting to see a Paediatrician was a concern. A preliminary review of the outpatient waitlist identified a significant number of referrals related to common early childhood issues that could be addressed by child and family health nurses (CFHN). A quality improvement project was undertaken resulting in: improved referral management systems, access to community care and, improved communication to referring GPs, identifying actions and outcomes of the referral following CFHN review.

### K8 Falls Prevention Project

In 2022 the K8 team implemented a quality improvement initiative designed to improve patient safety in response to patient falls that had occurred on the ward. Investigations undertaken revealed that patient falls were occurring in or on the way to bathrooms. Analysis of patient experience audits indicated that 75% of patients interviewed had little understanding of what "being high risk of falls" meant. In response to these findings adjustments to patient communication boards were made to include individual risk status and mobility function. Discussion of patient's risk status with the patient/ family during bedside handover and referencing the communication boards was implemented as a standardised practice. The K8 team agreed to prioritise staying with high-risk patients in the bathroom. This initiative achieved a 68% reduction in patient falls over a 12-month period.

### Clinical Nurse Consultant-Pharmacist referral pathway to reduce falls, delirium and polypharmacy

The Drug Burden Index (DBI) is a clinical risk assessment tool that measures an older person's total exposure to medicines that can impair physical and cognitive function. The tool has been incorporated into the electronic medical record (eMR) at CCLHD, as part of a study to determine if medical teams were willing to uptake recommendations by DBI stewardship pharmacists to deprescribe. As part of the sustainability phase, stewardship pharmacists designed an innovative referral pathway between the aged and subacute care clinical nurse consultants, and ward pharmacists. The pathway identifies high-risk patients needing priority medication review by a pharmacist.



# Caring for the Coast Awards 2023

## Excellence in Aboriginal Healthcare

### Aboriginal Elders NAIDOC pre Screen

This initiative is to provide a culturally safe environment for Aboriginal Elders to be screened for chronic conditions that affect their health and wellbeing. The screening is supported through a partnership with Allied health services that allow for a comprehensive screening and referral process. All Elders who are screened are registered and will have a discharge summary sent to the GP for further investigations if required

### “Many Hands” (Gawal Matjorr)

The Many Hands project was a year-long, extensive collaboration between CCLHD Staff, local government, local stakeholders, federal and state funding bodies, headspace National, an Aboriginal Elder, Aboriginal staff, and young people. This diverse group worked together to design and build an Aboriginal therapeutic cultural and outdoor therapy garden at headspace Lake Haven.

### Transition to High School Aboriginal Community Art Project

The Transition to high school Aboriginal community art project is part of the larger Activate Your Space Health Promotion project which applies a community strengths-based approach to improve the physical and social environments of suburbs with greater health inequities and encourage greater interaction between people and public spaces at the neighbourhood level.

This project was initiated to create community engagement with a new park installed in the San Remo area by harnessing the local high school via its Aboriginal student transition program to create artwork to be installed in the park. Artwork theme: “Nature and connection to Country creates healthy people and places”.

## Keeping People Healthy

### Get Active San Remo & Blue Haven

Get Active San Remo and Blue Haven (GASR&BH) is a place-based community sport, active recreation and physical activity initiative delivered in partnership lead by the NSW Office of Sport, in partnership with Central Coast Council and Central Coast Local Health District’s Health Promotion Service. The aim of the initiative is, to get the San Remo and Blue Haven community more physically active, particularly those who are least active. Following extensive community consultation and asset mapping, the initiative provided 155 activities, most of which were free (111) or low cost (28) and inclusive of people with a disability (126). Following a month-long promotional campaign during October 2022, 43% of adults and 27% of children increased their physical activity levels. Most activities continue to be available.

## Central Coast School Garden Interest Group

The Central Coast School Gardens Interest Group (CCSGIG) is led by the CCLHD Health Promotion Service to support primary school teachers by sharing ideas, knowledge and skills for healthy eating learning experiences at school. The CCSGIG has facilitated the development of strong partnerships with the Department of Education, Rumbalara Environmental Education Centre and local primary schools to promote healthy eating and environmental sustainability via school kitchen gardens. The engagement of local schools throughout COVID-19 disruptions with the CCSGIG was maintained via innovative online workshops and the Harvest for Health grant scheme, offered in partnership with Rumbalara EEC. This has led to positive impacts for teachers and students, via professional learning and the provision of resources, expertise and funding, to further facilitate the delivery of healthy eating experiences in local schools.

### Identifying the enabler and barriers for place-based approaches: the evaluation of Activate Your Space

Health Promotion traditionally works via settings-based approaches but ACTIVATE YOUR SPACE (AYS) was our first ‘place-based approach’. The approach targets the specific circumstances of a place, engaging local people as active participants in the development and implementation of relevant and appropriate strategies to share decision-making with stakeholders. The COHEAL (Childhood Obesity/Healthy Eating-Active Living) cross-agency group identified Blue Haven and San Remo as suburbs of high disadvantage and health inequities, with complex needs. Over the last five years, Health Promotion, in consultation and partnership with the local community and various stakeholders, implemented multiple initiatives under the banner of AYS, targeting healthy eating and physical activity including San Remo park run, Aboriginal Lunchbox Connection, Healthy jarjums, a park upgrade, and Aboriginal artwork installation. The initiatives provided positive impacts for the community and left a legacy of strong partnerships that can continue to address local needs as they arise.

## Excellence in Research, Innovation and Sustainability

### The Dino Op Program: An integrated approach to reducing anxiety and improving perioperative outcomes in children.

A distressed or anxious child can cause significant operating theatre delays resulting in increased time in the Post Anaesthetic Care Unit. The Dino Op Program, designed to reduce perioperative anxiety in children, familiarises children aged 1-10 years with some of the people they will meet while in hospital during the perioperative period, as well as the process and procedure of having an operation. Themed stickers, dinosaur book characters and in-ward entertainment are used throughout the child's perioperative journey. The Dino Op book describes in rhyme in a fun and child-friendly way, a particular health care setting and some of the scenarios that children may face when they attend a similar setting. Using a mixed method design, the Dino Op program resulted in reduces perioperative anxiety and distress for paediatric surgical patients and the time taken to manage anxiety and distress.

### Pharmacy PROcurement and FORMulary Improvement (PRO-FORM-I) Initiatives

The Pharmacy PROcurement and FORMulary Improvement (PRO-FORM-I) Initiatives project comprised a number of key pieces of work that were undertaken by CCLHD Pharmacy department to improve medication inventory, governance, efficiency and provide cost savings for CCLHD. The project included: implementation of a state-wide NSW Medicines Formulary; introduction of new state-wide pharmaceutical contracts; and undertaking an expansive, structured Pharmacy Procurement Saving Strategy (PPSS). Together these initiatives resulted in the following: changes to over 2,00 medication products ordered and provided by CCLHD; major changes to medication governance structures that impact all CCLHD staff; over \$1.5million in cost savings; and significant medication safety education efforts to ensure patient safety was maintained throughout the project.

### Capacity building in research for palliative care staff to enable a better end-of-life experience for the Central Coast Community

In 2019 CCLHD received Medical Research Future Fund (MRFF) Rapid Applied Translation Grant funding through NSW Regional Health Partners to address the following key aims: build research capacity at CCLHD; and support development of a long-term strategy for palliative and end-of-life care for the Central Coast. Five workshops were run in 2020 to develop ideas and determine priorities. Following this, three projects were commissioned: Models of Care for People with Dementia Approaching End of Life: A Rapid Review; Improving the End of Life Journey for People with Dementia and their Carers (audit and carer survey); and Improving the Experience of Central Coast Residents and Carers who Access Emergency Care towards the End of Life (audit and survey). Findings will inform future delivery of palliative care.



# Improving Staff Safety in the Workplace



## Influenza Vaccination Program 2023

The annual staff flu vaccination program commenced on 1 May 2023. To date 70% of CCLHD staff have received a vaccination.

## Wearable Technology

Two wearable technologies are being used in the District with the aim of reducing staff injuries.

The first is a 'task assessment' based technology. This involves sensors being applied to the staff member's lower back and arms during a specific work task. These sensors then record information on the staff member's body position, and time spent in each position. Algorithms are then used to establish if this task is "low", "medium", or "high risk. Video is also taken of staff performing the task so that the data can be cross referenced with visual images to identify which parts of each task may be most problematic.

So far, this has been implemented in high-risk areas such as Birthing Suite, Environmental Services and Dental. The information gathered has been used to guide changes in technique, training and procedures. Data regarding how these changes impact on injury rates is ongoing.

The second wearable technology is a 'bio-feedback' based technology and involves the staff member wearing a necklace with a monitor in it that is linked to their phone. The device is initially calibrated to the individual staff member, and when poor posture is registered in the device it vibrates, giving the wearer some feedback that their posture has slipped from "good posture". Data is recorded on the staff member's phone over a period of 2-3 weeks to establish any change in posture habits. This device is mostly aimed at desk-based workers who spend prolonged periods at computer workstations. Feedback is collected anonymously from staff as to whether they feel this has been helpful or reduced any perceived posture related pains. Results from the feedback have been positive.



# Improving Staff Wellbeing in the Workplace

The stress of responding to COVID-19 has been prolonged and staff have continued to respond to ongoing cases. Workforce support and wellbeing throughout the COVID-19 pandemic was critical to ensuring we continue to have a willing, reliable, and capable workforce going forward.

During 2022-2023, the District engaged AccessEAP to run wellbeing support sessions for our managers to provide guidance in how to recognise and best support the mental health and wellbeing of their staff. The program provides an opportunity for managers to debrief after issues and incidents, ask questions and gain meaningful tips on how to manage the ongoing challenges of the current work environment. At the end of June 2023 the RUOK BBQ bus set up in the grounds of Gosford Hospital and provided a free barbecue lunch, mental health information and activities to staff and visitors.

In April 2023, the Ministry of Health notified Local Health Districts of funding for initiatives to support staff wellbeing. Staff Experience Leads across the Local Health Districts, including CCLHD, were able to work together on a range of projects to support staff. Projects included:

- identification of psychosocial risks;
- Manager's Critical Moments Toolkit;
- Employee Listening; and
- Wellbeing Index and Evaluation

## Allied Health Cross-Disciplinary Mentoring Program: Building Confidence, Building Relationships, Building Capacity, Reigniting Purpose

"Developing Our People" is a focus area of the CCLHD Allied Health workforce with the aim of promoting and supporting an energised and highly motivated Allied Health workforce. One initiative has been a mentoring program which aims to:

- help staff to value a different perspective outside of their own discipline's frame of reference;
- develop mentoring & leadership skills; and
- enhance employee well-being, engagement and morale.

To date, 60 Allied Health staff have completed the program. The key outcomes have been:

- the program is goal-centered and builds the capacity of mentors and mentees to respond to, reflect on, and embed learnings from complex situations;
- the program is sustainable as mentees become mentors;
- 90% of mentees report that, after participating, they're more satisfied with their career pathway and 100% report they're more certain of their career path;

- 85% of mentors report that they feel they've grown their mentoring skills through participation in the program and 90% felt they made meaningful contribution and it gave purpose;
- 60-70% of mentoring partnerships have been so valued that the participants have decided to continue them beyond the end of the program; and
- more than 60% of mentees across the cohorts went on to gain promotions or emerging leadership roles within 6 months.

### Building Confidence

*"I leave this program knowing that I will be a better leader, and that I have lots of like-minded support and connection in the broader allied health team." – Mentor*

*"I have developed confidence in asking for assistance when needed and also overall reduced my anxieties around being an emerging leader or manager" – Mentee*

### Building Relationships

*"Having someone removed from your immediate daily work situation has been incredibly valuable...I have gained a valuable ongoing support who I can continue to reach out to for advice" - Mentee*

*"We shared ideas and developed a mutual respect for each other's experience and knowledge.. Would I do this again? Absolutely!" – Mentor*

### Building Capacity

*"Moving forwards, I will attempt to stop doubting my own abilities, so that I can be in a better position to encourage and inspire others." – Mentor*

*"I am now more considerate about a person's personality type and communication style... I think about and plan for different ways a conversation could go and what my needs are. I feel that I now have more influence as a leader of my team and I feel my skillset is respected and valued." – Mentee*

### Re-igniting Purpose

*"During a time in which I was also experiencing significant change, learning and growth in the workplace, the mentoring sessions helped to keep me grounded, and reconnected me with my purpose and my "why" – Mentor*

*"The 1:1 time with a member of the AH management team has been invaluable in re-energising me in my career and has provided me with a perspective I feel I never would have had... I have gained confidence in knowing my strengths, transferable skills and future career goals." – Mentee*

# Staff Safety and Quality Capability Development Strategies

An improvement capability framework is being devised to support the spread and embedding of improvement capability activities into all facets of the organisation. This will be delivered in 2023-24.

Delivery of safe, high quality healthcare requires strong leadership and governance to build accountability at all levels of the organisation. Therefore, in 2022-2023 the District continued to focus on education initiatives with the aim of building leadership and improving skills among clinical and non-clinical staff. Two main improvement methodologies are in place at the District, namely the Agency for Clinical Innovation (ACI) Clinical Redesign process and Lean Six Sigma. A number of District staff attended training in both methodologies.

A culturally specific “Clinical Redesign in a Nutshell” course was created and attended by 7 staff from Nunyara Aboriginal Health Unit. The course was developed and facilitated in conjunction with ACI.

Seven CCLHD clinical staff attended and graduated from the ACI Clinical Redesign school in 2022-23, resulting in development of the following three projects focusing on improving delivery of clinical services:

- Improving access to alternative models of care and home birthing options at Wyong hospital
- Improving ED to inpatient unit access for paediatric patients
- Improving the on-call after-hours social work model of care

## Safety and Quality Capability Development

The Safety and Quality Essentials Pathway (SQEP) continues to be implemented across the organisation, aiming to build the safety and quality capability in our staff. The program provides a structured pathway for staff and includes three levels: Foundational, Intermediate and Adept.



### Foundational

Foundational level training focuses on building awareness of the six dimensions of healthcare quality and of our shared role in healthcare safety and quality. Over 2022-23, 1020 staff completed Foundational-level training by either completing the “The Six Dimensions of Healthcare Quality” 6-minute video), Foundations Workshop (30-minute) or e-Learning modules. Since November 2022, the Foundations workshop is now provided at all Lean Six Sigma White Belt training which enables identified opportunities for improvement to be discussed throughout the White Belt training.

### Intermediate

Intermediate level training available to our staff includes Lean Six Sigma White Belt, and Readiness to Lead for Safety and Quality eLearning. Training is designed for emerging leaders of safety and quality and provides our staff with an understanding of the tools and skills needed to lead continuous improvement. Work continues to increase the awareness of Readiness to Lead training across the organisation.

Lean Six Sigma is a process improvement methodology designed to eliminate problems, remove waste and inefficiency, and improve working conditions to provide a better response to customers’ needs. It combines the tools, methods and principles of Lean and Six Sigma into one popular and powerful methodology for improving organisations operations.

### Lean Six Sigma White Belt

During 2022-23, the Lean Six Sigma White Belt program has delivered 27 courses and trained 294 staff. The course provides practical tools and templates to support staff to undertake a small-scale improvement project, and understand the relationship between quality, safety, and improvement. There has been an increase in requests for team-based sessions, which has allowed for greater engagement and personalisation of course content to support each team’s quality improvement projects.

### Lean Six Sigma Green Belt

The Lean Six Sigma Green Belt Program is a 6-month intensive course that sees participants complete a medium sized project leading a team in change management. During 2022-23, seven Wave 5 participants completed Green Belt with four staff working towards completion. Wave 6 commenced in February 2023, with 13 participants to complete the program in October 2023.

*“Such a great opportunity to really learn the Quality Improvement process in depth and be able to apply this to a relevant QI project in my field of practice! Would highly recommend to any staff members wanting to enhance their ability to carry out QI!”*



## Adept

The inaugural 12-month Applied Program is due to commence in September 2023, and as part of this adept-level training, staff will enhance their skills and experience in leading safety and quality projects. The Program focuses on the practical application of healthcare safety, Lean Six Sigma improvement methodology, and facilitation skills to improve care for our patients. Twelve participants will undertake the program in 2023-24.

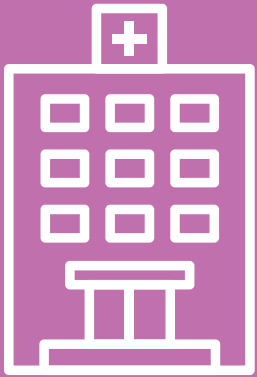
### Jump Start! An introduction to Project Management

The Jump Start Introduction to Project Management course provides staff with knowledge in project management and tools that support the planning, implementation, and completion of projects in the workplace. During 2022-23, five courses were delivered with 62 participants completing the course.



# Caring for our Resources

Financially responsible and sustainable



Ensuring that our resources are delivered effectively and efficiently is a key priority for our District. Our District is committed to proactively managing our resources, and regularly seeking opportunities to disinvest and invest in aspects of health care that will improve the outcomes for our patients and the community. Outlined below are some of the key achievements for 2022-23.

## Environmental Sustainability

Enhancing the District's environmental sustainability program and decreasing our environmental footprint has been a major focus for this year. The following initiatives were continued from the previous year or introduced in 2022 to 2023.

The 1.360 MWp large scale solar PV system installation at Gosford Hospital was completed and now supplies approximately 13% of total electricity consumed by the site. The installation of the 696 MWp carpark solar PV system at Wyong Hospital was also completed and this also supplies approximately 13% of total site electricity consumption.

Two electric vehicle charging stations were installed in the Gosford Hospital fleet carpark to support the roll-out of electric vehicles to replace petrol-driven vehicles. The CCLHD fleet now contains ten electric vehicles.

The Light Emitting Diode (LED) Lighting replacement program was continued with external/carpark lighting upgrades at Wyong and Gosford Hospitals.

CCLHD was a recipient of a NSW Health Sustainable Futures Innovation Fund grant for a pilot project which aims to reduce the amount of reverse osmosis plant reject water within a renal dialysis service, and to reuse reject water for sanitary fixture flushing at Lake Haven Satellite Renal Unit.

Environmental sustainability planning also continued with the following initiatives: first, development of the District's carbon footprint mapping and Net Zero Action plan in partnership with the NSW Office of Energy and Climate Change (OECC); and second, recruitment to a new Environmental Sustainability position to assist the District in progressing the CCLHD Environmental Sustainability Plan.



# Organisational Sustainability Program

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The Organisational Sustainability Program is a District wide framework with strong governance to support sustainable efficiency improvements, contract-based procurements and reductions in waste. The 2022-2023 program had 160 strategies developed and delivered by staff across the District, many using collaborations with HealthShare, eHealth and other Districts.

The District realised \$17M in savings that helped us to meet our on-budget objective, and re-invest in new and growing services.

Overall, the District achieved its financial sustainability objectives and annual priorities meeting Expense, Revenue and Activity targets within performing thresholds.

# Information and Communication Technology (ICT) Plan

## Enhancing the eMR Program

The District, in partnership with Northern Sydney Local Health District, piloted the first phase of the eMR solution for Comprehensive Care that supports clinicians in providing comprehensive care to patients in alignment with Version 2 of the National Safety and Quality Health Service Standards. The components included,

1. Risk Screening Assessment care pathways designed for adult and paediatric inpatients provide recommendations, strategies and actions; and
2. Diagnosis and Documentation workflow components optimise searching for diagnosis terminology and provide a new style of clinical documentations for clinicians.

Following the pilot, enhancements were implemented to resolve the issues that were identified and additional change management and education activities were undertaken. Planning is now underway for the implementation of the Comprehensive Care Plan.

A custom tool for medical handover functionality to improve communication between various clinical teams during shift changeover was developed locally and had been deployed

to Wyong Hospital as the pilot site. It is expected that this tool will allow Medical Officers to highlight and assign each task to the appropriate after-hours Junior Medical Officer. A copy of the documentation will be in the patient medical record, and it will be easily accessible for everyone through eMR.

Medsync, a mobile clinical communication tool, was deployed to enable secure conversations and group messaging with other clinicians using MS Teams as a platform. The Medsync functionality also enables secure transfer of medical images such as wound photography directly to NSW Health Enterprise Image Repository (EIR).

The eMR Fluid and Infusion Management module enhances the existing electronic medications management (eMeds) capability and provides standardised design for fluid and infusion orders in eMR, plus management of infusions and infusion timeline view. The solution includes an electronic fluid balance view which brings in fluid intake from fluid and infusion orders and helps with fluid balance documentation. Change management and training activities were undertaken prior to the implementation in July 2022. The solution has been well received by the end users.

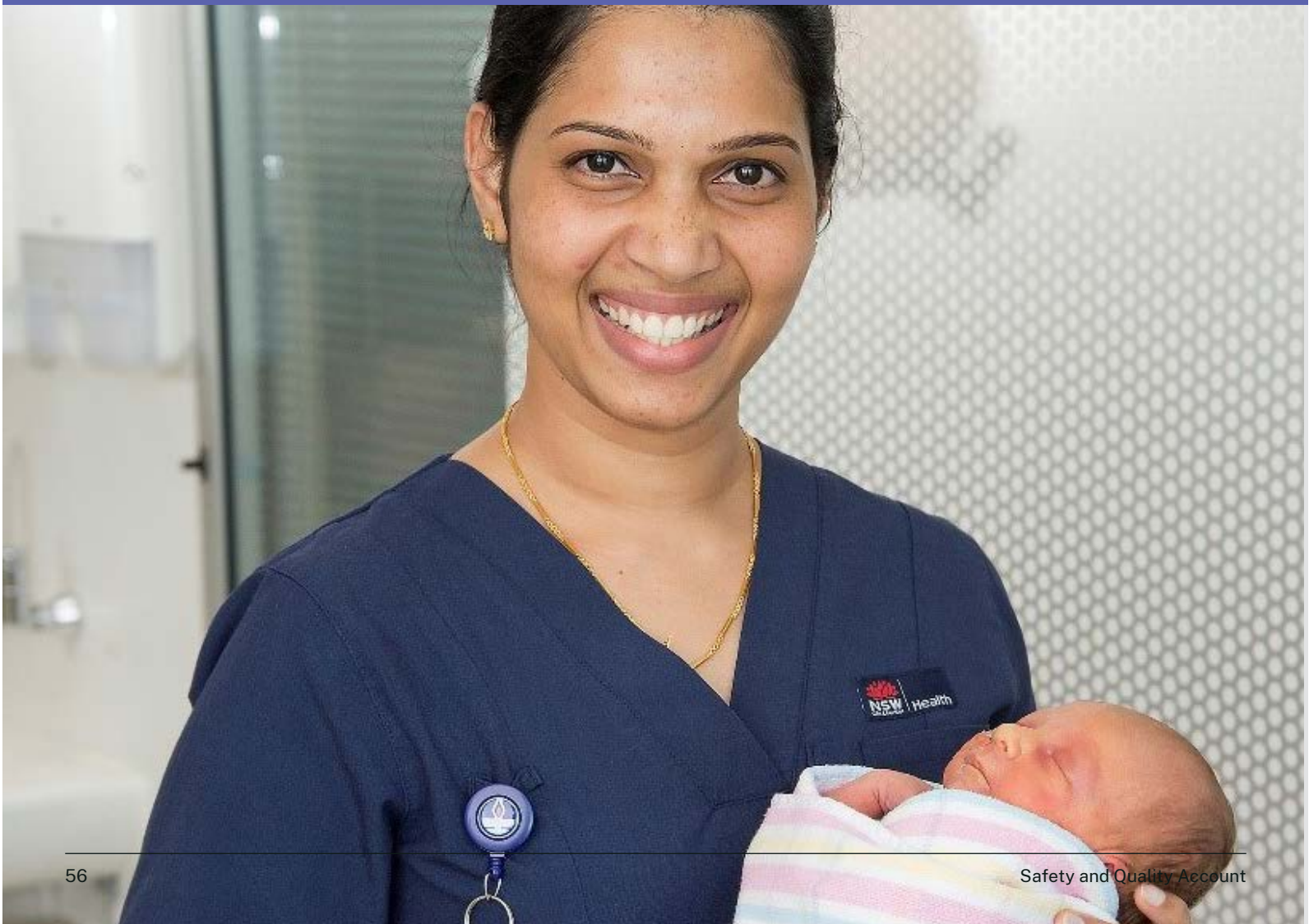
## CCLHD Digital Strategy 2021-2026

The CCLHD Digital Strategy 2021-2026, developed in conjunction with NSLHD, sets the technology vision and focus areas for the District over the next five years and articulates a roadmap to achieve this vision. By effectively leveraging technology, we can deliver affordable and accessible patient-centred care, improve the overall health of our communities, engage and develop our workforce and ensure that decision-making is supported by real-time access to data. The Digital Strategy recognises seven focus areas that will guide digital investments, enable the strategic plan priorities and deliver benefits to the District through a set of 27 defined initiatives.



# Caring for our Future

High quality, integrated, innovative services





# Wyong Hospital Redevelopment



Block H and Stage 2 of the Wyong Hospital redevelopment are now almost complete. The new Magnetic Resonance Imaging unit was installed in November 2022 and went live in March 2023. Works to install solar panels in the car park is now also complete, with the panels providing power for the entire Block H.

Stage 3 of the Wyong Redevelopment is now well underway, with endorsement of detailed design expected in August 2023 and construction to begin in January 2024. A new Palliative Care Unit is also to be delivered at Wyong Hospital, with design currently also underway.



# Research

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The CCLHD Research Symposium was held in November 2022 and comprised two days of workshops on topics such as grant development, qualitative research methods, biostatistics, literature review and quality improvement plus a day of presentations. Approximately 80 people attended the presentations which included 26 oral papers, 18 lightning talks and nine posters.

Presentation of the CCLHD Research Awards for 2022 took place at the Symposium, with awards being presented by Emeritus Professor Maree Gleeson OAM. The inaugural recipient of the Maree Gleeson Award for Excellence in Research was Dr Jennie King (Nursing and Midwifery Research Consultant), and the Emerging Researcher Award was presented to Jacqueline Jagger (Nurse Practitioner, Haematology). Their SLAM-B project, 'Self-administration of Bortezomib for patients with myeloma: A pilot study', also won the Research and Innovation Award at the District's 2022 Caring for the Coast Awards.

Implementation of the CCLHD Strategic Research Plan 2022-2026 is progressing, with key priorities for the coming year including:

- establishing clinical professorial appointments in priority research areas;
- developing an operational plan to support clinical trials;
- creating a Central Coast Research Group to identify support need, research capacity and capability building;
- building collaborative research partnerships, grant applications and awards;
- establishing an Aboriginal Health Research Advisory Group and Strategic Plan;
- engaging community and consumers in research;
- developing communication, marketing and philanthropy strategies; and
- supporting translation of research into practice and assessing impact.

## Research Enrichment and Collaboration

The number of Honorary Conjoint Scholars appointed at the District is continuing to grow with six Scholars providing expertise, mentoring opportunities and research collaboration for local staff in areas including nursing & midwifery, palliative care, podiatry and integrated care.

CCLHD has been supporting many initiatives both locally and collaboratively, including education and training sessions for local staff and students, on topics such as quality improvement, requirements for research at CCLHD, use of REDCap for surveys and databases, and how to submit ethics and governance applications via REGIS (the NSW Research Ethics and Governance Information System). The local Research Office has also collaborated with other LHDs and universities to assist with forums such as the Health Professionals Research Education Program (HPREP) and the Rural Research Collaborative Learning Network (RR-CLaN).

The Research Office has been facilitating a CCLHD Clinical Trials Networking Group to provide support and a networking opportunity for staff in the Clinical Trials Units across the District, including assistance with implementing the new Statewide Clinical Trials Management System (CTMS) which was launched at CCLHD on 1 March 2023. This year the Clinical Trials Networking Group held an event at Gosford Hospital to bring awareness to International Clinical Trials Day (ICTD), which falls on 20th May each year. The CCLHD Research Manager was also involved in a podcast that was released on ICTD titled 'Clinical Trials in Focus' and highlighted the importance of conducting internal monitoring of clinical trials that are sponsored by the District. Currently, there are 45 such clinical trials on the internal monitoring program at CCLHD.

In the coming year plans have advanced for the development of a Central Coast Research Group to help build engagement, skills and capacity across clinicians, managers, academics, industry and consumers. This includes close collaboration with NSW Regional Health Partners to support consumer engagement in research, research co-design, and further research skills building courses and opportunities.

## Research Activity

Significant funding for collaborative research was released during the year including \$6m in funding from OHMR to establish the Rural, Regional and Remote Clinical Trial Support Unit Northern Cluster in collaboration with Hunter New England LHD, Mid North Coast LHD and Northern NSW LHD. The \$5.6m NSW RHP Regional Cancer Research Network benefitted from renewed leadership under Professor Nikola Bowden, with the CCLHD benefiting from a \$41,000 'shovel ready' grant to the SLAM-B project team as well as access to its growing regional membership network.

The total number of active applications being managed by the Research Office at 30 June 2023 was 598, consisting of 389 research projects, 155 quality improvement projects and 38 non-research activity case reports. Currently the Research Office is exceeding its target (of 75%) for review and authorisation of greater than low risk research projects via REGIS within 60 days, with results for the past 9 months sitting at 100%.

Of particular note in research translation, was the conclusion of the 'Capacity building in research for palliative care staff to enable a better end-of-life experience for the Central Coast Community' project, supported by Medical Research Future Fund (MRFF) Rapid Applied Translation Grant funding through NSW Regional Health Partners. Findings from this research have supported the submission for Enhancing End of Life Care funding from the Ministry of Health (including dedicated funding for a dementia care coordinator position), as well as the design of the new Palliative Care Unit at Wyong. The scalability of the research findings is evident from interest received from other health organisations to collaborate in the co-design of new models of care in home care settings on the Central Coast, including a funded project with Hammond Care and ADSSI Ltd.

The project has contributed new knowledge, resulting in one published manuscript (Lewis et al., 2023), and four further manuscripts under review or in draft. Findings from the project have been presented at 18 conferences (including several international conferences, and an invited presentation). Awards were given for poster presentations at the Palliative Care NSW 2022 Conference (Jessica MacDonald, Palliative Medicine Advanced Trainee) and the 2022 CCLHD Research and Innovation Symposium (Suzanne Lewis, Chief Investigator). One team member, Daneill Davis, was awarded Allied Health Researcher of the Year at the CCLHD Excellence in Allied Health Awards 2022. The project team was also announced as a finalist for Research and Innovation at the 2023 Caring for the Coast Awards.



# Central Coast Research Institute



The Central Coast Research Institute for Integrated Care (CCRI) is a joint venture between the District and the University of Newcastle. During 2022-2023, the CCRI revised its strategic objectives to include driving innovation in health and wellbeing technologies that support integrated care through industry engagement and commercialisation. To this end, the CCRI is hosting a \$1.5m investment from the Greater Cities Commission to create the Central Coast Health and Wellbeing Living Lab that will support the generation of new innovations that target active and healthy ageing. A sister program – Healthy at Home – was also launched with the NSW Smart Sensors Network and Australian Research Council’s Hub for Connected Sensors for Health to test out sensor-based technologies to support older people to live independently at home.

Another major research and development program focusing on new models of care for older people was established. The ALICE (All Inclusive Care for the Elderly) project was commissioned by CCLHD, HNECCPHN and the Department of Regional NSW to undertake a co-design process to develop a business case for a new model of integrated community care for the Central Coast. This was supported by the CCRI’s work in developing a Joint Strategic Needs Assessment for the Central Coast that identified local neighbourhoods that would benefit from enhanced and coordinated care.

After three years of operation, in July 2023, the CCRI had completed 12 research and development projects, has 12 that are active and ongoing, plus another 20 submitted for grant funding. The small but growing team at CCRI has been enhanced over the year by the recruitment of a research project manager, Dr Zoi Triandafilidis. The recent contract to work within the Centre of Research Excellence on Health and Social Care Integration (CREHSCI) has enabled CCRI to recruit two more staff to support knowledge generation and dissemination on integrated care across its growing Australia and Asia-Pacific networks.

# Nursing and Midwifery Research

Nurses and midwives are actively engaged in practice-based research across CCLHD, leading the way to ensure patient care is based on best available evidence. In 2022-23, the Nursing and Midwifery Directorate supported 14 ethics approved investigator-led projects. Examples of projects that focus on quality and safety include:

- **The Cleaning and Enhanced disinfection (CLEEN)**

**study:** A randomised control trial investigating the effect of improving the cleaning of shared medical equipment on healthcare associated infections. Lead: Professor Brett Mitchell, CCLHD Honorary Conjoint Scholar.

The CLEEN study commenced at Gosford Hospital in March 2023. The project aims to assess how enhanced cleaning of shared medical equipment affects the rate of Hospital-acquired infections (HAIs) in a tertiary hospital setting. The initiative is an evidence-based approach combining staff training (technique, product choice), audit and feedback to environmental services staff to enhance cleaning practices. The study is supported by a 2021 NHMRC Investigator Grant.

- **SLAM-B: Self-administration of Bortezomib for patients with myeloma:** A new model of care. Lead: Jacqui Jagger NP Haematology. Associate investigators: Emma Parr CNS, Dr Jennie King NM, Michael Swab Pharmacy, SLHD: Professor Kate White and Tracy King CNC

This project examines the feasibility, safety and acceptability of a new model of care for eligible myeloma patients to self-administer Bortezomib chemotherapy in the home setting. To date, all patients have achieved competency in the self-administration technique. Self-injection acceptability data demonstrated increased levels of confidence through the training cycle. The time taken out of a patient's day for injection in the Cancer Day Unit is 1-3 hours, whereas the time taken for telehealth assessment and self-injection at home is 30 minutes per week. Self-administration of subcutaneous chemotherapy appears safe and a feasible option for patients with myeloma. An economic evaluation is in progress to provide meaningful cost-benefit analysis of self-administration model of care compared to standard in-hospital outpatient administration. The project has received 5 small grants totalling \$100,119.

- **The Dino Op Program: An integrated approach to reducing anxiety and improving perioperative outcomes in paediatric patients.** Lead: Kate McGill RN; Co-investigators Justine Roberts CNE, Shuyan Lai CNS Operating Theatres, Penny Owens CNC Paediatrics, Jennie King NM Research.

The Dino Op Program was developed to alleviate perioperative anxiety in paediatric patients by familiarising them with the hospital environment and the surgical process. This comprehensive program incorporates themed stickers, dinosaur book characters, and in-ward entertainment throughout the perioperative journey. The Dino Op book, presented in a fun and child-friendly rhyming style, introduces children to various scenarios they may encounter during their operation. The objective of this study is to assess the effectiveness of the Dino Op program in reducing perioperative anxiety and distress among paediatric surgical patients, as well as the impact on the time required to manage their anxiety.

Results have shown children who received the Dino Op pack had significantly reduced anxiety scores during pre-anaesthesia compared to the baseline cohort. Time taken to manage anxiety and distress was reduced which translates to a better patient experience and significant cost savings from reduced theatre delays.

- **Specialist Wound Centre (SWC): Evaluation of a New Model of Integrated Wound Management.** Lead: Jonathan Brinton A/NM Clinical Practice & Leadership; Co-investigators: Dr Anne Purcell NP, Alison Peck A/CNC, Jennie King NM Research. This study evaluates the effectiveness of the SWC model of care. From April –September 2022, clients completed a PREM survey. Results to date indicate that patients and carers had a very positive experience. There is greater access to the SWC with increased awareness and referrals resulting in increased service capacity. Data analysis of wound prevalence rates and an economic evaluation is ongoing. The project was a finalist in the Caring for the Coast Awards 2022.

The 2022 Caring for the Coast Awards provided an opportunity to acknowledge and promote nursing research and quality improvement initiatives. Three nurse-led projects were finalists. The Winner of the Excellence in Research and innovation category was SLAM-B: Self-administration of Bortezomib for patients with myeloma: A new model of care.

## Nursing and Midwifery Research Plan

The Nursing and Midwifery Research Operational Plan 2022-2026 is a significant initiative that has taken place over the past 12 months. The purpose of this plan is to support the contribution of Nursing and Midwifery to the CCLHD Strategic Research Plan for 2022-2026. It aims to provide a platform for nurses and midwives across CCLHD to lead and actively engage in research initiatives.

The Nursing and Midwifery Research Advisory Group played a crucial role in the development of the Plan. Their input ensured that the plan aligned with the goals and priorities of the nursing and midwifery community. The Plan was endorsed by the Nursing and Midwifery Leadership Committee In February 2023.

## 6th Australian Nursing and Midwifery Conference

In May 2023, CCLHD successfully co-hosted the 6th Australian Nursing and Midwifery Conference with Hunter New England and Mid North Coast Local Health Districts and the University of Newcastle, to provide an exciting program of nursing and midwifery-led innovations in clinical practice, research and education.

Our Central Coast nurses and midwives delivered eight of the 57 oral presentations as well as several posters. Honorary Conjoint Scholar, Professor Brett Mitchell delivered an excellent keynote address on impactful research to inform and transform practice. The conference was attended by over 250 delegates from across Australia and provided a forum and networking opportunity for clinicians, researchers and educators to share knowledge and celebrate our successes.



# Performance against 2022-2023 NSW Health KPI

Safety and Quality Domain	Measure	Period	Target	2022-23 Result
<b>Outcome 1: Keeping people healthy through prevention and health promotion</b>				
Effectiveness	<b>Childhood Obesity</b> – Children with height and weight recorded (%)	July 2022 - June 2023	>= 70.0%	<b>58.10%</b>
Equity	<b>Smoking During Pregnancy</b> – At any time (%): • Aboriginal Women	July 2022 - June 2023	<=34.3%	30.5%
Equity	<b>Smoking During Pregnancy</b> – At any time (%): • Non-Aboriginal Women	July 2022 - June 2023	<= 11.1%	10.3%
Efficiency	<b>Hospital Drug and Alcohol Consultation Liaison</b> - Number of consultations (% increase)	July 2022 - June 2023	801.0	1,479
Effectiveness	<b>Hepatitis C Antiviral Treatment Initiation</b> – Direct acting -by LHD residents (% variance)	July 2022 - June 2023	195.0	50
Effectiveness	<b>Children fully immunised at one year of age</b> (%)	June 2023	>= 95.0%	94.40%
Effectiveness	<b>Pregnant Women Quitting Smoking</b> - By second half of pregnancy (%)	July 2022 - June 2023	≥ 19.5%	37.5%
Effectiveness	<b>Get Healthy Information and Coaching Service - Get Healthy in Pregnancy Referrals</b> (% increase)	July 2022 - June 2023	≥ 365.0	399
Effectiveness	<b>BreastScreen participation rates</b> (%) • Women aged 50-69 years	July 2022 - June 2023	>= 55.0%	41.70%
Effectiveness	<b>BreastScreen participation rates</b> (%) • Women aged 70-74 years	July 2022 - June 2023	>= 55.0%	43.40%
Effectiveness	<b>NSW Health First 2000 Days Implementation Strategy</b> – Delivery of the 1-4 week health check %	July 2022 - June 2023	>= 85.0%	76.40%
Equity	* Aboriginal paediatric patients undergoing Otitis Media procedures (Number)	July 2022 - June 2023	>= 3.0	<b>1</b>
<b>Outcome 2: People can access care in and out of hospital settings to manage their health and wellbeing</b>				
Appropriateness	<b>Potentially Preventable Hospital Services</b> (%)	July 2022 - June 2023	<= 22.5%	22.1%
Effectiveness	<b>Mental Health Acute Post-Discharge Community Care</b> -Follow up within seven days (%)	July 2022 - June 2023	>= 75.0%	
Effectiveness	<b>Mental Health: Acute Readmission</b> – Within 28 days (%)	July 2022 - June 2023	<= 10.0%	9.50%
Patient-Centred Culture	<b>Electronic Discharge Summaries</b> – Sent electronically and accepted by General Practitioners (%)	July 2022 - June 2023	>= 51.0%	69.90%
Effectiveness	<b>Domestic Violence Routine Screening</b> – Routine Screens conducted (%)	July 2022 - June 2023	>= 70.0%	62.40%
Effectiveness	<b>Sustaining NSW Families Programs</b> - Applicable LHDs only - see Data Supplement: • Families completing the program when the child reached two years of age (%)	July 2022 - June 2023	>= 50.0%	83.30%
Patient-Centred Culture	<b>Mental Health Peer Workforce Employment</b> – Full Time Equivalent (FTEs) (Number)	July 2022 - June 2023	>= 4.0	10



Safety and Quality Domain	Measure	Period	Target	2022-23 Result
Timeliness and Accessibility	<b>Telehealth Service Access</b> - Non-admitted services provided through telehealth (%)	July 2022 - June 2023	>= 10.0%	18.9%
<b>Outcome 3: people receive timely emergency care</b>				
Timeliness and Accessibility	<b>Emergency Department Presentations</b> - Treated within benchmark times (%): • Triage 1: seen within 2 minutes	July 2022 - June 2023	100.0%	100.00%
	<b>Emergency Department Presentations</b> - Treated within benchmark times (%): • Triage 2: seen within 10 minutes	July 2022 - June 2023	>= 95.0%	73.90%
	<b>Emergency Department Presentations</b> - Treated within benchmark times (%): • Triage 3: seen within 30 minutes	July 2022 - June 2023	>= 85.0%	45.20%
	<b>Transfer of care</b> - Patients transferred from ambulance to ED <= 30 minutes (%)	July 2022 - June 2023	>= 90.0%	67.50%
	<b>Emergency Department Extended Stays:</b> Mental Health presentations staying in ED > 24 hours (Number)	July 2022 - June 2023	0	19
	<b>Emergency Treatment Performance</b> - Admitted (% of patients treated in <= 4 hrs)	July 2022 - June 2023	>= 50.0%	17.90%
<b>Outcome 4: People receive high quality, safe care in our hospitals</b>				
Safety	<b>Hospital Acquired Pressure Injuries</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 6.6	4.3
	<b>Healthcare Associated Infections</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 117.6	137.4
	<b>Hospital Acquired Respiratory Complications</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 27.8	28.2
	<b>Hospital Acquired Venous Thromboembolism</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 8.7	6.6
	<b>Hospital Acquired Renal Failure</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 2.4	0.4
	<b>Hospital Acquired Gastrointestinal Bleeding</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 11.9	10.4
	<b>Hospital Acquired Medication Complications</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 13.9	11.8
	<b>Hospital Acquired Delirium</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 50.0	54.4
	<b>Hospital Acquired Incontinence</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 5.0	1.4
	<b>Hospital Acquired Endocrine Complications</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 29.1	22.8
	<b>Hospital Acquired Cardiac complications</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 41.7	27.1
	<b>3rd or 4th Degree Perineal Lacerations During Delivery</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 391.6	209.8
	<b>Hospital Acquired Neonatal Birth Trauma</b> (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 104.3	55.2
	<b>Fall-related Injuries in Hospital</b> - Resulting in fracture or intracranial injury (Rate per 10,000 episodes of care)	July 2022 - June 2023	<= 6.7	9.6

Safety and Quality Domain	Measure	Period	Target	2022-23 Result
Efficiency	<b>Elective Surgery Overdue</b> –Patients (Number): • Category 1	Jun-23	0	3
	<b>Elective Surgery Overdue</b> –Patients (Number): • Category 2	Jun-23	0	402
	<b>Elective Surgery Overdue</b> –Patients (Number): • Category 3	Jun-23	0	1215
	<b>Elective Surgery Access Performance</b> – Patients treated on time (%): • Category 1	July 2022 - June 2023	100.0%	0.944
	<b>Elective Surgery Access Performance</b> – Patients treated on time (%): • Category 2	July 2022 - June 2023	>= 97.0%	0.633
	<b>Elective Surgery Access Performance</b> – Patients treated on time (%): • Category 3	July 2022 - June 2023	>= 97.0%	0.462
Equity	<b>Discharge against medical advice for Aboriginal inpatients</b> (%)	July 2021 - June 2022	<=1.6%	0.024
Patient-Centred Culture	<b>Patient Engagement Index</b> (Number) ED Patients not admitted to hospital	July 2022 - June 2023	>= 8.5	7.79
	<b>Patient Engagement Index</b> (Number) Adult admitted patients	July 2022 - June 2023	>= 8.5	7.87
	<b>Overall Patient Experience Index</b> (Number) • Adult admitted patients	July 2022 - June 2023	>= 8.5	8.12
	<b>Overall Patient Experience Index</b> (Number) • Emergency department	July 2022 - June 2023	>= 8.5	8.49
Timeliness and Accessibility	<b>Paediatric Admissions from Elective Surgery Waiting List</b> -% variance from target (Number)	July 2022 - June 2023	760.0	683
Effectiveness	<b>Unplanned Hospital Readmissions</b> –All admissions within 28 days of separation (%): • All persons	July 2022 - June 2023	<= 7.9%	7.00%
	<b>Unplanned Hospital Readmissions</b> –All admissions within 28 days of separation (%): • Aboriginal persons	July 2022 - June 2023	<= 8.6%	7.50%
Appropriateness	<b>Mental Health: Acute Seclusion</b> • Occurrence (Episodes per 1,000 bed days)	July 2022 - June 2023	<= 5.1	4.3
	<b>Mental Health: Acute Seclusion</b> • Duration (Average Hours)	July 2022 - June 2023	<= 4.0	1.75
	<b>Mental Health: Acute Seclusion</b> • Frequency (%)	July 2022 - June 2023	< 4.1	4.1%
Safety	<b>Mental Health: Involuntary patients absconded from an inpatient mental health unit</b> –Incident Types 1 and 2 (rate per 1,000 bed days)	July 2022 - June 2023	<= 0.8	0.49
Patient-Centred Culture	<b>Mental Health Consumer Experience:</b> Mental Health consumers with a score of Very Good or Excellent (%)	July 2022 - June 2023	>= 80.0%	76.0%

Safety and Quality Domain	Measure	Period	Target	2022-23 Result
<b>Outcome 5: Our people and systems are continuously improving to deliver the best health outcomes and experiences</b>				
Patient-Centred Culture	<b>Workplace Culture</b> – People Matter Survey Culture Index –Variation from previous year (%)	July 2022 - June 2023	>= -1.0%	-4.0%
	<b>Take Action</b> -People Matter Survey -Take action as a result of the survey –Variation from previous year (%)	July 2022 - June 2023	>= -1.0%	-4.5%
	<b>Staff Performance Reviews</b> –Within the last 12 months (%)	June 2023	>= 90.0%	54.0%
	<b>*Recruitment</b> – Average time taken from request to recruit to decision to approve/decline/defer recruitment (business days)	June 2023	<= 10 days	
Equity	<b>Employment of Aboriginal Health Practitioners</b> - (Number)	July 2022 - June 2023	>= 1.0	0
	<b>Aboriginal Workforce Participation</b> –Aboriginal Workforce as a proportion of total workforce at all salary levels (bands) and occupations (%)	July 2022 - June 2023	>= 1.8	3.1%
Patient-Centred Culture	<b>Compensable Workplace Injury</b> –Claims (% change)	July 2022 - June 2023	<= 290.0	38.10%
	<b>Staff Engagement and Experience - People Matter Survey - Racism experienced by staff</b> -Variation from the previous year (%)	July 2022 - June 2023	>= 5.0%	2.0%
	<b>Staff Engagement - People Matter Survey Engagement Index</b> -Variation from the previous year (%)	July 2022 - June 2023	>= -1.0%	-4.0%
Effectiveness	<b>Research Governance Application Authorisations</b> –Site specific within 60 calendar days –Involving greater than low risk to participants (%)	July 2022 - June 2023	>= 75.0%	100.0%

\*No local data available.

Taken from CD23/57861

# Future Safety and Quality Priorities for 2023-2024

- 1** Reducing Fall related Injuries in Hospital -Hospital Acquired Complication (HAC) rate to  $\leq 6.7$  by June 2024.
- 2** Reducing Healthcare Associated Infections -Hospital Acquired Complication (HAC) rate to  $\leq 117.6$  by June 2024 and maintenance of Hand Hygiene rates above the National Benchmark of 80%.
- 3** Improving patient experience for all patients across all care settings
  - Overall Patient Experience index – Emergency Department  $\geq 8.6$
  - Overall Patient Experience Index - Adult Admitted Patients  $\geq 8.7$
- 4** Improved management of the deteriorating patient. Measures will include number of overall rapid response calls, number of back-to-back calls and number of concurrent calls and may include a review of altered calling criteria, resuscitation planning particularly associated with inappropriate commencement of resuscitation measures by June 2024.

# Board attestation statement

Central Coast Local Health District

Governing Body's Attestation Statement under the AHSSQA Scheme



This attestation statement is made by Professor Donald MacLellan

*Name of office holder/member of Governing Body*

Holding the position/office on the Governing Body Central Coast Local Health District Board Chair

*Title of officeholder/member of Governing Body*

For and on behalf of the governing body titled Central Coast Local Health District Board

*Governing body's title (the Governing Body)*

Central Coast Local Health District

*Health service organisation name (the Organisation)*  
*See schedule attached*

1. The Governing Body has fully complied with, and acquitted, any Actions in the National Safety and Quality Health Service (NSQHS) Standards, or parts thereof, relating to the responsibilities of governing bodies generally for Governance, Leadership and Culture. In particular I attest that during the past 12 months the Governing Body:
  - a. has provided leadership to develop a culture of safety and quality improvement within the Organisation, and has satisfied itself that such a culture exists within the Organisation
  - b. has provided leadership to ensure partnering by the Organisation with patients, carers and consumers
  - c. has set priorities and strategic directions for safe and high-quality clinical care, and ensured that these are communicated effectively to the Organisation's workforce and the community
  - d. has endorsed the Organisation's current clinical governance framework
  - e. has ensured that roles and responsibilities for safety and quality in health care provided for and on behalf of the Organisation, or within its facilities and/or services, are clearly defined for the Governing Body and workforce, including management and clinicians
  - f. has monitored the action taken as a result of analyses of clinical incidents occurring within the Organisation's facilities and/or services
  - g. has routinely and regularly reviewed reports relating to, and monitored the Organisation's progress on, safety and quality performance in health care.
2. The Governing Body has, ensured that the Organisation's safety and quality priorities address the specific health needs of Aboriginal and Torres Strait Islander people.

**Central Coast Local Health District**

3. I have the full authority of the Governing Body to make this statement.
4. All other members of the Governing Body support the making of this attestation statement on its behalf

I understand and acknowledge, for and on behalf of the Governing Body, that:

- submission of this attestation statement is a pre-requisite to accreditation of the Organisation using NSQHS Standards under the Scheme
- specific Actions in the NSQHS Standards concerning Governance, Leadership and Culture will be further reviewed at any onsite accreditation visit/s.

Signed

A handwritten signature in black ink, appearing to read "David J. MacLellan".

Position

Board Chair, Central Coast Local Health District

Date

25/07/2023

Counter signed by the Health Service Organisation's Chief Executive Officer

Signed

A handwritten signature in black ink, appearing to read "Scott McLachlan".

Position

Chief Executive, Central Coast Local Health District

Name

Scott McLachlan

Date

25/07/2023

**Central Coast Local Health District**

Schedule of health service organisations covered by this attestation statement

<b>Central Coast Local Health District</b>	<b>PO BOX 361 GOSFORD NSW 2250</b>
Gosford Hospital	
Wyong Hospital	
Woy Woy Hospital	
Long Jetty Healthcare Facility	
Wyong Mental Health Unit	
Gosford Mental Health Unit	
Central Coast - Community Mental Health	Headspace Gosford Community Mental Health teams
Central Coast LHD -Dental/Oral Health	Gosford Dental Clinic - Gosford Hospital Woy Woy Dental Clinic - Woy Woy Hospital Wyong Dental Clinic - Wyong Hospital
Central Coast LHD - Community Health	Citigate Wyoming Erina Community Health Centre Gateway Community Health Services Gosford Kanwal Community Health Centre - Wyong Hospital Kincumber Community Health Centre Lake Haven Community Health Centre Long Jetty Community Health Centre Mangrove Mountain Community Health Centre Ngiyang Aboriginal Pregnancy, Child & Family Health Service Public Health Unit Toukley Community Health Centre Woy Woy Community Health Centre Wyong Central Community Health Centre Health@Home

