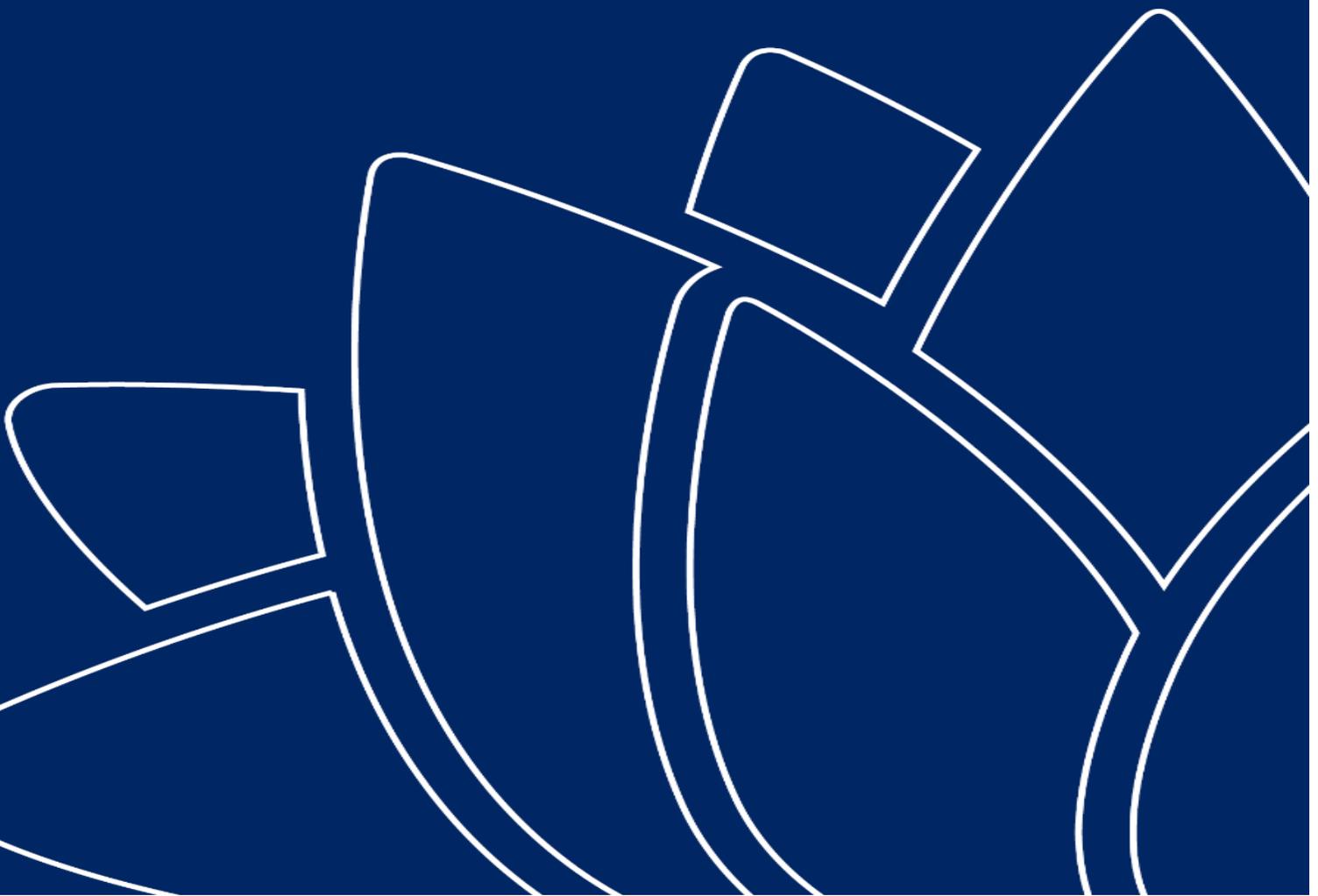


LHD/SN Service Development Priority Focus Areas - Template



© NSW Health 2022.

For queries about the content of this document, contact the Service and Capital Planning Unit at the NSW Ministry of Health.

Template Proforma Version History

Version	Date	Notes	Reviewed by
1.0	September 2022	Developed after consultations with Local Health Districts	

Contents

ABOUT THE TEMPLATE	1
STRATEGIC & SERVICES PLANNING – ROLES AND RESPONSIBILITIES.....	1
HEALTH CARE SERVICES PLAN (HCSP).....	1
THE TEMPLATE SYNERGIES WITH THE HCSP	1
PRIORITY FOCUS AREAS	1
STAKEHOLDERS	1
RELATIONSHIP WITH OTHER PLANS	2
IS IT MANDATORY TO USE THE TEMPLATE?.....	2
PLANNING HORIZON AND UPDATES	3
TEMPLATE STRUCTURE	3
LHD/SN SERVICE DEVELOPMENT PRIORITY FOCUS AREAS - TEMPLATE	4
ACKNOWLEDGEMENT OF COUNTRY	4
EXECUTIVE SUMMARY	4
PRIORITY FOCUS AREAS AT A GLANCE	5
SECTION 1: ELEMENT – CASE FOR CHANGE	7
SECTION 1: ELEMENT – SERVICE MODEL.....	8
SECTION 1: ELEMENT – NETWORKING / PARTNERSHIPS WITHIN THE LHD / SN	10
SECTION 1: ELEMENT – NETWORKING / PARTNERSHIPS WITH OTHER HEALTH SERVICE PROVIDERS AND ENTITIES.....	11
SECTION 1: ELEMENT – ENVIRONMENTAL SUSTAINABILITY / CLIMATE RISK	12
SECTION 1: ELEMENT – CAPITAL.....	14
SECTION 1: ELEMENT – IMPACT ON SUPPORT AND ENABLING SERVICES OR POTENTIAL OPPORTUNITIES	15
SECTION 1: ELEMENT – WORKFORCE.....	17
SECTION 1: ELEMENT – OTHER RESOURCE IMPLICATIONS	18
SECTION 2: INVOLVEMENT IN DEVELOPMENT OF PRIORITY FOCUS AREAS	19
SECTION 3: CONSULTATION.....	20
APPENDICES	21

ABOUT THE TEMPLATE

STRATEGIC & SERVICES PLANNING – ROLES AND RESPONSIBILITIES

In the [Corporate Governance and Accountability Compendium for NSW Health \(the Compendium\)](#), Local Health Districts (LHDs) and Specialty Networks (SNs) have a responsibility to effectively plan services over the short and long term to enable service delivery that is responsive to the health needs of its defined population. LHDs and SNs are responsible for developing organisational plans such as Strategic Plans, Corporate Governance Plans, and Operations/Business plans at all management levels of the LHD/SN.

The NSW Ministry of Health (Ministry) has a role in providing guidelines, information, and tools to facilitate local health service planning; providing advice and feedback to LHDs/SNs on local planning exercises as required; reviewing local planning in respect to achieving whole of system goals and objectives; and ensuring NSW Department of Premier and Cabinet, NSW Treasury and other central agency requirements are met.

HEALTH CARE SERVICES PLAN (HCSP)

In the Compendium, the HCSP is a comprehensive planning document that provides the service direction and priorities for an LHD/SN over a five-to-ten-year horizon, with specific focus on the issues which affect the health of the catchment population and the delivery of services. All LHDs/SNs are required to develop a HCSP.

The HCSP should consider an appropriate balance between investments in various services. The HCSP should also consider the provision of safe and efficient health care within the available recurrent budget through the Activity Based Funding framework and the best approach to service delivery. This is the planning mechanism where value for money opportunities are investigated and may include partnering with other service providers, public or private, not-for-profit and / or other non-governmental organisations.

THE TEMPLATE SYNERGIES WITH THE HCSP

To achieve a more consistent approach to LHD or SN wide planning, the Ministry has developed a template to articulate some of the key planning considerations that fall within the scope of a HCSP.

The elements in this template, while not exhaustive, provides an integrated high-level representation of the LHD/SN's key medium and long-term service development priorities over the next five to ten years. The template does not restrict the form or content of the LHD/SN HCSP. LHDs/SNs may include a broader range of considerations in their HCSP.

The template is not intended to serve as a mechanism to seek additional recurrent funding or capital funding. The LHD/SN will need to follow the usual process for seeking these funds. The framework for prioritising, planning, delivering and evaluating capital investment proposals (valued at \$10 million and above) across the NSW health public health system is outlined in the [NSW Health Facility Planning Process Guideline GL2021_018](#). Information about the NSW Health Performance Framework and Service Agreements is available on the [NSW Health website](#).

PRIORITY FOCUS AREAS

Priority focus areas relate to a change in the current way of practice with clear benefits for an identified population. The priority focus areas and case for change should align with [Future Health Guiding the Next Decade of Care in NSW 2022 – 2032 Report, value based healthcare](#) (quadruple aim) and a [program logic model](#) approach. Priority focus areas may relate to:

- Promotion, protection, and maintenance of health of the community.
- A population group (e.g., older people) or client group (e.g., people with chronic conditions).
- A service type (e.g., surgery), service model (e.g., out of home care), support, enabling services (e.g., data services) or facility.
- Service improvements that support sustainable health service delivery and contemporary models of care into the future.
- Other factor/s impacting on population health or health service delivery (e.g., climate change).

Priority focus areas should be achievable, affordable, sustainable, and not be reliant on new or additional recurrent funding assumptions. Dependent on the priority focus area, there may be some elements in the template (or items within an element) that do not apply to a priority focus area. The LHD/SN should note this if this is the case and add other relevant supporting information as appropriate.

LHDs/SNs may submit their priority focus areas as part of their HCSP or as an attachment to their Capital Investment Proposal to the Ministry if any of the priority focus areas include a major capital investment proposal.

STAKEHOLDERS

The process of developing the LHD/SN's priority focus areas should involve working with a range of stakeholders to draw on their understanding of the initiatives and its impacts/outcomes. Internal stakeholders could include health service planners, clinical and non-clinical managers and leads in relevant areas such as finance and workforce.

External stakeholders including individuals, groups, and organisations relevant to the priority focus areas under consideration may be consulted via existing mechanisms such as Local Advisory Committees or in other ways. A collaborative approach is required to determine the LHD/SN's priorities for action over the next five to ten years.

RELATIONSHIP WITH OTHER PLANS

The template draws on information from other local plans and is informed by several separate, interdependent foundational planning processes which focus more specifically on areas such as clinical services, health improvement, workforce and assets. The template synthesises these various efforts into the 'big picture' view of the LHD/SN's current situation, anticipated future needs, and priorities for action, assuming a particular operating environment. Detailed service and workforce planning are essential to ensure a sound foundation for investment decisions, both capital and recurrent.

Diagram 1: Relationship Between Plans



IS IT MANDATORY TO USE THE TEMPLATE?

LHDs/SNs are not mandated to use the format outlined in this template provided the elements in the HCSP or other document submitted to the Ministry are consistent with this template and a program logic model approach is used. If the LHD/SN has an existing document that outlines the LHD/SN's highest priorities for action, the template can be used as a guide to evaluate that document or inform its update.

LHDs/SNs may reference other relevant plans (e.g., existing workforce, financial, environmental, asset management or detailed service plans) and/or copy and paste information from these plans into the template. Copies of these plans should be attached as an Appendix only if they are referenced in the main document.

LHDs/SNs may also change the template to A3 format to provide more space for responses or use a different format, if it results in a more fit for purpose document. The production of the Plan using this template does not replace other local planning processes or activities. LHDs/SNs will be responsible for ensuring appropriate processes are in place for effective implementation, monitoring, review and evaluation of strategies, outcomes/benefits identified in plan, and continue to work within the LHD/SN's annual Service Agreements.

PLANNING HORIZON AND UPDATES

The Ministry recognises the diversity of planning knowledge, experience, and resources across the LHDs/SNs and notes that LHDs/SNs are at different stages of their planning cycle and may have existing planning documents or documents in development with varying names, content, and planning timeframes.

The LHD/SN priority focus areas should be prepared for a five-year period, with a broad outlook to ten years, where appropriate. Planning processes are generally non-linear, iterative, and mutually dependent, with several activities proceeding concurrently and ongoing revisiting, review and revision of activities and decisions to consider analyses and more recent information.

Periodic review and update of the LHD/SN priority focus areas will be required to ensure any changes proposed, as part of ongoing planning, monitoring and evaluation activities are reflected in the plan, where appropriate.

TEMPLATE STRUCTURE

The template makes provision for five priority focus areas. LHDs/SNs may add or reduce the number of priorities as appropriate. The information requested is generally at a high level. More detailed information and costings will be required in the detailed service plan and business case, where the priorities have a related capital implication and capital funding commitment.

Template	Section Heading	Information	Consider Future Health *
Executive Summary	Executive Summary & Priority Focus Areas at a glance	Provide a high-level summary of the LHD/SN's current situation, key issues, anticipated future needs, priorities for action (Priority Focus Areas) and strategic alignment.	
Section 1	Elements	Provide more information about each priority focus area. Elements include the case for change; service model; networking and partnerships within the LHD/SN, with other health service providers and entities; environmental sustainability/climate risk; capital priorities; impact on support and enabling services, workforce; and other resource implication.	
Section 2	Involvement in development of the Plan	Provide information on the subject matter experts/topic area leads in the LHD/SN involved in the development of the plan, monitoring and evaluation of strategies/outcomes.	
Section 3	Consultation	Outline who has been consulted in the development of the Plan, both internal and external stakeholders.	
Appendices	Aboriginal Health Impact	Attach the Aboriginal Impact Statement as an appendix.	
	Role Delineation (RD) Report	Include RD report for sites impacted by changes to RD, sites included in the capital priorities, and any services they are networked with to access higher level services. Report can be downloaded from CaSPA (instructions in CaSPA).	
	Other relevant planning documents	Attach or link relevant planning documents e.g., workforce, environmental sustainability, service plans.	

* Refer to [Future Health](#) for strategic outcomes and key objectives linked to the legends used in the table above.

LHD/SN SERVICE DEVELOPMENT PRIORITY FOCUS AREAS - TEMPLATE

ACKNOWLEDGEMENT OF COUNTRY

EXECUTIVE SUMMARY

Provide a high-level summary of the LHD/SN's current situation, key issues and challenges (e.g. population, services, workforce, facilities, activity, sustainability) and anticipated future needs.

The Executive Summary should list the Priority Focus Areas and outline why these priorities were selected as the focus for action over the next 5 – 10 years.

This may include reference to:

- *Future Health; NSW Health state-wide policies, plans, guidelines; LHD/SN local plans; and issues which affect the health of the catchment population and the delivery of services.*
- *Strategic and service direction and priorities for the LHD/SN over the next five-to-ten-years.*
- *Local population health characteristics and opportunities for improved health outcomes through population health approaches.*
- *The most effective and efficient range and location of health services including how these services are networked and an appropriate balance between investments in various services.*
- *Provision of safe and efficient health care within the available recurrent budget through the Activity Based Funding framework and the best approach to service delivery.*
- *Value for money opportunities which may include partnering with other service providers, public or private, not-for-profit and / or other non-government organisations.*

PRIORITY FOCUS AREAS AT A GLANCE

INFORMATION	PRIORITY NAME:				
Overview of Priority <i>Brief description of the Priority Focus Area.</i>					
Strategic Alignment Future Health	Strategic Outcome: Key Objective:				
NSW Health Cluster Outcome Business Plan 2022 – 2023*	State Outcome: Key Program:				
<i>Other NSW Health state-wide policies, plans, guidelines</i>					
Value Based Healthcare Outline alignment with the quadruple aims: <ul style="list-style-type: none"> • Health outcomes that matter to patients • Experiences of receiving care • Experience of providing care • Efficiency and effectiveness of care 					
Relevant LHD/SN Plans					
Staging or timing of initiatives related to this Priority Focus Area <i>e.g., Years 1-2, 3-5, 5-10</i>					
Planning assumptions or external interdependencies <i>e.g., Issues that are outside the LHD/SNs direct control which may impact implementation of the proposed changes.</i>					

PRIORITY FOCUS AREAS AT A GLANCE

INFORMATION	PRIORITY NAME:				
<p>Target Population <i>Outline:</i></p> <ul style="list-style-type: none"> • <i>Who will benefit / target population</i> • <i>Consideration given to potential impact on Aboriginal and Torres Strait Islander communities</i> • <i>Consideration given to other impact on other key population groups</i> 					
<p>NOTE: <i>Examples of relevant LHD/SN plans include strategic plans, service plans, workforce plan, Aboriginal action plan, Asset Management Plan, Strategic Asset Management Plan, virtual care plan, ICT plan, environmental sustainability plan, financial plan. Include date published, coverage period and relevance to the Priority Focus Area.</i></p>					
<p>*NSW Health Cluster Outcome Business Plan is under review, please check for updates in early 2023.</p>					

SECTION 1: ELEMENT – CASE FOR CHANGE

PRIORITY FOCUS AREA	PRIORITY NAME:				
Problem/Opportunity <i>Business need, problem or opportunity this priority focus area addresses.</i>					
Objectives <i>Outline how this Priority Focus Area will address those challenges and opportunities.</i>					
Service Change (Actions) <i>Outline:</i> <ul style="list-style-type: none"> • <i>What will be done differently e.g., change from business as usual.</i> <i>Activity to meet the objectives and output/benefits.</i>					
Outputs <i>High level statement of the tangible product resulting from the service change e.g., additional activity, new infrastructure</i>					
Benefits / Outcomes <i>High level statement of:</i> <ul style="list-style-type: none"> • <i>Intermediate to long term impact resulting from the service change e.g., accessible services.</i> • <i>Key indicators linked to the expected benefits and Value Based Healthcare.</i> 					

SECTION 1: ELEMENT – SERVICE MODEL

INFORMATION	PRIORITY NAME:				
Service Model <i>Outline:</i> <ul style="list-style-type: none"> • <i>The proposed service model</i> • <i>The evidence base/rationale for the proposed model</i> 					
Illness prevention, health promotion, population health, early intervention <i>Outline consideration given to opportunities for new or changed arrangements for these factors as part of this Priority Focus Area.</i>					
Out of Hospital Care <i>Outline consideration given to opportunities for new or changed arrangements for care in non-hospital settings as part of this Priority Focus Area.</i>					
Virtual care <i>Outline consideration given to opportunities for use of virtual care as part of this Priority Focus Area e.g., patient interactions (consultations), patient monitoring (remote collection of patient health data), care planning and coordination and Clinical collaboration.</i>					
Role Delineation <i>Outline any changes to role delineation related to this Priority Focus Area.</i>	Changes to role delineation Y/N Outline:				

SECTION 1: ELEMENT – SERVICE MODEL

INFORMATION	PRIORITY NAME:				
<i>If yes, complete Role Delineation Report and attach as an Appendix.</i>					
Note: LHD/SN should review Role Delineation (RD) levels recorded and update RD levels on CaSPA before generating a report.					

SECTION 1: ELEMENT – NETWORKING / PARTNERSHIPS WITHIN THE LHD / SN

INFORMATION	PRIORITY NAME:				
Networking within LHD/SN <i>New or changed service networks or referral pathways in the LHD/SN.</i>					
Networking with other local health service providers <i>New or changed networking with General Practitioners, affiliated health organisations, other private health service providers, Primary Health Care Networks; Aboriginal Community Controlled Health Services and others.</i>					
Networking with other local service providers <i>New or changed networking with NGOs, residential aged care and other sectors.</i>					
Health Place/Precinct considerations <i>Outline consideration given to:</i> <ul style="list-style-type: none"> • <i>Place based and/or the precinct context</i> • <i>Potential opportunities e.g. co-location, shared buildings/services</i> 					
<p>NOTE: Health Places are centred around a health building with mainly local influence, which contributes to and reflects the overall character, public amenity, and liveability of a local area. Examples of health places include ambulance stations, community health centres and youth health centres. Health Precincts have health assets as anchors, and are co-located with other services and organisations, with a focus on innovation and leading practice in healthcare and well-being. Health precincts may include public health services, private health services, community and other government services, a medical school and research institutes. The Health Infrastructure Precincts team can offer assistance. Please contact HI-precincts@health.nsw.gov.au</p>					

SECTION 1: ELEMENT – NETWORKING / PARTNERSHIPS WITH OTHER HEALTH SERVICE PROVIDERS AND ENTITIES

INFORMATION	PRIORITY NAME:				
<p>Networking with other LHDs/SNs related to the Priority Focus Area <i>Outline:</i></p> <ul style="list-style-type: none"> • <i>New or changed networking / referral arrangements</i> • <i>Potential impact/s from those changes e.g., patient flows</i> • <i>Discussions with affected LHDs/SNs</i> • <i>Outline considerations given to working with/or supporting other rural health services (metropolitan and larger rural LHDs)</i> 					
<p>Cross-border services or health services in other States related to the Priority Focus Area <i>Outline:</i></p> <ul style="list-style-type: none"> • <i>New or changed networking/referral arrangements</i> • <i>Potential impact/s from those changes</i> • <i>Discussions with affected services</i> 					
<p>Education, Teaching and Research <i>Outline new or changed opportunities for education, teaching and research.</i></p>					

SECTION 1: ELEMENT – ENVIRONMENTAL SUSTAINABILITY / CLIMATE RISK

INFORMATION	PRIORITY NAME:				
<p>Resource management. <i>Outline opportunities to: manage resources sustainably/reduce direct environmental impacts related to this Priority Focus Area e.g. Energy, Water, Waste, Medicines, Food.</i></p>					
<p>Transport and logistics: <i>Outline opportunities to reduce the environmental impact of transport and logistics related to this Priority Focus Area.</i></p>					
<p>Building, design and asset management Outline: <ul style="list-style-type: none"> • <i>Sustainability issues/opportunities as part of any potential refurbishment or renewal of existing assets linked to this Priority Focus Area</i> • <i>Opportunities to promote efficiency related to this Priority Focus Area e.g. electrification of assets</i> </p>					
<p>Supply chain and procurement <i>Outline opportunities to reduce the waste and carbon emissions in supply chains and procurement relating to this Priority Focus Area.</i></p>					
<p>Physical climate risks related to Priority Focus Area. <i>Outline key risks and potential mitigation strategies relating to this Priority Focus Area.</i></p>	<p>Key risks: Potential risk mitigation strategies:</p>				

SECTION 1: ELEMENT – ENVIRONMENTAL SUSTAINABILITY / CLIMATE RISK

INFORMATION	PRIORITY NAME:				
Health Risks <i>Outline any climate related health risks this Priority Focus Area may address.</i>					
Financial implications <i>Outline the anticipated resource implications of environmental opportunities or requirements linked to this Priority Focus Area e.g., introduction of recycling systems, food ordering system.</i>					
<p>NOTE: The NSW Government has net zero emissions targets. The NSW Health Climate Risk and Net Zero Position Statement is available on the NSW Health website. Work is already underway in LHDs and health organisations reducing emissions, waste and water usage. Future Health recognises the link between health and wellbeing. Climate risk includes physical risks (environmental events like floods or storms) and transition risks (relating to changes in policy and new technologies e.g., renewable energy).</p>					
<p>NOTE: If the LHD/SN has an Environmental Sustainability/Climate Risk Plan you may reference the document including any relevant targets and attach the Plan as an Appendix.</p>					

SECTION 1: ELEMENT – CAPITAL

INFORMATION	PRIORITY NAME:				
Capital requirements linked to this priority <i>Describe the capital requirements if applicable.</i>	Capital Requirements: Y/N Describe if applicable:				
Rationale why a capital solution is required					
Optimisation of existing assets <i>Outline consideration given to optimisation of capacity across the LHD/SN.</i>					
Operational efficiencies <i>Outline consideration given to optimising operational efficiencies e.g., flexible use of treatment spaces, service availability (operational hours, clinics/week).</i>					
Impact of recent relevant capital redevelopments (delete if not applicable) <i>Outline consideration given to the impact of capital redevelopments recently completed or funded capital projects in progress or planning.</i>					
Summary of options considered (delete if already covered above).					
Note: You may reference relevant sections in your Asset Management Plan/Strategic Asset Management Plan or use Table 1: Qualitative analysis of the long-list to generate options in the Early Options Analysis Guide. If using Table 1 in the Early Options Analysis Guide, attach this table as an Appendix and refer to the Appendix. Include a Role Delineation (RD) report for sites impacted by changes to RD, sites included in the capital priorities, and any services that are networked with to access higher level services – attach RD report as an Appendix. LHD/SN should review RD levels recorded and update RD levels on CaSPA before generating a report.					

SECTION 1: ELEMENT – IMPACT ON SUPPORT AND ENABLING SERVICES OR POTENTIAL OPPORTUNITIES

INFORMATION	PRIORITY NAME:				
NSW Health Pathology or other pathology service provider	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N
eHealth or other information technology provider <i>e.g., impact of virtual care models</i>	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N
NSW Ambulance Service	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N
HealthShare NSW or other service provider Note: High level information only, more detail can be provided in local plans.	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N

SECTION 1: ELEMENT – IMPACT ON SUPPORT AND ENABLING SERVICES OR POTENTIAL OPPORTUNITIES

INFORMATION	PRIORITY NAME:				
Patient Transport/Travel	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N
Other (please specify)	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N	Potential impact: Y/N Outline impact: Opportunities: Has this been discussed with the entity: Y/N

SECTION 1: ELEMENT – WORKFORCE

INFORMATION	PRIORITY NAME:				
Workforce impacts Outline likely impacts e.g., additional staff requirements, new staff roles.					
Workforce risks Outline workforce risks and their likelihood e.g., <ul style="list-style-type: none"> • Workforce capacity • Workforce availability • Workforce affordability • Workforce capability • Workforce sustainability 	Outline Risks: Likelihood:				
Strategies to mitigate risks Outline potential strategies to mitigate workforce risks.					
Financial implications Outline the additional resource implications e.g., additional staff, recruitment and retention incentives, staff overnight accommodation linked to this Priority Focus Area.					
Note: Consider any workforce issues that could impact on ability to provide the proposed new services/service changes related to Priority Focus Areas outlined above. LHDs/SNs may use the NSW Enterprise Risk Management Framework to assess likelihood of risk http://internal.health.nsw.gov.au/cgmr/rmra/risk_management/1_risk_matrix.pdf					

SECTION 1: ELEMENT – OTHER RESOURCE IMPLICATIONS

INFORMATION	PRIORITY NAME:				
Digital Infrastructure <i>Outline any digital infrastructure requirements related to this Priority Focus Area.</i>					
Other additional costs <i>Outline other anticipated financial implications associated with this Priority Focus Area e.g., consumables.</i>					
Financial offsets (if applicable) <i>Outline opportunities for savings, divestments e.g., low value care, reinvestments.</i>					

SECTION 2: INVOLVEMENT IN DEVELOPMENT OF PRIORITY FOCUS AREAS

SECTION/UNIT <i>Examples are given of potential leads who provide specialised input in plan development and oversight. Amend as required. It is anticipated the leads would be involved in developing the plan, evaluation and monitoring.</i>	INVOLVED	NAME
Service Planning Unit: Facilitate or provide input in the development of the Plan.	Y/N	
Performance Unit: Develop activity targets; monitor performance to ensure targets are achieved.	Y/N	
Workforce: Identify current and future workforce opportunities and strategies associated with the Plan; monitor, evaluate and refine strategies to ensure expected outcomes are realised.	Y/N	
Telehealth or Virtual Care Manager: Identify virtual care opportunities and strategies associated with the Plan; monitor, evaluate and refine strategies to ensure the expected outcomes are realised.	Y/N	
Population Health/Health Promotion Lead: Identify population health needs, opportunities and strategies associated with the Plan; monitor, evaluate and refine strategies to ensure expected outcomes area realised.	Y/N	
Chief Information Officer: Identify ICT needs, opportunities and strategies associated with the Plan; monitor, evaluate and refine strategies to ensure expected outcomes are realised.	Y/N	
Finance Lead: Evaluate current actual and budgeted costs and future fiscal environment; identify cost opportunities and strategies associated with the Plan; monitor, evaluate and refine strategies to ensure expected outcomes are realised; escalate financial risks to the LHD/SN executives or Board.	Y/N	
Place and Partnerships Lead: Develop place-based vision, coordinate planning for strategic and commercial partnerships with industry, universities, and education institutions. Identify opportunities and strategies for partnerships with other government and non-government organisations, consumers, and carers associated with the Plan; monitor, evaluate and refine strategies to ensure expected outcomes are realised.	Y/N	
LHD/SN Sustainability/Environmental Lead: Identify environmental opportunities and strategies associated with this Plan; monitor, evaluate and refine strategies to ensure expected outcomes are realised; measure, monitor and report on progress aligned with NSW Health's net zero trajectory.	Y/N	
Climate Risk Lead: Climate risk assessment for the LHD/SN, develop an adaptation plan, review, monitor, evaluate the implementation of the adaptation plan.	Y/N	
LHD/SN Asset Management Lead: Identify opportunities and strategies to maintain or better use existing assets, repurpose existing assets or identify requirements for new assets.	Y/N	
LHD/SN Rural Health Lead: Identify opportunities and strategies to improve access/service provision to rural, regional, and remote residents associated with the Plan; identify opportunities to support rural, regional, and remote health services and health service providers; monitor, evaluate and refine strategies to ensure expected outcomes are realised	Y/N	
LHD/SN Capital Lead: Identify opportunities and strategies to maintain, make better use of existing assets, or repurpose existing assets prior to strategies recommending new assets; monitor, evaluate and refine strategies to ensure expected outcomes are realised	Y/N	

SECTION 3: CONSULTATION

List key groups consulted in the development of the Priority Focus Areas. The following table gives examples and is not exhaustive. Add other groups as appropriate.

WHO	Priority Name	Comment				
Clinical and non-clinical staff	Y/N	Y/N	Y/N	Y/N	Y/N	
LHD/SN Advisory Group	Y/N	Y/N	Y/N	Y/N	Y/N	
Patients, Carers and/or Consumer representatives	Y/N	Y/N	Y/N	Y/N	Y/N	
Aboriginal Community Controlled Health Services	Y/N	Y/N	Y/N	Y/N	Y/N	
Other Aboriginal Groups	Y/N	Y/N	Y/N	Y/N	Y/N	
Primary Health Network	Y/N	Y/N	Y/N	Y/N	Y/N	
HealthShare NSW	Y/N	Y/N	Y/N	Y/N	Y/N	
eHealth NSW	Y/N	Y/N	Y/N	Y/N	Y/N	
NSW Health Pathology	Y/N	Y/N	Y/N	Y/N	Y/N	
Other LHDs/SNs	Y/N	Y/N	Y/N	Y/N	Y/N	
Health Infrastructure	Y/N	Y/N	Y/N	Y/N	Y/N	
Agency for Clinical Innovation	Y/N	Y/N	Y/N	Y/N	Y/N	
NSW Ambulance	Y/N	Y/N	Y/N	Y/N	Y/N	
Non-government organisations	Y/N	Y/N	Y/N	Y/N	Y/N	
Local Councils	Y/N	Y/N	Y/N	Y/N	Y/N	
Other stakeholders	Y/N	Y/N	Y/N	Y/N	Y/N	

APPENDICES

Include documents or other information referenced in the body of the document.

DOCUMENT	
Aboriginal Health Impact Statement	
Role Delineation Report	

Version History

Version	Date	Notes	Reviewed by

Date of Next Review

Contact Service and Capital Planning Unit
NSW Ministry of Health for more information.

