



Northern Sydney  
Local Health District

# Safety and Quality Account

2022-2023 Report

2023-2024 Future Priorities



## Acknowledgement of Country

Northern Sydney Local Health District acknowledges the traditional custodians of the lands on which our health services are located, the Guringai and Dharug peoples, and we honour and pay our respects to their ancestors.

We acknowledge and pay our respects to all Aboriginal and Torres Strait Islander peoples and to Elders past and present.

We acknowledge that past, current and future Aboriginal and Torres Strait Islander peoples are the continuing custodians of this country upon which we live, work and meet and that it is from their blood, courage, pride and dignity that we are able to continue to live, work and meet on this ancient and sacred country.



This account provides examples of NSLHD achievements and activities that have been introduced in the financial year 2022-2023, aligned to the six dimensions of healthcare quality, the National Safety and Quality Health Service Standards (NSQHS) and the NSLHD Strategic Plan 2022-2027.



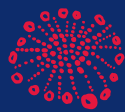
**NATIONAL SAFETY AND QUALITY HEALTH SERVICE STANDARDS**



**NSLHD STRATEGIC PLAN 2022-2027**

 Patients and carers are our partners in their healthcare	 Safe, high quality connected care
 Keeping people healthy and well	 Our staff are engaged and well supported
 Research, innovation and digital advances inform and improve the delivery of patient care	 Our services are sustainable, efficient and committed to planetary health

The Sea urchin design by Ms Tanya Taylor, a Worimi artist (mid-north coast of New South Wales) has been used in this Account to highlight Aboriginal and Torres Strait Islander Health related initiatives.



Reproduced with permission from National Safety and Quality Health Service Standards User Guide for Aboriginal and Torres Strait Islander Health publication, developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). ACSQHC: Sydney 2017.

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**OUR VALUABLE CONTRIBUTORS**

Thank you to all the consumers and staff who have contributed to this Account. Reflection takes time, effort and dedication, and we are grateful for all those who have shared their experience and insights in the creation of this year's Safety and Quality Account. This resource has been co-designed and approved by consumers and carers.



# Our Commitment to Safety and Quality

## Exceptional Care, Leaders in Research, Partners in Wellbeing.

NSLHD's vision, Exceptional Care, Leaders in Research, Partners in Wellbeing as outlined in the NSLHD Strategic Plan 2022-2027, shapes NSLHD's commitment to providing safe, high-quality personalised healthcare and outcomes that matter most to our patients, carers, consumers.

# Message from the Board Chair and Chief Executive



**Trevor Danos AM**  
NSLHD Board Chair

The delivery of safe, high-quality healthcare for our community remains our top priority. Every day, our people in NSLHD aim to deliver the very best, safe, effective, and person-centred care. Alongside our service delivery partners, NSLHD will continue to improve the way we deliver this care.

The 2023 NSLHD Safety and Quality Account allows our district to reflect and showcase our achievements and performance against safety and quality targets over the 2022-2023 financial year and highlight our future plans for the next financial year.

In this Account, you will read about several Safety and Quality initiatives introduced at NSLHD in recent years that have led to improved outcomes for patients, staff, and our community.

More broadly, we would also like to share some key strategic initiatives introduced that impact on the delivery of safe and high-quality care and to ensure our healthcare service is well-prepared to respond to and meet the complex healthcare needs of the NSLHD community.

Our current and future safety and quality improvement activities align with the priorities set out in the NSLHD Strategic Plan and are underpinned by the National Safety and Quality Healthcare Standards.

Planetary Health remains a key priority for our district and we are incredibly proud to be leading the way on the journey to Net Zero.

We will continue to build on our learnings and achievements by encouraging innovation, supporting the wellbeing and development of our staff, and designing models of care with our community that will improve patient and carer experiences.

We will continue to develop a culture that engages and empowers our people, prioritises diversity, equity, inclusion and belonging, and ensure all staff members can be themselves wherever they work within NSLHD.

We are proud of our many achievements and acknowledge and offer our appreciation for the contribution and compassion shown by our staff, volunteers and community advisors as they continue to work collaboratively to enrich the lives of our patients, consumers, residents and communities.

Supported by the NSLHD Board's Attestation Statement (see Appendix) and endorsed by the NSLHD Board, this Account describes our district's collective commitment to continue to improve our services to ensure we are providing the best possible care to patients, consumers and their families and carers, who come into contact with our hospitals and services every day.



**Adjunct Professor  
Anthony Schembri AM**  
NSLHD Chief Executive

OUR COMMITMENT TO SAFETY AND QUALITY

# Key Highlights (2022-2023)

A few key achievements that have improved the quality of health service provision are highlighted below. Further achievements aligned with our strategic outcomes over the 2022-2023 financial year can be found on page 55.



### The launch of the NSLHD 2022-2027 Strategic Plan

Describes the district’s key priorities and future goals to deliver personalised healthcare and outcomes that matter most to our patients, carers, and consumers. More on page 13.



### New health services providing specialised care

The Adolescent and Young Adult Hospice (AYAH) in Manly is the first Australian facility to provide dedicated specialised care and respite to adolescents and young adults with life-limiting illnesses in a hospice environment. AYAH welcomed its first patient in early 2023. More on page 41.

The Concussion Clinic at Royal North Shore Hospital is a specialised multidisciplinary service helping patients with post-concussion symptoms return safely to school, study, work and sport. More on page 46.

### A strong workplace safety culture

Initiatives that look to create psychologically safe spaces, enable critical reflection and enhance teamwork and communication have led to improved staff well-being and greater collaboration, creativity and innovation, translating to better quality care for our patients and consumers. Overall, **73 per cent of staff rate patient safety as ‘very good’ or ‘excellent’ and 89 per cent would recommend friends or relatives to be treated by our health service.** For the NSLHD staff, all factors of safety culture have improved since 2021.

### Enhanced service models to manage patients safely in the community

NSLHD’s Virtual Care Service has extended its scope to care for an extended range of acute conditions to reduce potentially preventable hospital presentations and provide Out of Hospital care to patients at home or close to home. It will continue to prioritise Emergency Department Alternatives and Hospital Substitution models of care. More on page 49.

The number of services that have re-engineered how they deliver tailored patient care through telehealth continues to increase. Examples include the RNSH’s Close to Home Diabetes Program and Spinal Plastics Service, which offer integrated joint virtual case conferences, connecting acute and community services with patients. More on pages 21 and 43.



### Capitalising on redevelopment opportunities to improve the patient experience

A vast consultation drive with the local community has informed the design of the future Ryde hospital.

Engagement with future consumers of the Adolescent and Young Adult Hospice (AYAH) at Manly provided an opportunity to inform AYAH’s unique care and service delivery model.

Hornsby Ku-ring-gai hospital has installed extensive works to create a culturally welcoming environments to ensure positive experiences of care.



### Reducing carbon footprint and the net zero pathway

The calculation of NSLHD’s baseline carbon footprint and identification of emissions hotspots has highlighted emission reduction opportunities and model a pathway to net zero emissions by 2035. Clinicians working across NSLHD have put up their hands to focus on sustainability initiatives as part of an Australian first net zero program.

The Anaesthetic Greenhouse Gases initiative show sustained gains with \$344,087 direct annual cost saving and \$105,048 additional global social cost saving over the last financial year, from the judicious use of Anaesthesia. More on page 51.

# About NSLHD



Northern Sydney Local Health District is one of the leading health services in Australia providing high-quality healthcare to a population of nearly a million people.

The district covers a region of approximately 900 square kilometres between Sydney Harbour and the Hawkesbury River.

Clinical services in NSLHD are organised across four acute hospitals Royal North Shore Hospital, Hornsby Ku-ring-gai Hospital, Ryde Hospital and Northern Beaches Hospital, one sub-acute hospital at Mona Vale and an Adolescent and Young Adult Hospice at Manly. There are two clinical directorates in NSLHD; Mental Health Drug and Alcohol, which includes Macquarie Hospital; and Primary and Community Health.

For more information about the types of services provided across our hospitals and services, visit <https://www.nslhd.health.nsw.gov.au/Services>

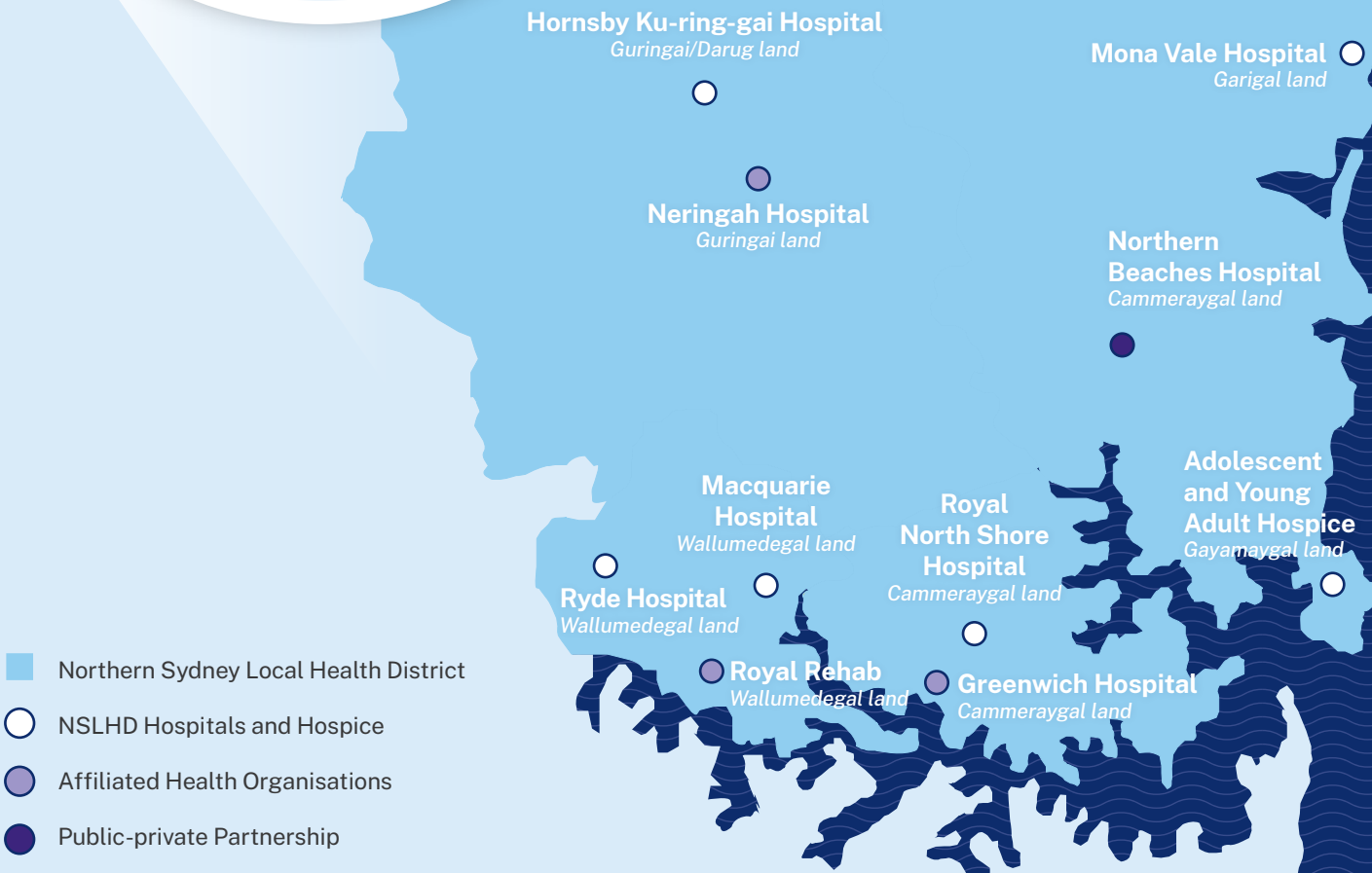
Additional services in NSLHD are provided through arrangements with Affiliated Health Organisations including HammondCare (sub-acute palliative care, ambulatory and home-based rehabilitation and older persons mental health services) and Royal Rehab (specialist brain and spinal injury rehabilitation).

Within our hospitals and services, clinical networks play an important role in establishing and overseeing standards of care, providing leadership with respect to research and innovation, and providing advice on service development, resource allocation, workforce requirements, and configuration of services. Our clinical networks include:

- Maternal, Neonatal and Women's Health
- Children and Young People
- Acute and Critical Care Medicine
- Chronic and Complex Medicine
- Surgery and Anaesthesia (including Cardiothoracic and Vascular Health)
- Musculoskeletal Health, Integumentary and Trauma
- Neurosciences
- Cancer
- Supportive and Palliative Care
- Rehabilitation and Aged Care

ABOUT NSLHD

# Our District





# Our Community

In 2023,  
there were an estimated

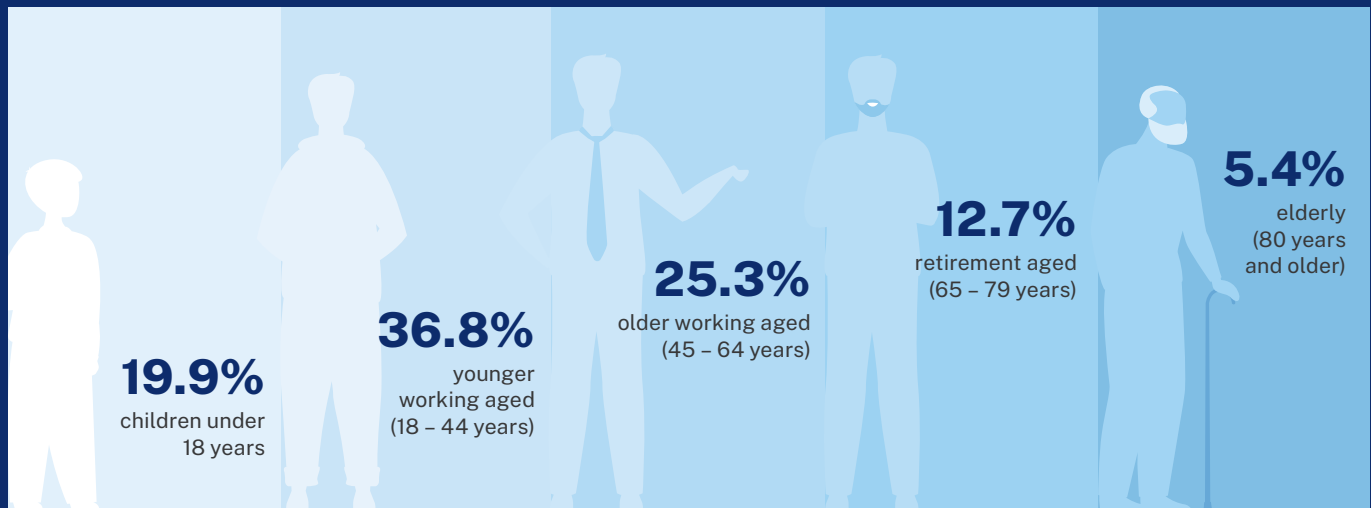
**958,777**  
**residents**

in NSLHD (11.7% of the NSW population).

By 2033, the population of NSLHD  
is expected to reach

**1,029,552**  
**residents**

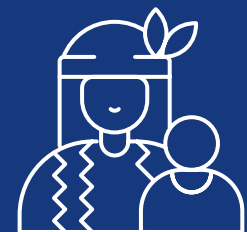
(passing **1 million** residents in 2029).



## NSLHD is a diverse population

**4,412**

Aboriginal and Torres Strait Islander  
people live in NSLHD, representing  
**0.5%** of the population



**35%**

of residents speak a  
language other than  
English of which  
**14%** report having  
limited or no  
proficiency  
in English.



**Top 5 languages** other  
than English spoken by  
NSLHD residents are:

**Mandarin,  
Cantonese,  
Korean, Hindi  
and Spanish.**



# Our Workforce

As of December 2022, the district has a diverse, skilled and dedicated workforce of more than

## 14,250 staff

(total headcount of all workers) committed to providing high-quality safe patient care to the community:



**5,513**

Nursing & Midwifery workforce



**2,340**

Medical workforce



**1,562**

Allied Health workforce

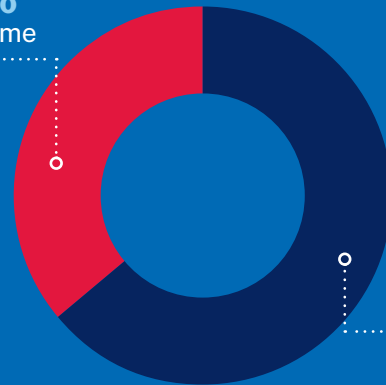


**4,835**

Other workforce

## Employee status

**36%**  
Part-time



**64%**  
Full-time

**67%**  
Permanent staff

**17%**  
Casual workers

**16%**  
Temporary/contract workers

## The 2022 People Matter Employee Survey (PMES) results indicate:

**28%**

speak a language other than English at home



**20%**

of staff are 55 years or older



**6%**

of staff identify as lesbian, gay, bisexual, transgender, gender diverse, intersex or (increase from **5%** in 2021)



**1%**

of staff identify as Aboriginal and/or Torres Strait Islander



**6%**

of staff identify as having a disability (increase from **3%** in 2021)



# Our Care (FY 2022-2023)

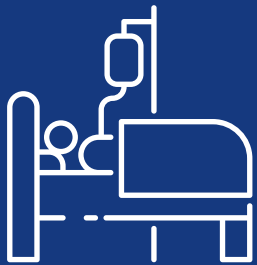
## Emergency department activity

**229,322**

Emergency Department presentations across  
**4 acute hospitals**



## Admitted hospital activity



**53,439**

Acute adult medical admissions

**25,362**

Surgical admissions (adult and paediatric)

**4,313**

Acute mental health admissions (adult and paediatric)

**4,254**

Babies delivered

## Non-admitted and community health activity



**690,648**

Outpatient occasions of service

**336,827**

Mental health community contacts

**347,175**

Medical outpatient consultations

**139,800**

Home nursing visits

# Planning for Safety and Quality



**Clinical and corporate governance practices are embedded into our culture.**

NSLHD operates within the broader National and State health policy frameworks and aligns with national and state priorities.

In setting priorities for safety and quality, NSLHD considers both our communities' local needs, risks and trends as well as priorities that arise from key partners such as the [Australian Commission on Safety and Quality in Healthcare \(ACSQHC\)](#), the [Clinical Excellence Commission \(CEC\)](#), the [Agency for Clinical Innovation \(ACI\)](#) and the [NSW Ministry of Health \(MoH\)](#).



**The NSLHD Strategic Plan 2022-2027 was launched in the second half of 2022, providing a framework for how the district delivers care over the next five years.**

Over 800 staff, patients, carers, consumers, members of the local community, clinical leaders, and key partners helped shape the development of the strategic plan, which defines the key priorities and future goals of the district. Aligning closely with the *NSW Health Future Health: Strategic Framework 2022-2032*, the key priority for NSLHD is to deliver personalised healthcare and outcomes that matter most to our patients, carers, and consumers.

# NSLHD Strategy Map

## VISION

Exceptional Care, Leaders in Research, Partners in Wellbeing

## PURPOSE

Transforming healthcare through innovation, research and partnerships, for our patients, community and staff



**Patients and carers are our partners in their healthcare**



**Safe, high quality connected care**



**Keeping people healthy and well**



**Our staff are engaged and well supported**



**Research, innovation and digital advances inform and improve the delivery of patient care**



**Our services are sustainable, efficient and committed to planetary health**

The *NSLHD Strategic Plan 2022-2027* is supported by a number of frameworks and operational plans to guide priorities and actions to deliver on NSLHD's strategic objectives. The key planning documents that influence and improve the delivery of safe, high quality and person-centred care include:

- The *NSLHD Corporate Governance Framework 2023* outlines the key frameworks and activities to ensure the appropriate governance, accountability and risk management in all NSLHD operations.
- Clinical governance is acknowledged as an integrated component of corporate governance. The *NSLHD Clinical Governance Framework 2022-2025* provides a structure to guide NSLHD's priorities and actions to assure and improve safety and quality. The hospitals and services develop and work to meet local safety and quality plans that incorporate the NSLHD Clinical Governance Framework principles and are aligned with the *NSLHD Strategic Plan 2022-2027*.

A comprehensive Clinical Governance committee structure is in place at the District-level to support patient safety and clinical quality. The hospitals and services ensure that local safety and quality committees are linked to, and report to, the District's peak safety and quality committees. (See Table 1)

- The *NSLHD Partnering with Consumers Framework 2021-2026* is a reaffirmation of our commitment to consumer engagement, further embedding a culture of inclusive, integrated and valued consumer partnerships. The Framework outlines key priorities for action, co-designed with consumer advisors and guides the future of consumer engagement and the patient, carer and staff experience in NSLHD. The Framework aligns closely with the *NSW Health Elevating the Human Experience – Guide to Action* which provides a roadmap for Local Health Districts to coordinate a strategic approach for the patient experience.
- A revised *NSLHD Clinical Services Plan* is in development, with an estimated date of release at the end of 2023. The NSLHD Clinical Services Plan details the priorities, strategic directions and recommendations for clinical services across NSLHD, individual hospitals and directorates, and clinical networks.
- The *NSLHD Digital Strategy 2021-2026* is a roadmap to achieve NSLHD's vision to deliver affordable and accessible patient-centred care, improve the overall health of our communities, engage and develop our workforce and ensure our organisation is agile and insights-driven fueled by real-time access to data, by effectively leveraging technology.
- The *NSLHD People Plan 2022-2027* outlines how the district will deliver on our Strategic Outcome: Our Staff are Engaged and Well Supported.
- The *NSLHD Virtual Care Strategic Framework (in development)* establishes a vision and guiding principles for developing virtual care initiatives in NSLHD. In March 2022, various stakeholders were consulted to consider the most appropriate virtual care operating model. This model will help to better coordinate, enhance and support virtual care initiatives across NSLHD. In line with the District's Strategic Priorities, the Virtual Care Service has identified its priorities as Emergency Department Alternatives and Hospital Substitution models of care.
- NSLHD has a strong research culture and continues to implement the actions outlined in the *NSLHD Research Strategy*. A draft of the refreshed NSLHD Research Strategy is in development. It will build on initiatives to strengthen our existing research portfolio and ensure the translation of research outcomes into clinical care, policy and decision-making. Embedding clinical trials into health service provision is a focus for NSLHD, with the commencement of the National Clinical Trials Governance Framework (see page 17).

# Strategic Plans and Frameworks



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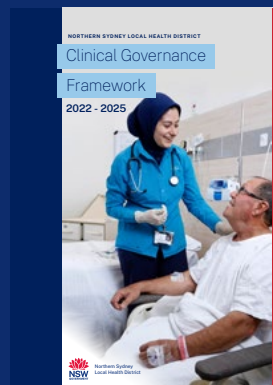
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**Table 1. Key committees supporting safety and quality**

Committee	Levels	Functions
<b>Consumer Committees</b>	Board Hospital Service	The Board Consumer Committee ensures there's a diverse consumer and community input to organisational decision-making, strategy and service design and delivery. It links to similar committees at each hospital and service. Consumer representatives also participate on various other committees at the district, facility and service levels.
<b>Aboriginal Health Advisory Committee</b>	District Level	For Aboriginal and Torres Strait Islander people: <ul style="list-style-type: none"> <li>• Advocate for their health and wellbeing</li> <li>• Develop and oversee the strategy to meet their comprehensive care needs</li> <li>• Support the co-design of person-centred models of delivery of care</li> </ul>
<b>Healthcare Quality Committees</b>	Board Hospital Service	The Health Care Quality Committee (HCQC) identifies opportunities to continually improve the quality of services and all aspects of care. This is achieved through defining, overseeing, measuring, monitoring, improving and reporting on structure, processes and assurance for effective, consistent and best practice patient safety and clinical quality and, where relevant, having regard to National Safety and Quality Healthcare Services Standards. The HCQC links to similar safety and quality committees.
<b>Clinical Councils</b>	District Hospital Service	Clinical Councils, established under the NSLHD By-Laws, facilitate collaboration with clinicians ensuring effective patient care and quality issues and clinical priorities are addressed.
<b>Audit and Risk Committee</b>	Board District Hospital Service	The Board Audit and Risk Committee (BARC) oversees and monitors the governance, risk and control framework, including external accountability requirements.  The Finance Risk and Performance (FRAP) Committee monitors and advises on financial performance, asset management, major contracts, risk and procurement.  Monitoring and oversight of risk occurs at all levels by the Executive Risk Committee and hospital and service Risk Committees.
<b>Accreditation and specific standards committees</b>	District Hospital Service	The National Safety and Quality Standards Committee and other specific committees including: Drug and Therapeutics (Medication Management), Infection Prevention and Control (Preventing and Controlling Infections) and Patient Blood Management (Blood Management) provide oversight for accreditation to the National Standards.
<b>Research Committee</b>	Board District	The Research Innovation and Technology (RIT) Committee was established in 2023 and oversees the governance of research, innovation and technology and ensures that it complements clinical care. The RIT Committee will engage and coordinate with the NSLHD Chair of Research and with NSLHD's university and other research partners to drive the delivery of the NSLHD Research Strategy.



# Accreditation to the National Safety and Quality Health Service Standards



## 2nd edition (2021)

In August 2022 and June 2023, Primary and Community Health, Mona Vale Hospital and its new Adolescent and Young Adult Hospice (AYAH) service were respectively assessed against the *National Standards 2nd edition (2021)*<sup>1</sup>. The Australian Council of Healthcare Standards (ACHS) Assessors provided very positive feedback for these services:

“ PACH provides safe high calibre community-based services led by a committed and well-informed Board, District Executive and PACH Executive Managers. The Assessors noted very solid governance systems, inclusive of the organisational and committee structures as well as the well-established clinical leadership structure. The inclusive, kind, and respectful culture consistently evident throughout the week-long survey, was impressive.

“ Mona Vale Hospital and AYAH have well-engaged teams providing quality care to consumers. A culture of quality improvement is embedded in the organisation through ongoing projects.

In addition, Mona Vale was assessed against the new National Clinical Trials Governance Standards with a positive outcome.

NSLHD continues to be proud to hear the high quality of care provided to our patients recognised by the Assessors.

From July 2023, NSLHD will transition from its announced assessments to mandatory short notice assessments as per the requirements of the Australian Commission on Safety and Quality in Health Care (ACSQHC) for all Australian Health Service Organisations.

The introduction of Short Notice Assessments will mean that NSLHD's services will receive one full business day notification of an onsite Assessment. The intention of the short notice assessment program is to ensure the assessment outcome reflects day-to-day practice, identifies gaps and supports health services to continue to improve safety and quality systems and processes<sup>2</sup>. All NSLHD Facilities and Services are preparing for a smooth transition to Short Notice Assessments.

## National Clinical Trials Governance Framework

The Australian Commission on Safety and Quality in Health Care launched the *National Clinical Trials Governance Framework* in May 2023. The Framework is based on the existing NSQHS Standards, in particular, Standard 1: Clinical Governance and Standard 2: Partnering with Consumers. It lists the actions and suggested strategies for health services to ensure that clinical trials are conducted in a safe environment and in a high-quality manner for improved health outcomes for patients and the community.

NSLHD established a Clinical Trials Governance Framework Working Group to support hospitals and services meet accreditation to the standards as set out in the Framework. The group has completed identification of gaps, developed and supported the implementation of action plans for our hospitals and services meet accreditation.

1 Australian Commission on Safety and Quality in Health Care (ACSQHC). (2021) *National Standards 2nd edition* Available from <https://www.safetyandquality.gov.au/standards/nsqhs-standards>

2 Australian Commission on Safety and Quality in Health Care (ACSQHC). (2022) *Fact Sheet 17: Short notice accreditation assessment*. Available from <https://www.safetyandquality.gov.au/publications-and-resources/resource-library/fact-sheet-17-short-notice-accreditation-assessment>

# Improving the Patient and Carer Experience



**When we improve the voice and equity of all consumers, we drive innovation and the integration of services to deliver the very best patient and carer experience.**

# Patient Feedback, Experience and Outcomes



Seeking and monitoring feedback on the patient experience and care outcomes is essential for identifying performance issues, incidents, and risks and monitoring the standard of care. It also assists in determining whether the care meets the needs and preferences of the patient, consumer, families, and carers. To continuously improve patient experience and outcomes, NSLHD collects patient feedback, experience and outcomes from a range of different sources, including compliments and complaints, patient stories, patient and consumer surveys (e.g., Real-time Patient Experience Survey) and Patient Reported Measures.

## Patient Reported Measures

NSLHD recognises that capturing direct, timely patient feedback on their experiences and outcomes of healthcare is critical. Patient-reported measures (PRMs)<sup>3</sup> capture information via surveys, which ask patients about their healthcare experiences and the outcomes of their care.

The state-wide Patient Reported Measures (PRMs) Program continues to expand across the District. It aims to develop a sustainable model of collecting patient reported outcome measure (PROM), and patient reported experience measure (PREM) data for care planning, shared decision-making with patients, and quality improvement.

As of June 2023, 1511 patients have consented to participate in the PRMs Program. These patients completed 4372 PROM surveys and 656 PREM surveys. Seven additional locations went live with the PRMs Program over the past year, including:

- Chronic Wound Clinics at Hornsby Hospital, Mona Vale Hospital & Brookvale Community Health Centre
- Planned Care for Better Health (Chronic and Complex Care Coordination)
- Ryde Hospital, Ward 3
- Ryde Hospital, Graythwaite Wards 4 and 5

The first inpatient service to go live with the PRMs Program was at Ryde Hospital earlier this year. The PRMs team will continue to work with services to embed the program across the district.

In February 2023, NSLHD and CCLHD were the first Districts in NSW to integrate the Health Outcomes Patient Experience (HOPE) Platform into the electronic medical record (eMR). HOPE is the purpose-built IT solution used to manage the program's online surveys and databases that capture the information provided by patients and consumers. This integration commences 'Phase 2' of the program and is anticipated to improve clinician access to PROM survey results.

<sup>3</sup> Visit <https://aci.health.nsw.gov.au/statewide-programs/prms/about> to find out more about Patient-reported measures.

## IMPROVING THE PATIENT AND CARER EXPERIENCE

## 576 surveys

Outpatient PREM  
results for NSLHD  
to date indicate:

90% ★★★★★

of patients rated the care they received as **very good**

97% ★★★★★

of patients reported they were **always** treated with respect and dignity

94% ★★★★★

of patients reported that health professionals **always** explained things in a way they could understand

88% ★★★★★

of patients reported that their views and concerns were **always** listened to

81% ★★★★★

of patients reported that they were **always** involved as much as they wanted in making decisions about their treatment and care

## 74 surveys

Paediatric PREM  
results for NSLHD  
to date indicate:

88% ★★★★★

of carers rated the care their child received as **very good**

95% ★★★★★

of carers reported that they and their child were **always** treated with respect and dignity

88% ★★★★★

of carers reported that health professionals **always** explained things in a way they could understand

80% ★★★★★

of carers reported that health professionals **always** listened carefully to their views and concerns

92% ★★★★★

of carers reported they **definitely** had confidence and trust in the health professionals treating their child

## Spinal Plastics Service, Royal North Shore Hospital



The Spinal Plastic Service at RNSH manages the largest number of people with existing spinal cord injuries in NSW. The service has demonstrated a significant reduction in repeat referrals from patients in the community from extreme pressure injuries (mostly requiring surgical intervention), meaning hospitalisation is avoided.

In addition to teleconsultation and the introduction of cloud-based wound tissue photography analytics, the service has re-engineered the way they deliver tailored patient care with weekly multidisciplinary clinics and integrated care conferences connecting acute and community services.

Patient-reported outcome measures are discussed with patients to cater for their needs and wants. Health coaching is empowering patients to take control of their health condition.

In 2021

# 70% of patients

avoided hospitalisation and were successfully managed in the community, with an estimated cost savings of **\$1,380,000 annually**.



## Real-time Patient Experience Survey (RTPES)

Following a successful pilot of the Real-Time Patient Experience Survey (RTPES) tool in late 2021, the RTPES was expanded to all NSLHD adult overnight inpatient units from 1 March 2022 (except MHDA, maternity and some vulnerable groups, e.g., victims of domestic violence). The RTPES has been translated into the ten most common languages (other than English) and is sent to patient's mobile phones one-day post-discharge via short message service (SMS).

A two-minute animation video has been developed to demonstrate how the Real Time Patient Experience Survey works and how managers can use the results. The video shows how feedback can be used to respond to patient concerns, communicate results with teams to recognise performance and initiate quality improvement activities when opportunities are identified.

For further information on the Real Time Patient Experience Application, please visit <https://vimeo.com/848180296>.

Northern Sydney LHD | From 01/07/2022 to 30/06/2023



This graph shows the Net Promoter Score at NSLHD over the 22-23 financial year. The higher the score, the more patients would recommend the hospital or service to friends and family. Scores  $\geq 8$  are considered 'excellent'.

Themes identified from feedback include communication breakdown between departments and patients reporting difficulties in understanding their care plan and discharge instructions

Mona Vale Hospital introduced strategies to increase the response rate for completion of RTPES. At Ryde Hospital, patient feedback received via RTPES is routinely shared via the Hospital Newsletter, and results are reported in the monthly Safety and Quality Performance Reports.

In 2023, Ryde Hospital developed and implemented a process to facilitate the easy recording of follow-up with patients and any actions arising. This also allows for the theming of responses to facilitate enhanced reporting and identification of improvement opportunities to enhance the patient's experience of care in the hospital.

## Local Surveys – Examples

- Primary and Community Health Service saw a **41% increase** in participation from the 2022 Consumer and Carer Survey, including a **69% increase** from Aboriginal and Torres Strait Islander people. Overall, PACH services demonstrated a high level of satisfaction, with **98%** of respondents rating the quality of care and services as good or very good, and **99%** of respondents reporting they would recommend the service, felt cared for and were involved in decisions about their treatment.
- Areas for improvement received from feedback included improving the visibility, provision and discussion of the Australian Charter of Healthcare Rights and improving processes to routinely ask consumers if they identify as being of Aboriginal and/or Torres Strait Islander origin.
- The Your Experience of Service (YES) Survey and Career Experience Survey (CES) are national surveys for consumers and their carers for mental health services. Outcome from these surveys is reviewed for opportunities for improvement through existing working groups which includes consumer peer workers. Increasing participation of consumers and carers in completing these surveys is a priority. A quality improvement project is currently underway to accurately identify carers for the CES along with implementing a new strategy to improve participation through use of text messages.

As part of the state-wide initiative, the YES Survey for Drug and Alcohol consumers are currently being piloted at NSLHD Drug and Alcohol services.

## The Power of Stories – Patient, Carer and Staff story collection training video and facilitated practical session

An online video, along with a 90 min facilitated discussion and practical session, has been introduced to enable nursing staff to collect stories from patients, family members, carers and staff in a person-centred way. The session outlines the skills needed and the tools that can be used to ensure psychological safety when sharing experiences.

So far,

### **82** Nursing and Midwifery staff,

of which **73%** were Nursing and Midwifery Unit Managers (NUM/MUMs) from HKH, Ryde, Mona Vale, PaCH, Staff Health and MHDA, have benefitted from these sessions.

Feedback collected on completion suggests that 66% now have a better understanding of the power of stories in quality improvement and intend to seek greater involvement with patients, families, carers and staff when embarking on quality improvement activities.

To ensure sustainability and increased uptake, the training video has been promoted and made available on *My Health Learning*, NSW Health's eLearning system for staff. A *Patient/Consumer Story Collection – NSLHD Guideline* has also been developed to guide staff on best practices when collecting stories from patients, family members and carers.

The video and practical session will be incorporated into future NSLHD Nursing and Midwifery Leadership Programs implemented as well as being embedded in the new Inspiring Change Active Learning Labs (ICALS) to be introduced in 2024 to build skills and capability in driving practice and culture change across NSLHD (see page 37).

# Consumer Partnership



NSLHD has a proud history of partnering with consumers who include patients and carers. Our patients and their carers have a fundamental right to participate in the delivery of the healthcare they receive. When we empower, engage and co-design with consumers, we recognise the value lived experience contributes to moving towards a shared vision of delivering person-centred care.

## As a District, we promote partnering with consumers and the community to:

- ✓ Improve our patients' and staff experiences and outcomes;
- ✓ Improve collaborative decision making about treatment and care;
- ✓ Enhance our health service development; and
- ✓ Improve the quality of our services

## Consumer Forum

The inaugural NSLHD Consumer Forum was held in September of 2022, an event postponed for almost three years due to the restrictions caused by the COVID-19 pandemic.

Consumer Advisors and MHDA Consumer Peer Workers in attendance provided positive feedback post-event. The event provided an opportunity for consumers across NSLHD to reflect on achievements over the last few years, participate in discussions and propose ideas for key priorities for consumer engagement in the future.

Consumers were provided with several presentations during the day on Virtual Health and Health Literacy, Patient Experience and Elevating the Human Experience, Consumer Perspectives, Engaging Consumers in Research Initiatives and Partnering with Consumers. Several facilitated group discussions were held with the Consumers that will help discover themes that can be developed into actions.

In May 2023, a follow-up workshop attended by the NSLHD Consumer Advisors and Consumer and Patient Experience (CAPE) team to further refine the priority list to identify strategies and actions moving forward for 2023-2024, directly align with the *Partnering with Consumers Framework 2021-2026*, officially launched in May 2023.

These include developing a Consumer Advisor Recruitment Strategy, producing a Consumer Engagement Video, and twice-yearly reporting of co-design activities with Consumer Advisors.

NSLHD will host an inaugural *Safety and Quality Consumer Forum* in October 2023 in partnership with NSLHD Consumer Advisors. The Forum is an opportunity for staff and consumers to hear from healthcare leaders regarding new directions and initiatives in patient safety, healthcare quality and partnering with consumers.

## Consumer Engagement Resources

A consumer engagement video has been co-designed and developed with our NSLHD Consumer Advisors. The *NSLHD Partnering with Consumers* video<sup>4</sup> aims to meet the actions identified as a high priority following the 2022 Consumer forum, which is to increase consumer engagement, particularly increasing the diversity of NSLHD Consumer Advisors, and involving our consumers in practical ways to partner with consumers through training and education of NSLHD staff. The video is intended to be used by NSLHD hospitals and services to recruit consumers to NSLHD, which forms part of an NSLHD Consumer Advisor recruitment strategy in development. A training and education package to complement the video is also in development.

The *Consumer Advisor Toolkit*<sup>5</sup> for consumers and staff provides information on how to join and partner with NSLHD to strengthen how we evaluate, plan, monitor and deliver our health service. Originally published in 2021, an update of this important resource is in development, incorporating ideas and feedback from NSLHD's Consumer Advisors.

Additionally, the recently launched NSW Health's *All of Us: A guide to engaging consumers, carers and communities across NSW Health*<sup>6</sup> is being promoted in NSLHD to support staff meet with ways of working to improve consumer engagement.

## Consumer activity

There have been numerous other opportunities involving Consumer Advisors and Consumer Peer Workers in NSLHD activities. The activities have included taking part in education and training and being members of various working parties and committees.

**From January – June 2023, we have had new Consumer Advisor and Consumer Peer Worker representation on the following committees and/or working parties.**

NSLHD Community and Supported Care Falls Prevention Committee

NSLHD Consumer and Patient Experience Committee (CAPE)

NSLHD Clinical Trials Governance Framework Working Group

NSLHD Patient Safety Culture Survey Working Party

NSLHD Voluntary Assisted Dying Steering Committee

NSLHD Consumer Engagement Video Working Party

NSLHD Comprehensive Care Plan: Goal Setting Working Party

RNSH Pre-Admission Redesign Project Governance Committee

MHDA Towards Co-design Working Group

MHDA Language Working Group

MHDA Comprehensive Care Planning and Review Working Group

4 NSLHD Partnering with Consumers video. Available to view from <https://www.nslhd.health.nsw.gov.au/AboutUs/Pages/Community-Participation.aspx>

5 NSLHD Consumer Advisor Toolkit 2021-2023. Available to download from: <https://www.nslhd.health.nsw.gov.au/AboutUs/Documents/NS12550-E.pdf>

6 All of Us: A guide to engaging consumers, carers and communities across NSW Health. Available from: <https://www.health.nsw.gov.au/patients/experience/all-of-us/>



## Examples of service improvements benefiting from Consumer participation



PATIENT CENTRED CARE  
QUALITY DIMENSION

### Consumer Participation in Research

Multiple Consumer Advisors are actively involved as consumer representatives in the NSLHD Clinical Trials Governance Framework Working Group and NSLHD Research Advisory Committee. An interactive event celebrating International Clinical Trials Day was held in May 2023. The program showcased patients' and carers' experiences with involvement in clinical trials. To mark the occasion, clinical trial teams also coordinated a dynamic display at RNSH of clinical trials to increase community engagement.

Mental Health Drug and Alcohol Service enable researchers to co-design research approaches with people with lived experiences to positively improve the health and well-being of consumers and their experiences of health services.

### Notice this Board, Mona Vale Hospital

'Notice this board' is a consumer-designed and named board on display in each ward at Mona Vale Hospital. Consumer advisors assisted the team in determining appropriate information to be displayed that consumers and patients would value. The boards provide information about the wards' clinical team, Nurse unit manager, up-to-date consumer feedback and outcomes from recent audits. The boards were launched during Human Experience Week in May 2023.

During this week, a consumer photo wall was also launched to recognise Mona Vale Hospital's Consumer Advisors and the support they provide at Mona Vale and the rest of the district.

### Nourishing our Cultural and Linguistically Diverse (CALD) community, Northern Sydney Cancer Centre

The project used a co-design collaborative end-to-end approach to develop culturally appropriate translated swallowing and diet information for non-English speaking cancer patients. We worked with CALD patients, community partners, multicultural health and staff. We began with a translated patient survey and then worked with all stakeholders to develop resources that suited their needs. Patients and consumers provided advice on the format, information content, proofreading and editing of final translations. One patient – a chef – was closely involved in developing the recipes for the cookbook. To access these resources in English, Korean, and Chinese (simplified and traditional), visit: <https://www.nslhd.health.nsw.gov.au/Cancer/Pages/Patient-Carer-Information.aspx>



NSW GOVERNMENT  
Northern Sydney  
Local Health District

NORTHERN SYDNEY  
CANCER CENTRE  
Korean



EQUITY  
QUALITY DIMENSION

## IMPROVING THE PATIENT AND CARER EXPERIENCE

### Virtual Care: Maternity Service

Co-designed with consumers and in collaboration with District Maternity Service and Hospital in the Home, the NSLHD Virtual Care Service is now providing care to patients with hyperemesis gravidarum, a severe form of nausea and vomiting during pregnancy. This cohort of women can get severely dehydrated with their babies' health impacted and are often admitted to the hospital. Women in our community suffering from hyperemesis gravidarum can now receive specialised advice, support and treatment at home. Positive feedback has been received from the patients, and their carers regarding their experience of the care received, including positive feedback from clinicians who provide care in the service.



**TIMELINESS & ACCESSIBILITY**  
QUALITY DIMENSION

### Breast screening for mental health consumers

A consumer peer worker-led project in collaboration with Mental Health Drug and Alcohol and BreastScreen NSW aims to increase the breast screening rate among Mental Health consumers. The team have developed an education package based on a review of the research around barriers to support BreastScreen staff care for people with a mental health or trauma background.

In collaboration with the Aboriginal and Torres Strait Islander community, several artists representing First Nations people, LGBTQIA+ and Lived Experience communities were commissioned to design artworks printed onto shawls to maintain dignity and privacy for consumers undergoing breast screening.



**EQUITY**  
QUALITY DIMENSION

### Northern Beaches Hospital

Northern Beaches Hospital (NBH) is committed to improving patient safety outcomes and the patient experience. The NBH Consumer Advisory Committee has overseen the development of the NBH *Consumer Engagement Framework Strategic Plan*. Consumers are represented on many committees, including the Patient Care Review and Consumer Advisory committees.

Consumer Consultants have increased in number and diversity to ensure the perspective of the wider population is more accurately represented. Dedicated training for Consumer Consultants has recommenced. The consumer's voice is being increasingly represented with patient stories included in reporting and hospital committee agendas. Involvement of consumers in service delivery and co-design, service evaluation and implementation of models of care has also increased.



## Community engagement

### Ryde Hospital Redevelopment



Building on the early engagement with staff and the community at the outset of planning in 2021, the Ryde Hospital Redevelopment team continued the vast consultation drive with the local community to inform the design of the future Ryde Hospital. Consultations have included face-to-face and online discussions with local residents and consumers, hospital staff, key health stakeholders, community members, local community groups and a range of government agencies, including the City of Ryde Council and Transport NSW.

The feedback received has informed key design considerations such as heritage, connection to country, the environment and green space to create a welcoming environment for patients, staff, and visitors. Central to the design are connections with existing onsite heritage buildings, including Denistone House and The Stables, the Blue Gum High Forest, and green spaces.

Draft models of care have been developed for clinical services which are new or expanding in the new hospital. Key stakeholders, including consumer representatives, are involved in co-designing the models of care, which informs the transition to new and innovative ways of delivering care.

For further information visit: <https://rydehospitalredevelopment.health.nsw.gov.au/>



**PATIENT CENTRED CARE**  
QUALITY DIMENSION



**EFFICIENCY**  
QUALITY DIMENSION



**TIMELINESS & ACCESSIBILITY**  
QUALITY DIMENSION



The involvement of the community together with consumer representatives, staff and clinicians in the planning and design process has been integral to the hospital redevelopment. This consultation is vital in ensuring we create a facility that meets the needs of staff and patients into the future.

**Fiona Thorn**

Ryde Hospital Redevelopment Manager

## Health Literacy

Increasing health literacy and access to health-related information to empower patients and carers to make informed decisions about their health and healthcare is a key objective for NSLHD to deliver on the strategic outcome of **“Patients and carers are our partners in their healthcare”**.

NSLHD services, teams, and staff are encouraged to use the *Consumer Tick* process to partner with consumers in developing, co-designing and reviewing patient information and publications, including the *Partnering with Consumers* or *Consumer Tick* graphic or statement. From January 2020 to May 2023, ninety-nine documents (e.g. pamphlets, brochures, posters, and booklets) have been reviewed through this process.

Staff are also encouraged to work with our Consumer and CALD Advisory Groups to ensure that education material and health-related information is readily available, up to date, easy to understand, and written in accessible languages and formats.

### Health Care Interpreter Resources, Primary and Community Health

The Multicultural Health Service launched a new suite of resources promoting the importance of working with professional healthcare interpreters when providing care to Cultural and Linguistically Diverse (CALD) consumers. The resources include video resources and posters developed in collaboration with consumers in response to reports from the NSLHD CALD Consumer Advisory Group that consumers are often unaware of their right to access an interpreter or are not offered an interpreter by health care staff.



**EQUITY**  
QUALITY DIMENSION

# A Workplace Culture that Drives Safe and Quality Care



**Safety and quality is fundamental to everything we do.**

NSLHD promotes a culture where staff are engaged and feel supported to deliver safe, reliable, person-centred care and equipped to respond to a changing healthcare environment. Our people are supported to challenge current ways of working and seek ways to improve the outcomes and experiences for patients.

# Patient Safety Culture Survey



Regular measurement of patient safety culture supports our leadership teams to better understand patterns of individual, team and organisational behaviour, as well as the underlying beliefs and values relating to patient safety in the organisation.

In June 2023, all NSLHD staff including NSW Health Pathology and HealthShare NSW, were invited to complete the Patient Safety Culture Survey (PSCS). First conducted in 2021 at NSLHD, the survey asks staff to share their perceptions and experiences at work on topics such as leadership, team interactions, communication and reporting of safety incidents.

The results of this survey are used to identify how well NSLHD performs across safety and quality domains and to identify areas where we can improve patient safety and staff well-being. Results are fed back at team, facility and district levels to inform targeted strategies for continually improving our patient safety culture across NSLHD.

## Key messages

Overall, NSLHD's patient safety rating remains positive:


- 73% of staff rate patient safety as 'very good' or 'excellent' and
- 89% of staff would recommend friends or relatives to be treated within their team/unit/work area


NSLHD staff reports improvements in all ten factors of safety culture, particularly clinical handover, information exchange and hospital management support.


How staff perceive safety is largely varied by their location, role and other demographics.

## Strengths

- Staff feel a deep sense of meaning and uphold a strong sense of personal responsibility for safety and patient care.
- Upholding and enhancing safety is a sentiment communicated and demonstrated by Management.
- Supervisors/Managers are highly regarded, helping to create safe spaces for staff to speak up.
- Teams are working together effectively and are looking for opportunities to learn from errors
- There has been a dramatic uptake in handover and communication practices
- Supporting tools and equipment are generally seen as effective enablers

 We are very fortunate to have such a dedicated team, who prides themselves on ensuring patient safety.

 I believe there is a genuine effort on the part of management to facilitate honest conversations with staff regarding incidents and potential incidents. Such incidents are discussed at staff meetings.

 Staff speak up and communicate concerns to each other. When escalated, supervisor/manager takes priority in resolving issues/concerns.

## Areas to watch and improve on

- Some staff (particularly pockets in medical, nursing and midwifery) need greater support to help decompress. i.e. enjoying their personal time without focusing on work matters
- Although there has been a positive increase, compared to 2021 results, staffing levels and the pace of work is front of mind for staff
- It will be important to isolate areas of disrespectful behaviour and blame culture
- While there has been a positive increase, ensuring continuous evaluation of practices that support various safety culture activities is recommended

### People Matter Employee Survey (PMES) & Patient Safety Culture Survey (PSCS) Action Plan, Ryde Hospital

The 2021/22 PSCS and PMES survey results at Ryde Hospital informed four key improvement opportunities: communication, staff wellbeing, recognition, and action on results. Focus groups with staff led to identifying initiatives to address these areas, which include:

- a revised staff Newsletter to enhance communication
- regular publication of the outcomes and actions taken from Leader Listening
- promotion of the Wellness at Work Committee and the 'moments that matter' platform
- implementation of regular recruitment workshops for managers to increase efficiencies in recruitment turn-around
- staff training on Safety & Quality Essentials, open disclosure, and Speaking Up For Safety

A WORKPLACE CULTURE THAT DRIVES SAFE AND QUALITY CARE

# Diversity, Equity, Inclusion and Belonging

NSLHD's Diversity, Equity, Inclusion and Belonging (DEIB) Strategy 2023-2027 was launched in April 2023. This strategy shows our commitment to making NSLHD a great place to work, not just for some but for all, regardless of personal background or life experience. Diverse workplaces create a greater sense of belonging for all staff, leading to increased levels of employee engagement and a positive workplace culture. A positive experience of the workplace contributes to a greater sense of psychological safety and enhanced staff wellbeing. Feeling safe at work and diverse perspectives leads to greater collaboration, creativity and innovation, translating to better quality care for our patients and consumers.



A video is now in production to support recruitment to the Employee Networks. The Employee Networks are the 'engine room' that helps us deliver our DEIB Strategy. NSLHD offers all staff an opportunity to participate in any of the five employee networks, including:

**1 Muru Dali Gili Gili Network**

**2 Cultural and Linguistically Diverse Employee Network**

**3 The Employee Resource Network on Disability**

**4 The Pride+ Employee Network**

**5 Embrace Gender Equity Employee Network**



# Staff wellbeing

Wellbeing occurs when a person's physical, psychological and social factors combine in harmony. The Employee Assistance Program (EAP) provides access to support individuals and groups to help employees manage work and personal challenges, concerns or issues at no cost to NSLHD employees. The range of support spans from crisis management to proactive prevention.

Given the impact that the challenges of the past few years have had on our people, NSLHD acknowledges the importance of reflecting on lessons learned and developing a strategy that cultivates a workplace environment that supports the physical and psychological wellbeing of our people in the context of the current climate and over the next five years. With this in mind, a vigorous consultation process occurred with the NSLHD workforce during the first half of 2023. A revised NSLHD Health and Wellbeing Plan is in development for launch in 2023.



## Beyond Self Care – Vicarious Trauma and Resilience Strategies

Acknowledging the impact of COVID-19 on staff wellbeing and the potential vicarious trauma staff may face due to both this and the nature of the clinical care provided, MHDA facilitated Beyond Self Care – Vicarious Trauma and Resilience Strategies workshops for all MHDA staff. The workshops were scheduled throughout 2022/23 at different locations and on different days, and all MHDA staff were encouraged to participate. The workshops aimed to legitimise feelings of exhaustion and stress, demystifying the impact of vicarious trauma on self, teams and life beyond work, and assisted participants to develop practical strategies to recognise and reduce these impacts. The workshops were evaluated at the end of 2022, and further workshops have continued into 2023.

## Kindness kit, Ryde Hospital

To try and assist the psychological well-being of staff at Ryde Hospital, 'Kindness kits' were developed, distributed to staff, evaluated, revised and refreshed aiming to help staff relax. Staff at the hospital were encouraged to nominate a colleague or staff member who was experiencing professional or personal trauma to receive a kit. The modified kits included a travel mug, tea, coffee, chocolate and encouragement to 'take 10', get some fresh air with a colleague to assist in debriefing/ changing mindset. The kits are environmentally friendly, and feedback highlights that they contribute to creating a positive culture at Ryde Hospital.



### 2023 NSLHD Quality Improvement Award for Supporting our People and Culture

View the winning project video: <https://vimeo.com/838857457>



## Clinical Supervision

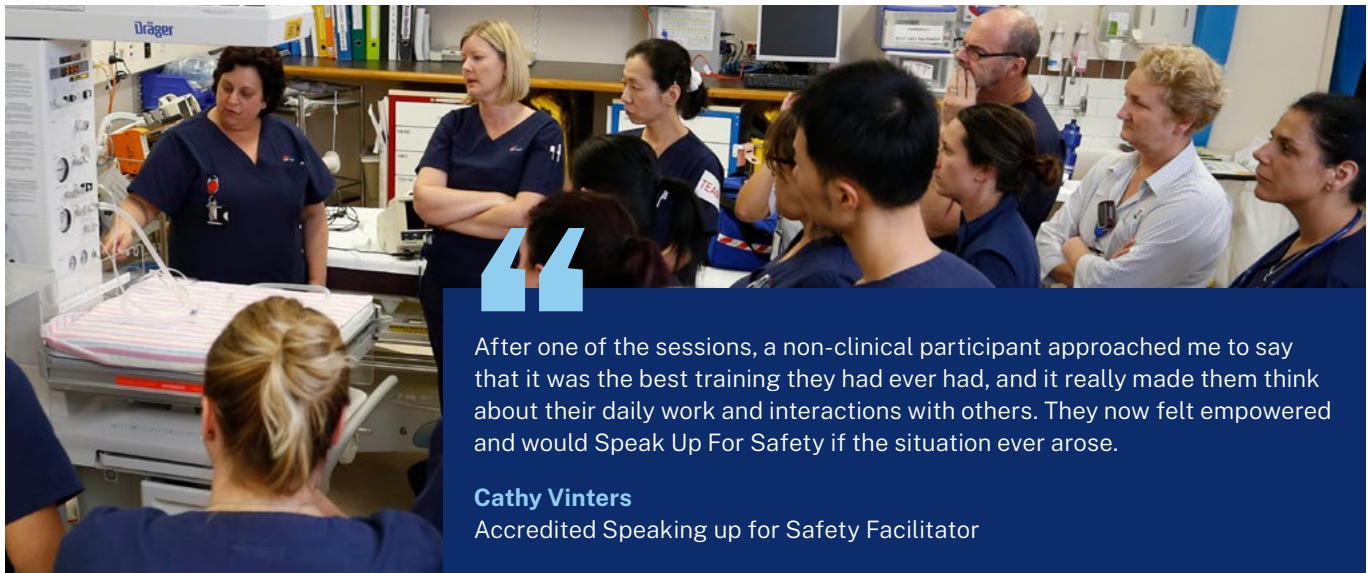
Clinical supervision is a regular structured meeting between a supervisor and one or more supervisees. Conducted away from the practice setting, it provides space for critical reflection on work-related issues identified by the supervisee(s). Engagement in clinical supervision has been recognised as a key contributor to the delivery of safe and high-quality care and a strategy that positively influences staff wellbeing and retention.

As part of the N&M Leadership Academy, the Clinical Supervision initiative was launched across the District in June 2023 with events at Hornsby Ku-ring-gai, Ryde, Mona Vale, Royal North Shore and Macquarie hospitals. Earlier in the year, the clinical supervision referral process was reviewed and promoted, leading to increased individual and group requests for clinical supervision. Since Jan 2023, 119 supervision sessions have been delivered, with 67% of these sessions have been provided to individual clinicians and 33% to groups.

Clinical Supervision Communities of Practice (CoPs) for nursing staff have successfully been introduced in Hornsby Ku-ring-gai, Royal North Shore and Macquarie, with remaining hospitals shortly to follow. Several activities are in progress to strengthen the practice of clinical supervision, including the annual evaluation of its impact on clinician wellbeing, clinical practice and the delivery of safe and quality care.



# Effective teamwork and communication



After one of the sessions, a non-clinical participant approached me to say that it was the best training they had ever had, and it really made them think about their daily work and interactions with others. They now felt empowered and would Speak Up For Safety if the situation ever arose.

**Cathy Vinters**

Accredited Speaking up for Safety Facilitator

Effective teamwork and communication are essential to our culture of safety.

Our teams participate in activities and apply practical tools that enhance a culture of safety. These strategies change behaviours that impact the delivery of safe, high-quality care and improve the patient and consumer experience. NSLHD's **Speaking Up for Safety program** continues, enabling staff to effectively communicate concerns to colleagues when unintended harm to patients or consumers may be about to occur. In May 2023, NSLHD reached the milestone of over 5000 staff trained with this proactive communication tool. Clinical and non-clinical staff have provided positive feedback.

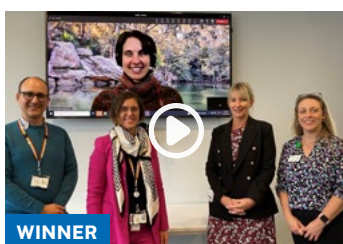
## Safety Huddles

Safety Huddles are a brief ( $\leq 10$  minutes), focused exchange of information about potential or existing safety risks which may affect patients, staff and any person accessing the healthcare environment. They are multidisciplinary and occur at the beginning of every shift. A review completed in December 2022 at Ryde Hospital found a highly engaged group of nurses and midwives leading and driving Safety Huddles and there was high compliance with the process. The review identified opportunities for further improvement, which is being addressed by an improvement team. This includes converting documentation to an online format that once available can be used by teams across the district. A number of resources are also in development to increase awareness and support teams across NSLHD.

## Deceased Consumer Care Review Process

The Mental Health Drug and Alcohol (MHDA) service introduced a time-efficient and reliable process for staff-led reflection on care, following the death of a consumer.

A new customised deceased consumer case review tool was tested and introduced. The team-led 'smarties' meetings an adaptation of Morbidity and Mortality (M&M) meetings, provide a psychologically safe space to build a culture of learning and support through loss. The review process was trialled and adopted across the service. The project led to many benefits, including improved collaboration between services, opportunities for learning identified and actioned, analysis of emerging risks and themes, and enhanced support to those affected by the death of consumers.



**2023 NSLHD Quality Improvement Award for Delivering Value-Based Integrated Care**

View the winning project video: <https://vimeo.com/838857394>

WINNER

## Supporting Staff to Prevent Compassion Fatigue, Mona Vale Hospital

Substantial evidence supports the notion of healthcare workers in various fields developing compassion fatigue. Compassion fatigue is characterised by emotional and physical exhaustion, which diminishes the ability to empathise or feel compassion for others. The Palliative Care Unit at Mona Vale Hospital wanted to support staff who care for patients with complex symptoms nearing the end of life. Based on staff feedback, the unit monthly debriefing and supervision sessions for all staff and regular Wellness Wednesday discussions to support staff to reflect, build resilience and manage their self-care.

These have been positively evaluated with increased staff reporting feeling valued and supported at work and less staff reporting feeling 'emotionally drained at work a few times a month'.

### Post Event huddle

The Post Event Huddle at Royal North Shore Hospital was developed to guide health professionals when leading a team discussion following a challenging clinical incident. The Post Event Huddle provides a simple four-step approach for facilitating a team discussion that can be used by any team member or colleague following a stressful event. Post Event Huddles allow the team to share their feelings and acknowledge that events can affect individuals differently. In addition, the Post Event Huddle includes a summary of the event so that there is a shared understanding of what happened and to address any confusion or concern regarding patient care.

The Post Event Huddle also allows the team to be thanked for their contribution to managing the challenging event. The intent of the Post Event Huddle is not to conduct a psychological debrief or educational tutorial. Video resources have been developed and are available online to demonstrate the steps of the Post Event Huddle, with further training having been rolled out in the Departments of Anaesthetics, Emergency and Intensive Care.

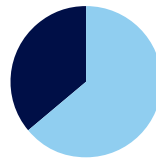


To find out more visit:  
[www.flipside.org.au/posteventhuddle](http://www.flipside.org.au/posteventhuddle)

## Schwartz Rounds

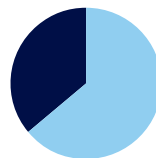
The underlying premise for Schwartz Rounds is that the compassion shown by both clinical and non-clinical staff can make all the difference to a patient's experience of care, but that to provide compassionate care, staff must, in turn, feel supported in their work. Since 2021, Hornsby Ku-ring-gai Hospital has held Schwartz Rounds with staff. The number of staff participating in Schwartz Rounds has steadily increased, cumulating to 109 participants between mid-2021 and 2022.

Schwartz Rounds build a high-performance culture of support, patient-centred care, safety and quality through empathy and compassion. Post-session evaluation shows that:



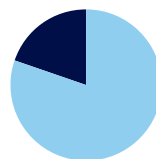
### 64% of participants

said that the discussions provided them with new insights into the perspectives and experiences of patients and families



### 64% of participants

said that the discussions increased their preparedness to handle challenging or sensitive patient situations



### 80.5% of participants

said that the discussions increased participant's openness to expressing thoughts, questions and feeling about patient care with colleagues



To find out more visit:  
<https://www.cec.health.nsw.gov.au/improve-quality/teamwork-culture-pcc/teamwork/schwartz-rounds>

# Building capability for emerging leaders in Safety and Quality



## Applied Safety and Quality Program, *Safety and Quality Essentials Pathway*

In partnership with the Clinical Excellence Commission, the inaugural *NSLHD Applied Safety and Quality Program* commenced in 2023 with a cohort of 17 staff from multiple disciplines across the district, including a targeted position from the Aboriginal and Torres Strait Islander Health Service. Participants of the 12-month program learn and apply safety and quality tools, methods and behaviours to champion, role model, support and lead safety and quality in their local workplace. In addition, the program aims for these skills and attitudes to become "everyday habits" in individuals and teams, enhancing cultures that support continuous improvement and learning for safety. Graduates of the Applied Safety and Quality Program are granted credit against quality and safety units in specific courses at a number of universities to support further studies. The Applied Safety and Quality Program is one of the offerings under the *Safety and Quality Essentials Pathway*. It is mapped to the Adept level of the *Healthcare Safety and Quality Capabilities* set.

The number of staff trained in other offerings under the *Safety and Quality Essentials Pathway* continues to rise, increasing healthcare safety and quality capability at NSLHD.

As of June 2023, 2176 staff have completed the Foundations of Safety and Quality training, intended for all staff, to build awareness and understanding of the dimensions of quality and our shared role in providing highly reliable, high-quality healthcare. The intermediate-level NSLHD Improvement Science workshop continues to be popular, with 76 staff since 2022 trained with the skills and tools to lead quality improvement projects.

An in-house teaching faculty comprising of a consumer, senior medical staff, coaches, facilitators, safety and quality leads and advisors from facilities and services across the district support the delivery of learning outcomes at all levels of the *Safety and Quality Essentials Pathway*. Members of the teaching faculty have the capability and expertise to deliver learning outcomes and have taken part in various faculty development activities, such as coaching for improvement to support participants. Future Applied Safety and Quality Program graduates will be invited to join the faculty to support the sustainability of the *Safety and Quality Essentials Pathway*.



## Leadership Development

Creating a culture of Continuous Improvement and Innovation are key input for the success of the NSLHD Leader, along with Strategic Partnerships, Alignment, Accountability, Engagement and Diversity and Inclusion. There are a number of formal opportunities for leadership development at NSLHD, which are accessible to all staff. These include:

### THRIVE

(previously known as Leadership Development Program)

This program is targeted towards front-line and mid-tier managers identified as high potential using formal talent/succession planning methodology.

### SENIOR LEADERSHIP DEVELOPMENT PROGRAM (SLDP)

This program is targeted towards senior leaders and aims to support capability development to an executive leadership level.

### FOSTERING LEADERSHIP ACROSS SYSTEMS OF HEALTH (FLASH) PROGRAM

(presented by Western Sydney Local Health District)

Since 2021, NSLHD has supported paid placements for staff into this highly interactive and practical leadership development program, which includes inspiring teaching faculty with panel discussions, executive coaching for participants, as well as numerous opportunities for building networks and learning from senior leaders.

### LEADING TEAMS IN THE CLINICAL WORKPLACE WORKSHOPS (ALLIED HEALTH)

This workshop introduced in 2023, aims to elevate allied health professionals to develop skills to progress into senior positions. The workshop explores topics such as brief writing, building resilience, effective meeting skills, as well as coaching and mentoring for supporting team members. In the first half of 2023, 37 allied health professionals participated in workshops and further workshops are planned for 2023.



### ADVANCING WOMEN IN MEDICAL LEADERSHIP

With fewer than 50 per cent of senior medical leadership positions held by women, NSLHD has prioritised supporting senior women in medicine to advance their careers. A *Women in Medical Leadership Development Trust Fund* was established to support female medical staff at NSLHD with the ability to participate in internal and external leadership development opportunities by providing the clinical backfill required to release from clinical duties. In May 2023, NSLHD played host to a powerhouse of women at the *Advancing Women in Medical Leadership Conference*. Women from health and other sectors attended the inaugural event, which celebrated the achievements of women and provided insight into how some of our country's most successful female leaders have navigated their careers.



### NURSING AND MIDWIFERY LEADERSHIP PROGRAM

The aim of the program is to provide an experiential learning environment for early, mid-career and advanced nursing and midwifery managers and leaders. The program increases capability across six leadership topics, including leading self, leading others, creating person-centred cultures, fostering reflective practice and applying contemporary approaches and NSQHS standards to leadership in safety and quality. Introduced in 2022, 19 leaders from Hornsby Ku-ring-gai Hospital have successfully completed the program. This program is in its second year of running, with 47 managers participating this year from Ryde and Mona Vale hospitals, Mental Health Drug and Alcohol and Primary and Community Health Services. The program has been applauded by the Ministry of Health for the quality of content and exceptional feedback received. Planning for the 2024 program is underway with its introduction at Royal North Shore Hospital.



## Research education and training



### NSLHD Nursing and Midwifery Research Centre

The NSLHD Nursing and Midwifery Research Centre provides a number of offerings that build the capability of nursing staff to undertake research. In 2022, the Researcher Education Program was delivered to 595 participants across NSLHD, metropolitan health districts and university partners. The Research Master Classes were provided to 271 participants, including 197 NSLHD staff and 74 external attendees and Higher Degree Research students. The NSLHD Nursing and Midwifery Research and Health Informatics Mentorship Program was completed by 15 nurses. The Clinical Researcher Development Program delivered five workshops to 76 NSLHD staff and 19 external attendees. The Practice Inquiry Online Drop-in sessions were attended by 171 NSLHD staff and 43 external attendees.

The NSLHD Nursing and Midwifery Research Centre intranet page contains a range of self-directed learning opportunities and links to research training resources. These are designed to support and guide NSLHD nurses and midwives to build their knowledge about evidence-based practice (EBP). It is also an ideal place for clinicians who wish to embark on practice inquiry, quality improvement, or research.

### Good Clinical Practice (GCP) training

NSLHD has updated the research training calendar and introduced monthly Good Clinical Practice (GCP) training schedule for the NSLHD research workforce. GCP is the internationally accepted standard for designing, conducting, recording and reporting clinical trials to ensure safe and ethical clinical trial conduct. All investigators and staff involved in the conduct, oversight or management of clinical trials must complete and refresh GCP training every 2-3 years or as per the individual training standard operating procedure. Health services conducting clinical trials will be audited and must show evidence that their site meets the required standards, including GCP training, to ensure ongoing accreditation by the Commission.

### Accelerating Implementation Methodology (AIM)

The Accelerating Implementation Methodology (AIM) provides clinical and non-clinical staff with a practical guide to effectively manage change by overcoming personal and cultural barriers. It supports delivering projects on time, on budget and within scope.

The Service Improvement team have provided Accelerated implementation methodology (AIM) training to over 40 staff in the NSLHD as of June 2023.

### Hospital Acquired Complications (HACS) promotional video and learning pathway

A new promotional video has been produced to provide information on how clinicians can enhance their knowledge of Hospital Acquired Complications and introduce a new learning pathway. The pathway includes modules on the prevention and management of falls, falls risk assessments, post-incident safety huddles, delirium care and best practice for medication safety. The video and pathway are planned to be made available to all clinicians in August 2023.

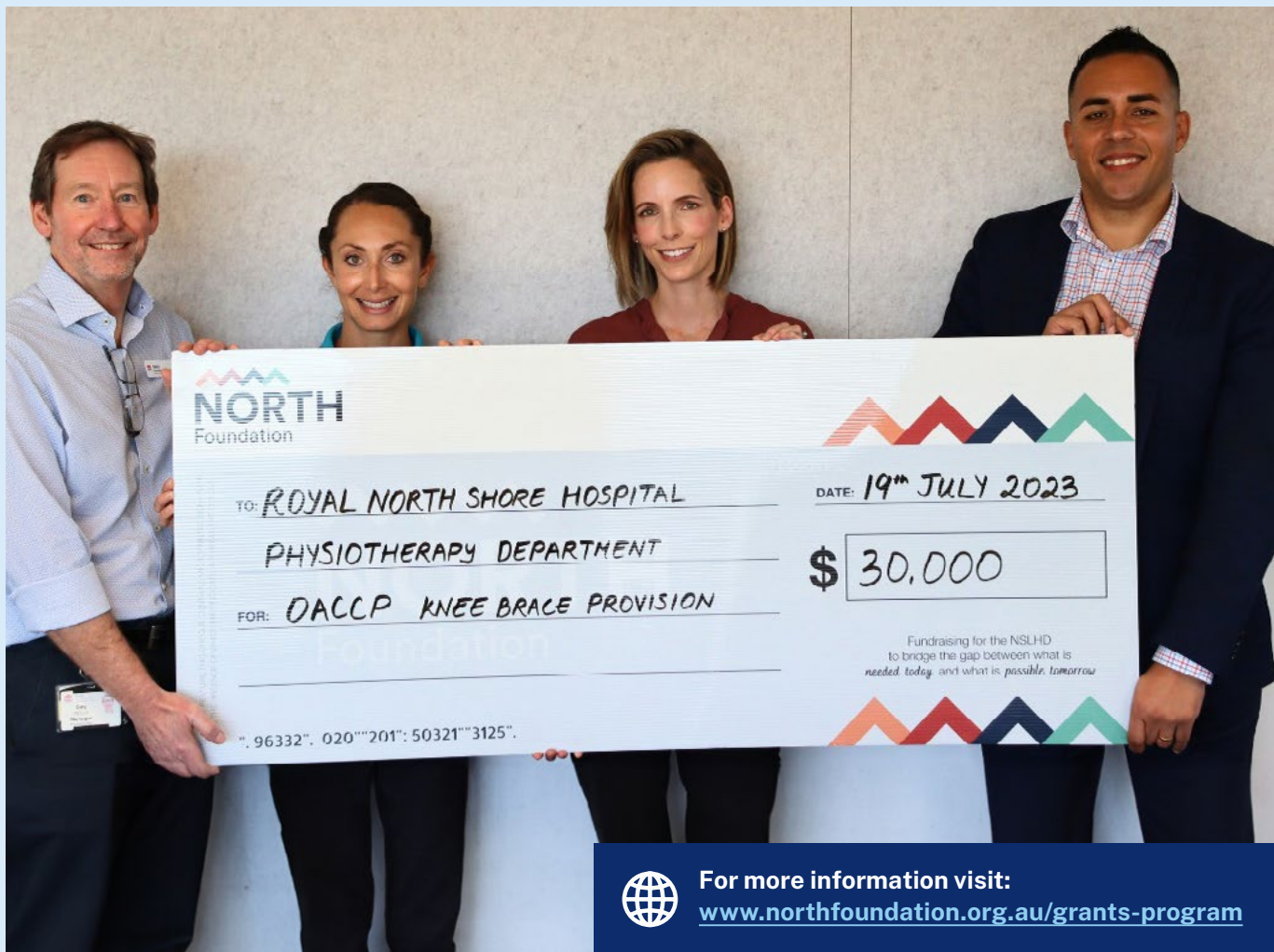


## North Foundation grants program

The NSLHD and NORTH Foundation Grants Program is a funding opportunity exclusively for NSLHD staff. The grants program supports innovative projects which provide tangible benefits for staff, patients, and the broader community.

NSLHD staff are encouraged to apply if their proposed project fits a clinical and laboratory need; it is a research enabler (data/analysis) or early career researchers/ fellowships.

In 2022, the Grants Program awarded over \$400,000 to 18 projects. In 2023, Round 1 awarded funding (totalling \$160,000) to five projects focused on ideas to improve patient services, and the successful projects came from different locations across the NSLHD. Each project aims to help a particular group, including Parkinson's Disease patients, community aged care and those in rehabilitation after an illness, injury or surgery. Funding will be allocated to innovative projects across two more funding rounds in 2023 that focus on Education, Community Wellbeing & Outreach (round 2) and Research (round 3).



For more information visit:

[www.northfoundation.org.au/grants-program](http://www.northfoundation.org.au/grants-program)

# Achievements against Priority Initiatives

The initiatives described in this chapter are a selection of the actions undertaken across NSLHD during the 2022-2023 financial year that meet NSLHD's strategic objectives.



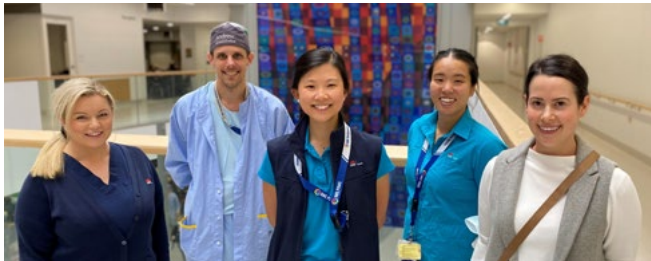
*Ku-ring-gai  
Youth Services*  
[www.krg.nsw.gov.au/youth](http://www.krg.nsw.gov.au/youth)



# 01 Patients and carers are our partners in their healthcare



Patients and carers are empowered to make informed decisions about their care, goals and health outcomes.



ROYAL NORTH SHORE HOSPITAL

## The Holy Grail: Perioperative care for the frail

The first of its kind in NSW, the Holy Grail project systematically screens and optimises care for frail patients across all surgical specialties, by turning the surgical waitlist into a proactive clinical tool to enable the provision of personalised pre-operative care. Since 2022, over 50 per cent of elective surgery patients have been identified as frail or pre-frail, providing further insight into the true frailty burden in NSLHD.

Co-designed with consumers, the service empowers frail patients with knowledge and tools to proactively access, manage and advocate for their healthcare before surgery to improve health outcomes. 90 per cent of patients felt well-informed of their peri-operative care and better prepared compared to just 10 per cent prior to the project implementation.

**>50%**

patients identified as frail and proactively managed before surgery

**90%**

patients felt well-informed and better prepared



### 2023 NSLHD Quality Improvement Award for Transforming the Patient Experience

View the winning project video: <https://vimeo.com/838857327>

WINNER



PATIENT CENTRED CARE QUALITY DIMENSION



SAFETY QUALITY DIMENSION



EFFECTIVENESS & APPROPRIATENESS QUALITY DIMENSION



COMPREHENSIVE CARE STANDARD



## Adolescent and Young Adult Hospice (AYAH)

The Adolescent and Young Adult Hospice (AYAH) in Manly is a new NSLHD facility that welcomed its first patient in February 2023. The AYAH is the first facility in Australia that provides specialised care and respite to adolescents and young adults with life-limiting illnesses in a hospice environment. The AYAH is a welcoming and comfortable place for patients, families and friends to come together and create memories.

In preparation for the facility's opening, future consumers of AYAH services were interviewed to identify their expectations, needs and concerns. This engagement provided an opportunity to inform AYAH's unique care and service delivery model. In response to consumer feedback, several initiatives were introduced, such as cook fresh food services, partnerships with local community organisations and businesses, e.g. Manly Warringah Sea Eagles and memorable experiences such as acoustic nights with local musicians and celebrity meet and greet events, e.g. Ed Sheeran and various sports stars.



Thank you for making us feel so loved and welcome.

Parent/boarder



[Patient] has had a spectacular time here and these past 2 weeks have been priceless! [Patient] has improved in so many ways and it would not have happened without each and every one of you.

Parent/boarder



PATIENT CENTRED CARE QUALITY DIMENSION



TIMELINESS & ACCESSIBILITY QUALITY DIMENSION

# 02 Safe, high quality connected care

Safe, high-quality, reliable healthcare is delivered in a personalised way across all settings.



ROYAL NORTH SHORE HOSPITAL

## Parkinson Inpatient Experience (PIE) project

Patients with Parkinson’s disease (PD) require complex medication regimens to control symptoms. Administration as little as 15 minutes late can severely worsen symptoms.

The project team engaged consumers in developing solutions to optimise medication management to achieve better health outcomes and experiences. The team introduced a number of interventions, including electronic alerts for doses to be administered on time, increased availability of PD medications and an extensive staff education program. The team has since seen an increase in PD medicines being administered on time, an increased number of patients being reviewed by a pharmacist and a reduced number of prescribing errors.



WINNER

### 2023 NSLHD Quality Improvement Award for Patient Safety

View the winning project video: <https://vimeo.com/838857362>

RYDE HOSPITAL

## Graythwaite Day Rehabilitation

The Graythwaite Day Rehabilitation team designed and implemented a completely new, innovative and adaptive service, which catered to the rehabilitation needs of the community.

Graythwaite Day Rehabilitation (GDR) provides multidisciplinary rehabilitation for patients with significant disability whilst patients continue to reside at home.

Patients attend for approximately 4 hours, 2 or 3 times per week, for up to 6 weeks as ‘day-only admitted’ patients. This unique model provides an alternative to inpatient rehabilitation admission contributing to early discharge and reduced hospitalisations, with no increase in overall costs to run the service.

Patients report high satisfaction rates due to the ability to reside at home with their families whilst receiving the same rehabilitative care as inpatients. No adverse health consequences or formal patient complaints have been identified from the service evaluation.



TEAM WINNER

### 2022 NSLHD Exceptional People Award for Safe and Connected Care

View the winning project video here: <https://vimeo.com/801803527/682e70a76>





#### PREMIER'S PRIORITY PROJECT

### Triage Category 2 and 3 in Emergency Department

A multidisciplinary working group met monthly, over the last 12 months, to monitor and introduce initiatives to improve the time from triage (T) to treatment in the Emergency Department. Initiatives have included:

- An improved process for recording time to treatment for T2 patients in Resuscitation Bays
- Establishment of a new Paediatric Navigator role and enhancement of the Clinical Initiatives Nurse (CIN) role to now include waiting room management
- Increasing numbers of ED nurses (77%) accredited to initiate chest X-rays
- Additional funding for medical and nursing staff secured to support and facilitate the new Fast Track Model of Care introduced by the Emergency department. Changes made included expanding the scope of patients treated in the Fast Track area and creating capacity in the acute area

Since establishing the T2T3 working group, T2 performance in one year (June 2022 to June 2023) has improved from 60% to 80%. T3 performance has also improved, from 68% to 75%.



**TIMELINESS & ACCESSIBILITY**  
QUALITY DIMENSION



**EFFICIENCY**  
QUALITY DIMENSION

#### ROYAL NORTH SHORE HOSPITAL

### Enhancing the Discharge Experience

Early 2023 saw the introduction of an Allied Health Complex Discharge Team (CDT) at RNSH. The team is comprised of social workers and occupational therapists improving patient and hospital outcomes by identifying patients with complex discharge needs earlier, providing targeted patient-centred interventions and innovative discharge planning. The CDT model shows early results of faster and more robust discharge, reducing extended lengths of stay and frequent readmissions in acute hospitals.

The team will continue to monitor success by collecting and reviewing data such as patient and clinician surveys, patient stories, length of stay and readmission rate.



**PATIENT CENTRED CARE**  
QUALITY DIMENSION



**EFFECTIVENESS & APPROPRIATENESS**  
QUALITY DIMENSION

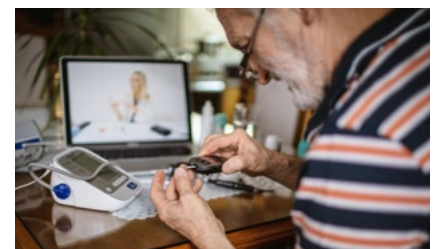


**EFFICIENCY**  
QUALITY DIMENSION

### Close to Home Diabetes Program

The Department of Diabetes, Endocrine and Metabolism at RNSH has established strong collaborations with various healthcare services and providers, including local General Practitioners (GPs), Practice Nurses (PNs), residential aged-care facilities and the Sydney North Health Network (SNHN), to enhance the quality of care for diabetic patients in the community.

During the 2022-2023 period, over 120 virtual Joint Patient-GP & Diabetes Specialist Team Case Conferences have been conducted under our "Close to Home Diabetes Program". These conferences aimed to ensure the safe and cost-effective delivery of diabetes care. As a result of this program, waiting times to access specialist care have significantly reduced, unnecessary outpatient clinic attendances avoided and provided learning opportunities for GPs to enhance their skills and confidence in managing challenging and complex diabetes cases.



**TIMELINESS & ACCESSIBILITY**  
QUALITY DIMENSION



**EFFICIENCY**  
QUALITY DIMENSION

## 03 Keeping people healthy and well

### Muru Dali Burudi (Path to Better)

The Muru Dali Burudi project aims to enhance service engagement and participation for Aboriginal and Torres Strait Islander people over 55 years, living with a disability or suffering from mental health issues across the NSLHD catchment.

A number of community engagement and community activities have taken place in the FY2022-23 period, including the annual Christmas in the Bush event in November 2022 that brought together almost 200 Aboriginal and Torres Strait Islander community members for celebration and connection. In 2023, Men's movement classes were introduced in addition to the ongoing community warm water exercise classes delivered.

A new region-wide community and resource website is in development with plans to launch in the second half of 2023.



**EQUITY**  
QUALITY DIMENSION



### Prevention and Response to Violence Abuse and Neglect (PARVAN)

In 2022, NSLHD re-aligned reporting structures to establish an integrated Prevention and Response to Violence, Abuse and Neglect (PARVAN) team. The team provides specialist service responses to adult and child sexual assault, child protection and domestic and family violence presentations within the NSLHD catchment area. The team have introduced a centralised Referral Management and Early Response service to triage, assess, and respond to referred clients and provide advice to services. This allows for a 'no wrong door' approach for accessing specialist services and enhances integrated service delivery. The service has also commenced Cultural Supervision for all PARVAN staff to enhance cultural safety for Aboriginal and Torres Strait Islander people accessing PARVAN Services, exploring and recognising culturally based social and emotional issues and culturally relevant ways of interpreting issues and different ways of working with those issues.



**SAFETY**  
QUALITY DIMENSION



**EQUITY**  
QUALITY DIMENSION



### Tiny Feet, Big Journeys

'*Tiny Feet, Big Journeys*' – A Guide for Pregnant Women and Families<sup>7</sup> contains extensive details for mums and their families living or birthing across the region, providing information in an accessible and culturally relevant format.

The booklet is a collaboration between the Northern Sydney LHD Nursing and Midwifery Directorate, Maternal, Neonatal and Women's Health Network and Aboriginal and Torres Strait Islander Health Services and compiled by Ochre and Salt, a northern Sydney-based Consultancy. The booklet contains several firsthand accounts from mums sharing their experiences of issues, including preparing for birth, post-natal depression, and breastfeeding and bonding with their new baby, among others. A ceremony to launch the booklet was held at RNSH on August 2022 coinciding with National Aboriginal Torres Strait Islander Children's Day.



I hope the booklet empowers Aboriginal women to know what to ask for and gives them space to value themselves and think about what they want from their journey in a format that's not overwhelming.

#### Eliza Pross

Ochre and Salt Director and a Yuin/Nueonne woman



**EQUITY**  
QUALITY DIMENSION



**PATIENT CENTRED CARE**  
QUALITY DIMENSION



## Small Bites for Big Steps

Evidence shows that positive experiences in the first 2000 days of life can significantly affect children's long-term health and development. Early Childhood Educators have the unique ability to support children's development during this time, as they build meaningful relationships with children and their families.

The Small Bites for Big Steps video series and Professional Development Courses give educators and families practical tips and ideas on enhancing physical development and encouraging healthy behaviours across three age groups; 0 to 18 months, 18 months to three years and three years to five years. These resources were developed by NSLHD's Early Years Population Health Promotion team in partnership with the Children and Young People Network.

To find out more visit: <https://www.nslhd.health.nsw.gov.au/HealthPromotion/MunchMove/Pages/SmallBitesBigSteps.aspx>



**EFFECTIVENESS & APPROPRIATENESS**  
QUALITY DIMENSION



## Police, Ambulance, Clinical Emergency Response (PACER), Mental Health Drug and Alcohol Service

PACER is an initiative that embeds mental health clinicians in NSW Police services to provide frontline assessment and support and upskilling of NSW Police staff in mental health matters. PACER was initially rolled out across the Northern Beaches, and Hornsby Ku-Ring-Gai Police Commands, and more recently, PACER has been trialled in a limited capacity in the North Shore Ryde region. The Mental Health Drug and Alcohol Service intends to expand the PACER model across NSLHD, develop a consistent care model, improve data collection, and identify and report on key performance indicators. PACER is an innovative way to ensure consumers and their carers receive safe, high-quality, reliable healthcare in a personalised way across different settings.



**SAFETY**  
QUALITY DIMENSION

# 03 Keeping people healthy and well



Investment is made in keeping people healthy to promote wellness and address health inequity in our community.



The clinic really validated what I was going through and offered me solutions that would fit into my daily routine which helped me recover much faster and return to normal. I'm incredibly grateful for all their support.

### Maddy Corbett

Twenty year old student and patient of RNSH's Concussion Clinic

#### ROYAL NORTH SHORE HOSPITAL

## Concussion Clinic

This Australia-first Concussion Clinic is a specialised multidisciplinary service established in early 2022 at Royal North Shore Hospital to help patients with post-concussion symptoms return safely to school, study, work and sport. The team take a holistic approach to reviewing and managing patients' post-concussive symptoms over 2-4 visits. In its first year, the weekly clinic treated 51 patients, attracting positive feedback and improving health outcomes. All patients who completed a follow-up questionnaire two weeks after Clinic discharge said the team assisted in their recovery, the MDT listened to their concerns, and their injury and plan of care was explained in a way they could understand.

Concussion, a brain injury, is often underdiagnosed and can result in missed schooling, worsening symptoms, anxiety, depression, and readmission, if not managed appropriately. The team worked closely with local schools, GPs and sporting clubs and identified a dire need for more education and support around concussions. An educational video was produced that has been adopted by the NSW Education Department and New Zealand schools. Additionally, the service has launched a new telephone service to offer concussion advice Australia-wide.

▶ This video can be viewed: <https://vimeo.com/674645370>

#### MEETING DEMAND

# 51

adults and children treated in the first 12 months

# 118

consultations provided

#### FAST RECOVERY

# 97%

patients returned to normal activity within two weeks of clinic discharge

#### POSITIVE FEEDBACK

# 100%

patients and family reported a positive experience of their care



#### WINNER

### 2023 NSLHD Quality Improvement Award for Keeping People Healthy

View the winning project video: <https://vimeo.com/838857498>



SAFETY  
QUALITY DIMENSION



TIMELINESS & ACCESSIBILITY  
QUALITY DIMENSION

# 04 Our staff are engaged and well supported



Staff are engaged and well supported to deliver safe, reliable person-centred healthcare and equipped to respond to a changing healthcare environment.

NSLHD places importance on celebrating the successes of our teams and individuals. Several awards and recognition programs are in place to formally recognise employees and volunteers for their incredible work and who have gone above and beyond to make a difference for the benefit of their colleagues, patients and consumers.



The annual **NSLHD Quality and Improvement Awards** celebrate the great work of our staff and highlight projects that deliver positive outcomes for our patients, consumers, staff and community. An awards ceremony took place on 29 June 2023 to recognise the achievements of 16 finalist teams who have improved the safety and quality of our healthcare service.

Visit <https://www.nslhd.health.nsw.gov.au/QIA/Pages/NSLHD-QIA-2023.aspx> to find out more about the winners and runners-up and their projects.

## Transforming the Patient Experience Award



The Holy Grail: Perioperative care for the frail  
Perioperative Medicine Service,  
Royal North Shore Hospital

## Patient Safety First Award



Parkinson Inpatient Experience (PIE)  
Royal North Shore Hospital

## Delivering Value-Based Integrated Care Award



Smarties – a learning approach to loss (not just an M&M)  
Mental Health Drug and Alcohol

## Supporting our People and Culture Award



Kindness Kit  
Ryde Hospital

## Keeping People Healthy Award



Multidisciplinary Concussion Service  
Concussion Clinic,  
Royal North Shore Hospital

## Health Research and Innovation Award



Improving renal vascular access outcomes through data-driven surveillance  
Departments of Renal Medicine and Vascular Surgery,  
Royal North Shore Hospital

## Excellence in the Provision of Mental Health Services Award



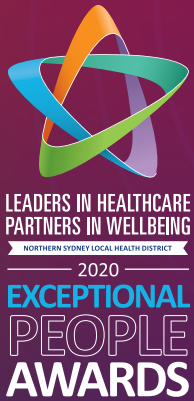
No Suppression Group  
Ryde Consumer Services,  
North Shore Ryde Mental Health

## Planetary Health Award



Needle and Syringe Program (NSP) reducing plastic waste  
Royal North Shore and Brookvale Community Health Centres

# 04 Our staff are engaged and well supported



The **NSLHD Exceptional People Awards** identify and celebrate NSLHD staff and volunteers who live the true meaning of our CORE Values and Behaviours Charter.

Postponed due to COVID-19, The 2022 Exceptional People Awards event occurred in March 2023. Along with the EPA nominees, the attendee list included recipients of the MHDA Rewards & Recognition Program, Allied Health Professional Day Awards, Nursing & Midwifery Awards, NSW Health Awards, Australian Council on Healthcare Standards (ACHS) President's Award, Australia Day Honours list, Leadership Development Program attendees and staff who had completed 40 years or more service.

Visit <https://www.nslhd.health.nsw.gov.au/Careers/awards/Pages/EPA2022.aspx> to learn more.

**Partnering with Consumers and Carers**



**Individual Winner**  
Joanne Francis



**Team Winner**  
ISBAR Supporting Safe Transition to Care team from Mental Health Drug and Alcohol

**Safe and Connected Care**



**Individual Winner**  
Trisha Rimmer



**Consumer Nominated winner**  
Dr Vincent Oxenham



**Team Winner**  
Graythwaite Day Rehabilitation Team

**Research, Innovation and Digital Health**



Alison Hession

**Healthy and Well Communities**



**Individual Winner**  
Dr Seeta Durvasula



**Team Winner**  
Grand Stand Against Domestic Abuse

**Sustainability and Planetary Health**



**Individual Winner**  
Rado Nikic



**Team Winner**  
NSLHD Capital Works team

**Engaged and Supported People**



**Individual Winner**  
Sarah Childs



**Team Winner**  
The Aged Care Rapid Response Team

**Core Values and Behaviours**



**Individual Winner**  
Danielle Fera



**Team Winner**  
Intensive Care Unit, Hornsby Ku-ring-gai Hospital



**Volunteer Winner**  
Brian Collier



**Consumer Nominated Winner**  
Therese Jepson

**Board Commendation**



Tidge Backhouse and Dash Gray

**Chief Executive Commendation**



Rachel Wolfe



Katherine Clark

**Leadership Award**



Dr Michelle Mulligan



Sakibul (Ovi) Chowdhury



# 05 Research, innovation and digital advances inform and improve the delivery of patient care



The care we deliver is digitally enabled and informed by research and data



## Virtual Care Service

The NSLHD Virtual Care Service has successfully cared for over 7,000 COVID-19-positive patients in the community, including monitoring high-risk COVID-19 patients, delivery of antiviral treatment and supporting General Practitioners to care for their COVID-19 patients. Virtual Care Service has provided service to over 200 patients who rang NSW Ambulance Service due to COVID-19.

A working group was established in early 2023 between the NSLHD Virtual Care Service and NSW Ambulance Service to work on a collaborative referral pathway. The Virtual Care Service is now caring for an extended range of acute conditions such as respiratory illnesses, post-surgery care, and infections, to reduce potentially preventable hospital presentations and provide Out of Hospital care to patients at home or close to home.



## ROYAL NORTH SHORE HOSPITAL

### Improving renal vascular access outcomes through data-driven surveillance

Vascular access is a lifeline for patients who rely on it to deliver life-saving haemodialysis. Good surveillance, management and timely intervention are vital to ensure optimal functioning and longevity of vascular access in dialysis patients. The Departments of Renal Medicine and Vascular Surgery developed a structured format for the clinical assessment of vascular access, protocols for surveillance and a unique database for clinical use and data collection, which could be accessed by all clinicians involved in their care. Clinicians responded well to the changes, stating that they felt the structured assessment led to earlier identification of potential vascular access issues. The accessibility and utility of the database reduced breakdowns in communication, improved the flow of information and allowed for robust data collection.

**50%**

improvement in keeping blood vessels open for dialysis.

**100%**

patients surveyed report positive experience with the service.



### 2023 NSLHD Quality Improvement Award for Health Research and Innovation

View the winning project video: <https://vimeo.com/838857423>



**SAFETY**  
QUALITY DIMENSION



**TIMELINESS & ACCESSIBILITY**  
QUALITY DIMENSION



**EFFECTIVENESS & APPROPRIATENESS**  
QUALITY DIMENSION

# 05 Research, innovation and digital advances inform and improve the delivery of patient care



## Transforming fluid resuscitation in intensive care

Over a 22-year-period, researchers from Royal North Shore Hospital, in collaboration with the George Institute and the Australian and New Zealand Intensive Care Society (ANZCIS) Clinical Trials Group, have undertaken ground-breaking research and transformed practice with fluid resuscitation to reduce mortality in critically ill patients in Australia and globally.

The research findings have resulted not only in improved patient outcomes, but in significant cost savings, with use of normal saline for IV fluid resuscitation found to either reduce mortality and adverse events or provide clinically equivalent outcomes to other more expensive alternatives.

The 2022 PLUS (Plasma-Lyte versus Saline) trial found that using a balanced multi-electrolyte solution for fluid resuscitation did not reduce the risk of death or acute kidney injury compared with using saline. This new research builds on the findings from the Research team's 2004 SAFE Trial (Saline vs Albumin for Fluid Evaluation), proving that albumin for fluid resuscitation did not improve mortality compared with the cheaper alternative of normal saline, and the 2012 CHEST Study, found that Hydroxyethyl Starch (HES) for fluid resuscitation didn't improve mortality compared with the cheaper alternative, normal saline. The Research team has built a compelling evidence base that has been translated into treatment guidelines and practice globally, saving thousands of lives and millions of healthcare dollars in this critical healthcare setting.



To find out more visit:

<https://www.georgeinstitute.org.au/our-impact/case-studies/transforming-treatments-saving-lives-the-safe-safe-tbi-chest-plus-studies>

### OUR RESEARCH IMPACT

Each year that SAFE, SAFE-TBI and CHEST recommendations are implemented in Australia, up to\*:

**1,465**

lives saved

**\$235.1 million**

in ICU and other healthcare and societal costs saved

**27,179 days**

in ICUs prevented

**12,363 days**

of mechanical ventilation avoided

**2,418 days**

days of renal replacement therapy prevented

\*The Impact of Research in Critical Care, 2020, Health Technology Analysts Pty Ltd



**EFFECTIVENESS & APPROPRIATENESS**  
QUALITY DIMENSION



**EFFICIENCY**  
QUALITY DIMENSION

## 06 Our services are sustainable, efficient and committed to planetary health



We use a value-based approach to optimise use of resources with a focus on embedding both planetary health and financially sustainable principles in everything we do.

### Reducing carbon footprint and the net zero pathway

NSLHD has been actively working on its sustainability efforts. For the carbon emissions NSLHD controls directly, we are committed to reaching net zero by 2035, with a 70 to 80 per cent reduction by 2030. For the emissions NSLHD does not control directly but can influence, we aim to reach net zero by 2050, with a 50% reduction by 2035.

NSLHD has been funded by NSW Treasury, Office of Energy and Climate Change, to calculate the district's baseline carbon footprint. Working with a global sustainability consultant, ARUP, data and information from our hospitals and facilities has been rigorously collected over the past five months to reveal emissions hotspots and identify emission reduction opportunities and model a pathway to net zero emissions by 2035.

In November last year NSLHD commenced Australian-first 'Net Zero Leads Program' with 12 of our clinicians from nursing, medicine, allied health, and pharmacy supported by The NORTH Foundation to lead projects to reduce emissions in clinical care.


#### SUSTAINABILITY FACT

NSLHD's carbon footprint is equal to **177 kilotons** of CO<sub>2</sub>e per year. This figure is our total greenhouse gas emissions expressed in terms of CO<sub>2</sub> and is equivalent to **25,000** round the world flights.

The Net Zero Leads and their projects of interest include:

- Reducing waste in theatres
- Reducing Metered Dose Inhaler (MDI) prescription and establishing an inhaler recycling program
- Understanding attitudes towards single use and reusable insulin pens
- Avoiding general anaesthetic for paediatric imaging
- Reducing calf compressor use in ICU
- Establishing a satellite spinal clinic to reduce patient travel emissions
- Reducing and promoting better management of pharmaceutical waste
- Reducing nitrous oxide use and leakage in theatres

Following the success of reducing greenhouse gases from practice changes in anaesthetic gas use, leads from RNSH's Department of Surgery and Anaesthesia continue to innovate by partnering with the University of NSW to develop technologies for capturing and destroying volatile anaesthetic gases. The anaesthetic gas scavenger project was selected as one of 17 initiatives to be funded as part of the NSW Health Sustainable Futures Innovations Fund.



**2022 NSLHD Quality Improvement Award for Planetary Health**

Anaesthetic greenhouse gas reductions.

View the winning project video: <https://vimeo.com/725122711>

**WINNER**

In the financial year 223/23, the Reducing Anaesthetic Greenhouse Gases initiative:



Reduced Desflurane use to **4 bottles** compared to 35 bottles a month, before the project started



**\$344,087**  
direct annual cost saving



**\$105,048**  
additional global social cost saving

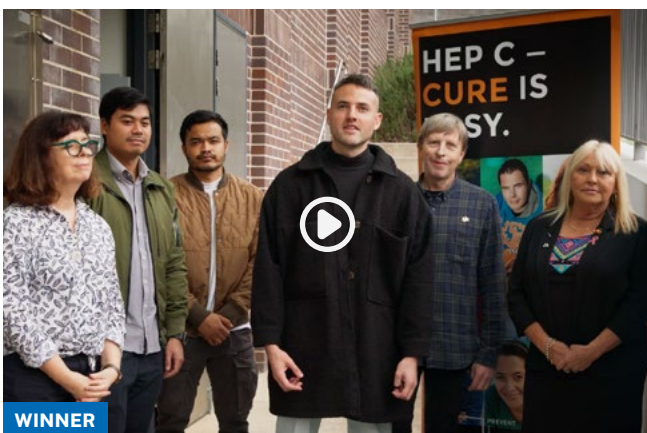
## 06 Our services are sustainable, efficient and committed to planetary health

Other sustainability efforts to successfully reduce non-biodegradable plastic waste include the needle and syringe program at RNS and Brookvale Community Health Centres, replacing plastic fit packs with cardboard fit packs and Royal North Shore Hospital's swap to paper bags for patients' shoes, clothes and belongings, replacing the former pink plastic versions.

The Ryde Hospital Redevelopment is on track to be the first 'net zero ready' public hospital in NSW, with full electrification (no gas), fleet electric vehicle capability, green roofs, and solar-powered renewable energy. New solar panels and battery storage are planned for Mona Vale Hospital.

NSLHD will continue to drive and support initiatives that promote sustainable models of care, including:

- Primary prevention and health promotion programs that help reduce NSLHD's carbon emissions by keeping people healthy and out of hospital
- Avoiding or reducing unnecessary or low-value care to reduce waste and resource use
- Decarbonising high-value care, such as trialling clinically equivalent low emission alternatives, investigating circular solutions to hospital waste, and engaging with suppliers to improve supply chain emissions



WINNER

### 2023 NSLHD Quality Improvement Award for Planetary Health

Needle and Syringe Program (NSP) reducing plastic waste.

View the winning project video:  
<https://vimeo.com/838857525>

### Northern Beaches Hospital (NBH)

Leveraging off of strong community and staff interest in the Northern Beaches, the Northern Beaches Hospital set out to develop and deliver an Environmental Sustainability Strategy for the hospital. In doing so, it aimed to reduce its carbon footprint, unnecessary waste and spend. This year we pride ourselves on:

- Introducing new waste streams and diverting from landfill
- Partnering with a new waste company who closely monitor and report monthly on waste diversion
- Improved focus and strategies developed in the prevention of unnecessary food waste
- Optimisation of HVAC systems, lighting and Smart Alarms. This has led to achieving a reduction of approximately 9% in base building electricity use
- Removal of single-use plastics, pill cups, kidney dishes, cutlery, coffee cups





# Northern Sydney Local Health District is committed to reaching net zero carbon emissions

What are we doing to achieve this?

## ENERGY SAVING ACHIEVEMENTS



Since 2014 more than  
**279,876**  
 kilowatts has been saved every hour thanks to solar, LED lighting and other measures.



Over the last year  
**5000**  
 lights were replaced at Royal North Shore Hospital, Mona Vale Hospital and Brookvale Community Health Centre with LED lights.



The use of solar has reduced energy consumption from the grid by 1,814,356 kWh translating to a cost saving of  
**\$317,240**



## WATER AND WASTE SAVING ACHIEVEMENTS



Our hospitals have all reduced their water usage dramatically since 2015.

Royal North Shore Hospital	Hornsby Hospital	Ryde Hospital	Macquarie Hospital
-11.5%	-50%	-2.5%	-23%



**Environmentally efficient chillers and boilers** have been installed at Ryde, Macquarie and Hornsby hospitals



**220 toilets** replaced with water-saving dual flush toilets



**60,805kg of electronic waste** has been sustainably disposed of to reduce the amount of toxic chemicals in landfill resulting in estimated savings of \$325,000 and 2600 tonnes of carbon

# Progress against planned activities from 2022 Safety and Quality Account

In addition to **NSLHD Consumer Forum 2022** (see page 23) and **Planetary Health** priorities (see page 52), updates on the progress of other activities against priorities FY2022/23 are noted below:

## NSW Medicines Formulary

The NSW Medicines Formulary lists medicines and other therapeutic agents approved for use within NSW public hospitals and health services. The need to change from a facility or local health district formulary to a standardised state-wide formulary led to the establishment of the NSLHD Drug and Therapeutics Committee (DTC) in February 2023. The NSLHD DTC is comprised of a multidisciplinary group of clinicians, consumers and executives, and provides the necessary medication governance and management of the medicines formulary for the district.

Changes that may impact clinicians and their patients are regularly communicated through education and information sessions and on the intranet.

Work continues with updating affected procedures and guidelines, stock changes and alignment of pharmaceutical contracts. An eMR formulary working group of representatives across Central Coast Local Health District and NSLHD has been looking to introduce visual icons for clinicians in the electronic medical record (eMR) when prescribing to indicate if a medicine is in the state formulary. This solution is now being built into the eMR to improve workflow and reduce delays due to medication availability.

## Care of the Elderly in the Emergency Department

The work to date is being considered as part of the Ryde Hospital Redevelopment as a model of care for ED and Aged Care.

## NSW Suicide Monitoring System – Towards Zero Suicides

The NSW Suicide Monitoring System (SuMS) is a collaboration between NSW Health, the State Coroner, the NSW Police and the Department of Communities and Justice. It estimates the number of recent suspected and confirmed suicides in NSW, using data collected by NSW Police and the State Coroner. The system is a critical step to reforming the management of suicide data in NSW and enabling the NSW Government to work towards the goal of reduction in deaths by suicide (Towards Zero Suicides initiative). Mental Health Drug and Alcohol, with various NSLHD services, developed and implemented a procedure to respond to the information in the SuMS reports, in a trauma-informed way and through a lens of organisational learning.

## Cultural Collaborator / Ward Champions

This initiative continues to progress. The Aboriginal and Torres Strait Islander Health Service have received numerous expressions of interest from multiple staff across the district in becoming a ward champion. Outpatient services have also expressed an interest in being involved.

## Tissue Analytics

The Tissue Analytics trial continues to progress. The team and stakeholders are working with the software vendor to produce a report so as to evaluate the trial's outcomes, informing the direction and actions going forward.

# Our Performance in Safety and Quality

NSLHD utilises high-quality data and analytics to develop a comprehensive understanding of our clinical performance to support decision-making and inform opportunities for system, process and practice improvement.

NSLHD tracks and monitors performance against several safety and quality targets and benchmarks at all levels of the organisation to ensure we maintain and improve our high standards in providing the best care and minimising avoidable patient harm. Reporting these indicators and other measures of patient safety and quality extends to and from the clinical governance committee structures, clinical review teams, and appropriate forums at all levels of the organisation.

This section reports on NSLHD's performance over the 2022-23 financial year on a range of safety and quality key performance measures that align with the NSW Health outcomes.

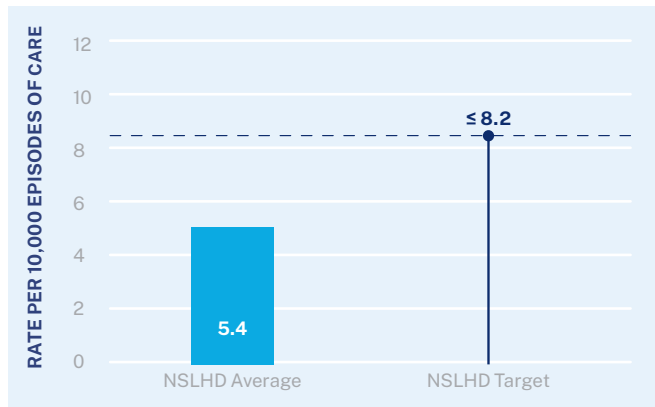


# Hospital Acquired Complications

People receive high-quality, safe care in our hospitals.

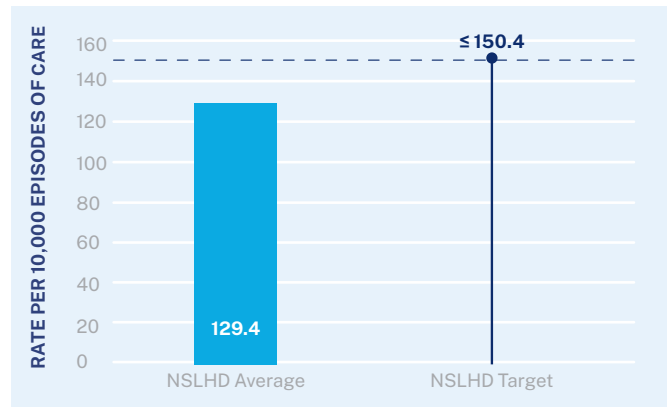


**Bedsore**  
Hospital Acquired Pressure Injuries



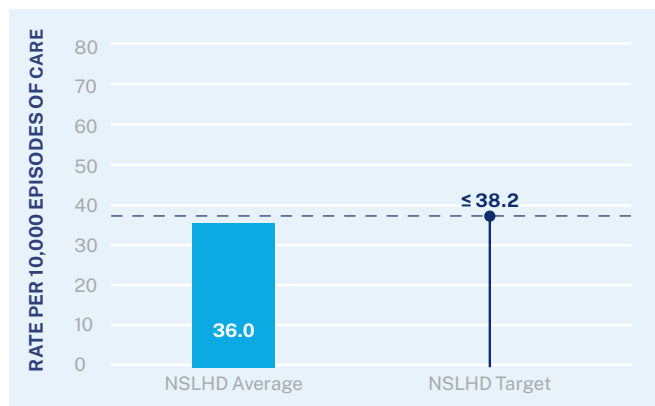
✓ NSLHD has met and exceeded the target for this KPI.

**Infection**  
Healthcare Associated Infections



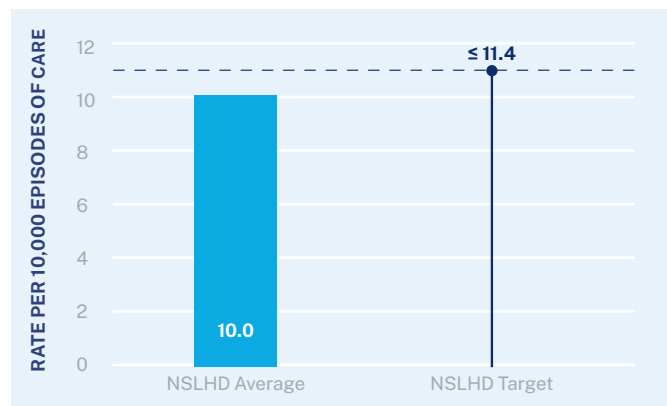
✓ NSLHD has met and exceeded the target for this KPI.

**Breathing Complications**  
Hospital Acquired Respiratory Complications



✓ NSLHD has met and exceeded the target for this KPI.

**Blood clots in the vein**  
Hospital Acquired Venous Thrombembolism  
Deep Vein Thrombosis or Pulmonary Embolism



✓ NSLHD has met and exceeded the target for this KPI.

## STATUS KEY

✓ **Highly Performing**  
Performing at, or better than target

⬇ **Underperforming**  
Performance within the tolerance range

✗ **Not performing**  
Performance outside the tolerance range

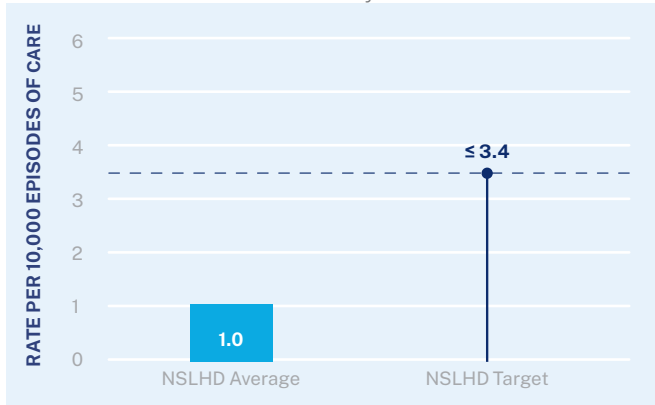


People receive high-quality, safe care in our hospitals.



**Kidney failure**

Hospital Acquired Renal Failure requiring haemodialysis or continuous veno-venous haemodialysis

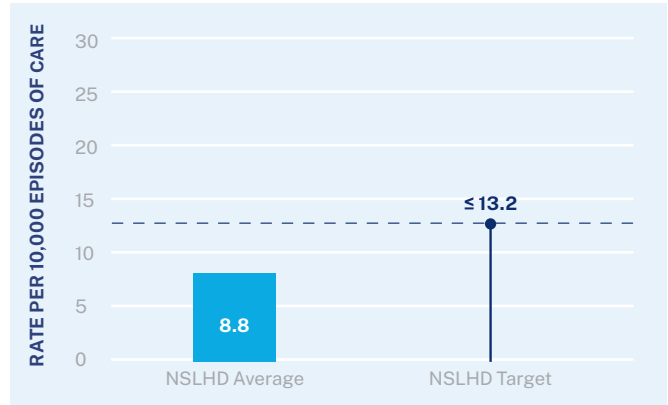


✓ NSLHD has met and exceeded the target for this KPI.



**Bleeding in the digestive tract**

Hospital Acquired Gastrointestinal Bleeding

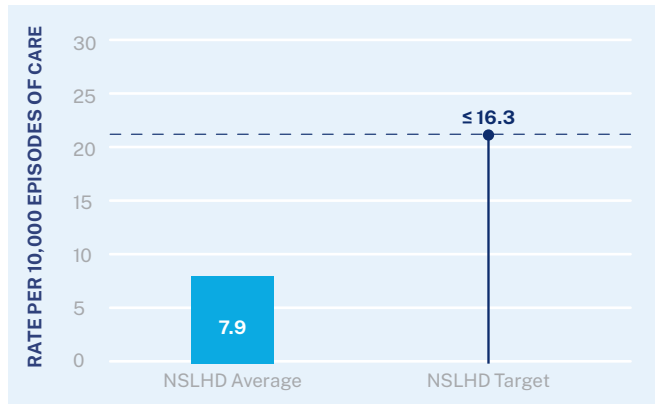


✓ NSLHD has met and exceeded the target for this KPI.



**Medication Complications**

Hospital Acquired Medication Complications

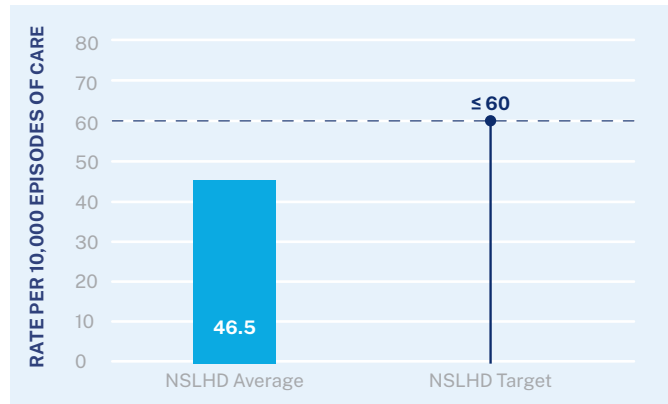


✓ NSLHD has met and exceeded the target for this KPI.



**Sudden confusion**

Hospital Acquired Delirium

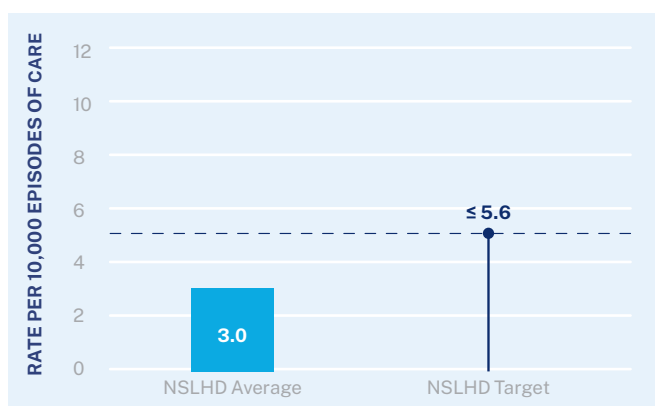


✓ NSLHD has met and exceeded the target for this KPI.



**Weak bladder control**

Hospital Acquired Incontinence

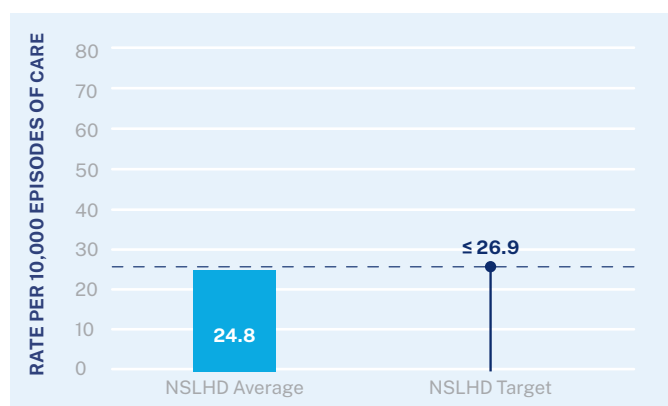


✓ NSLHD has met and exceeded the target for this KPI.



**Low blood sugar and malnutrition**

Hospital Acquired Endocrine Complications Malnutrition and Hypoglycaemia

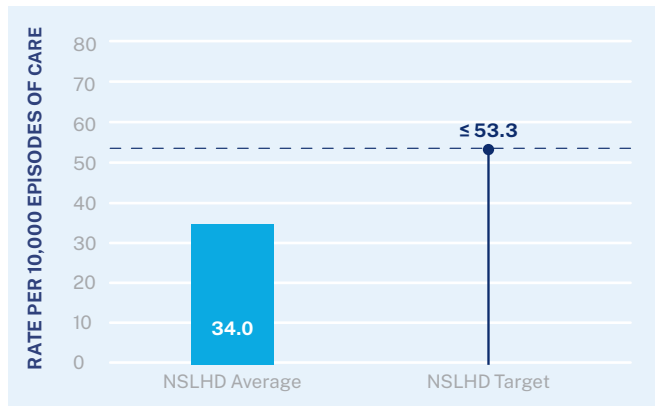


✓ NSLHD has met and exceeded the target for this KPI.

People receive high-quality, safe care in our hospitals.



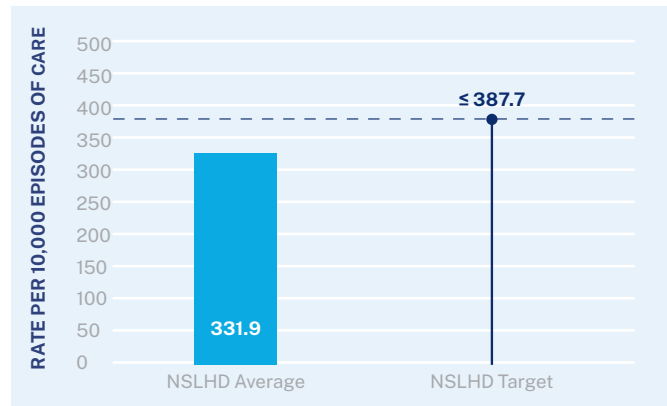
**Heart Complications**  
Hospital Acquired Cardiac Complications



✓ NSLHD has met and exceeded the target for this KPI.



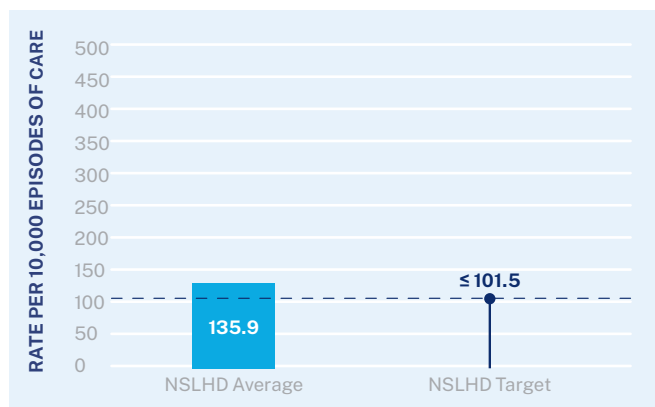
**Vaginal tears in childbirth**  
3rd and 4th Degree Perineal Lacerations during the Vaginal Delivery of a Newborn



✓ NSLHD has met and exceeded the target for this KPI.



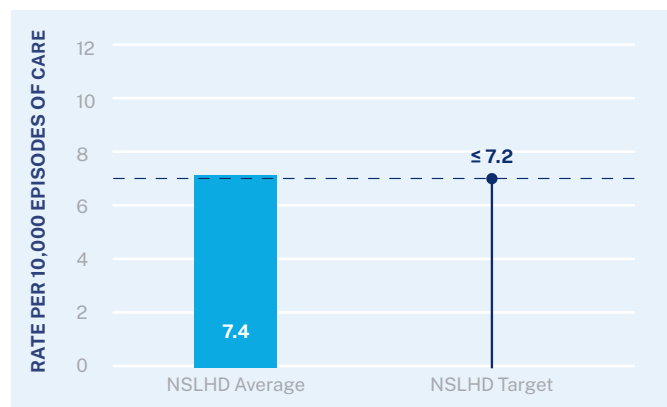
**Birth injuries in newborns**  
Hospital Acquired Neonatal Birth Trauma



✗ A high number of cases coded as hospital-acquired neonatal birth trauma was identified as not meeting the definitions specified by the Australian Commission of Safety and Quality in Healthcare (ACSQHC). This implies that the data is likely not to be a true reflection of actual neonatal birth trauma rates. The Ministry of Health has been notified about the discrepancies in the ACSQHC definition and clinical coding practices based on the Australian Coding Standards (ACS) definitions. An opportunity exists to improve clinician documentation practices, to avoid incorrect assignment of hospital-acquired birth trauma codes. An education package for clinicians to document birth trauma in the patient's medical record is being developed.



**Falls in hospital**  
Fall-related Injuries in Hospital Resulting in Fracture or Intracranial Injury



📌 Improvement Activities:  
The LHD Falls Prevention Committees of Acute/Sub-acute, and Community & Supported Care, continue to identify priority areas of need and opportunities for falls prevention innovation and partnerships in Acute, Community and Residential Care settings.  
In FY 23-24, a review of the NSLHD Falls Prevention Model of Care will take place to align with Comprehensive Care and eMR, and the previously successful Towards Zero Falls with Harm model.  
The Hornsby Ku-ring-gai Hospital Falls Collaborative Multidisciplinary Group undertook reviews of each reported case and developed actions to reduce the likelihood of a re-occurrence. As a result of HKH has realised a reduction in Hospital Acquired Falls with harm of 1.5 falls/10,000 episodes of care in the financial year 2022/2023 overall.  
As a priority, a project aimed to reduce the number of hospital-acquired falls and fall-related injuries will begin at Northern Beaches Hospital in the coming year. The prevalence of high-risk patients has increased, and the hospital is working to adapt its processes to accommodate and introduce solutions to reduce risk aligned with the patient's needs. Northern Beaches Hospital has updated its Falls Risk Assessment and Management Plan to align with the NSW Health tools. From an analysis of incidents, a redesigned approach to intentional-rounding commenced in August 2023.

## Safety & Quality Improvement Measures

Performance Indicator	NSLHD Average	Target	Symbol	As of	Comment
<b>Deteriorating Patients – Adult</b> * Rapid Response Calls (rate)	<b>73.9</b>	–		April-23	While there is no target for this measure, NSLHD continues to monitor this measure over time.
* Unexpected cardiopulmonary (rate)	<b>0.7</b>	<3	✓	April-23	NSLHD has met and exceeded the target
<b>Deteriorating Patients – Maternity</b> * Rapid Response Calls (rate)	<b>32.9</b>	–		April-23	While there is no target for this measure, NSLHD continues to monitor this measure over time.
* Unexpected cardiopulmonary (rate)	<b>0</b>	<3	✓	April-23	NSLHD has met and exceeded the target
<b>Deteriorating Patients – Paediatric</b> * Rapid Response Calls (rate)	<b>30.1</b>	–		April-23	While there is no target for this measure, NSLHD continues to monitor this measure over time. High rates may be caused by low patient volumes.
* Unexpected cardiopulmonary (rate)	<b>0.2</b>	<3	✓	April-23	NSLHD has met and exceeded the target
<b>Staphylococcus Aureus Bloodstream Infections</b> (per 10,000 occupied bed days) * A1- C2 facilities (Royal North Shore, Hornsby Ku-ring-gai, Ryde, Mona Vale Hospitals) * D1a – F8 facilities (Greenwich, Neringah)	<b>0.6</b>	<1	✓	May-23	NSLHD has met and exceeded the target
Hand Hygiene Compliance (%)	<b>88%</b>	>80%	✓	June-23	NSLHD has met and exceeded the target
<b>Unplanned Hospital Readmissions (%)</b> within 28 days of separation	<b>6.1%</b>	<6.52%	✓	May-23	NSLHD has met and exceeded the target
<b>Unplanned and Emergency Re-presentations to the same ED within 48 hours (%)</b> * All persons	<b>4.2%</b>	–		June-23	While no target is set, year-to-date trend value is similar to that of the previous year. High rates may be caused by low patient volumes.
* Aboriginal patients	<b>4.5%</b>	–		June-23	There may be large fluctuations in the figures reported due to a low number of Aboriginal patients being admitted to NSLHD facilities
<b>Discharged Against Medical Advice</b> Aboriginal Inpatients (%)	<b>2.5%</b>	<2.4%	✗	June-23	There may be large fluctuations in the figures reported due to a low number of Aboriginal patients being admitted to NSLHD facilities
<b>Mental Health: Acute Post Discharge Community Care</b> Follow-up within 7 days (%)	<b>85.1%</b>	≥75%	✓	June-23	NSLHD MHDA has met and exceeded the target
<b>Mental Health: Acute Readmission</b> Within 28 days (%)	<b>11.7%</b>	≤13%	✓	June-23	NSLHD MHDA has met and exceeded the target
<b>Mental Health: Acute Seclusion Occurrence</b> Episodes (per 10,000 episodes of care)	<b>3.9</b>	≤5.1	✓		NSLHD MHDA has met and exceeded the target
<b>Mental Health: Acute Seclusion Duration</b> Average (Hours)	<b>9.59</b>	<4.0	✗	June-23	NSLHD frequently meets target for this key performance indicator and compares favourably to the NSW average. The performance during the period has been adversely affected by both a low rate of seclusion (3.8 per 1,000 Bed Days) and a small number (12) of extreme outlier events (ie >24 hours). Excluding these outlier events, the Average Duration of Acute Seclusion for the period is 3.2 hours which is within target range.

# Future Priorities

Over the next financial year, Northern Sydney LHD will continue to build on the safety and quality gains achieved and learnings from 2022 and the start of 2023. A number of important safety and quality activities are planned to meet NSLHD's strategic objectives



## Patients and carers are our partners in their healthcare

### Voluntary assisted dying

Voluntary assisted dying is a choice that will be available to eligible people in NSW who are approaching the end of their life. This will be in addition to other choices that patients may make about their end-of-life care, including palliative care and other treatment options in line with their goals of care.

NSW Parliament passed the [Voluntary Assisted Dying Act 2022](#) on 19 May last year. The legislation sets out very clearly the processes and safeguards to ensure it is safe and accessible to patients no matter where they are in NSW.

NSLHD has been selected to host the state-wide Voluntary Assisted Dying Care Navigator and Pharmacy Services. In addition, NSLHD will need to embed patient-centric voluntary assisted dying processes within end-of-life care pathways.

To ensure a smooth transition, NSLHD has established an implementation steering committee to oversee local readiness and has commenced recruiting a voluntary assisted dying team that will assist with implementation and support our workforce, patients and their families.

Local engagement has commenced and is ongoing to ensure staff, patients and their carers are well supported in the lead-up to the introduction of voluntary assisted dying. NSLHD staff were invited to participate in a survey on implementing the new voluntary assisted dying legislation, to capture the views of clinical staff about the implementation of voluntary assisted dying, identify perceived challenges that this legislative change will create for clinical staff, and identify ways to support clinical staff in the context of this change.

Training and education will continue throughout FY23/24 for NSLHD staff, the local Primary Health Network and Residential Aged Care Facilities within our community. This includes hosting specialised communication workshops with the Pam McLean Centre, which provides immersive workshops with paid actors and facilitators to help staff practice discussing end-of-life options, including VAD.

Voluntary assisted dying processes at NSLHD are patient-centric and will be embedded within our existing practices and systems, ensuring that we respect patient autonomy, support informed decision making and continue to provide high-quality care.



PATIENT CENTRED CARE  
QUALITY DIMENSION



PARTNERING WITH  
CONSUMERS STANDARD



## Safe, high quality connected care

### Enhancing Supportive Community Care, Primary and Community Health

Enhancing Supportive Community Care (ECC) is a collaborative community-based multidisciplinary team that will provide care to people with late-stage degenerative and chronic conditions and disability. The service model is designed for people in the last two years of life with a focus on wellness and prevention of hospitalisation. This multidisciplinary team will be introduced in 2023 and will work in partnership with Northern Sydney Home Nursing Service, General Practitioners and other health service providers.



PATIENT CENTRED CARE  
QUALITY DIMENSION



## Safe, high quality connected care

### Safe and high-quality delivery of maternity care

Safe, high-quality maternity care requires the maternity team, including their leaders, to be coordinated, engaged, and patient-focused. The NSLHD Maternal, Neonatal and Women's Health Network is strengthening its governance systems and management processes to align with recommendations in the Governance and Accountability in NSW Health Maternity Services – Framework (CEC, Feb 2021).

Work has begun to establish an inter-professional co-leadership model with Obstetric and Midwifery co-leadership. These leaders will work collaboratively to create an environment where all staff are empowered and aligned with the NSLHD safety and quality priorities.

The introduction of dedicated safety and quality leaders (Patient Safety Officers, Clinical Midwifery Consultants and data and analytics experts), will support clinicians to understand and perform their safety and quality responsibilities.

Professional collaboration and leadership will ensure the performance of individuals, teams and services are regularly evaluated to facilitate learning, accountability, and improvement in an environment where all staff feel safe to speak up, innovate and receive feedback.



**SAFETY**  
QUALITY DIMENSION



**EFFECTIVENESS & APPROPRIATENESS**  
QUALITY DIMENSION



**CLINICAL GOVERNANCE**  
STANDARD



## Keeping people healthy and well

### Integrated Team Care (ITC) program

The Integrated Team Care program supports Aboriginal and Torres Strait Islander people in the Northern Sydney region to access culturally appropriate primary health care as required. The program provides care coordination services to eligible Aboriginal and Torres Strait Islander people with complex chronic disease/s who require coordinated, multidisciplinary care. The program aims to deliver culturally appropriate services to Aboriginal and Torres Strait Islander people and the Lesbian, Gay, Bisexual, Transgender and Intersex community.

There are 104 clients currently in the ITC program. PREMS and PROMS responses from community Integrated Team Care clients have informed the service of areas to focus on and where additional support is required.



**TIMELINESS & ACCESSIBILITY**  
QUALITY DIMENSION



**EQUITY**  
QUALITY DIMENSION



### A Safe Haven for young people

The Mental Health Drug and Alcohol Service received NSW Health funding to establish a Safe Haven for young people. A Safe Haven is a place people can go when distressed or if they are having suicidal thoughts as an alternative to attending an Emergency Department. A cottage at Macquarie Hospital has been refurbished to accommodate the new service, which in NSLHD will focus on young people. The service will be staffed by Youth Response Team clinicians and peer workers with governance under the Child and Youth Mental Health Service Director. Planning is underway to develop a model of care, processes, procedures, and key performance indicators. It is anticipated the new service will open to the public later in 2023.



**SAFETY**  
QUALITY DIMENSION



**PATIENT CENTRED CARE**  
QUALITY DIMENSION



## Keeping people healthy and well

### The NSLHD Alcohol and other drug Consultation, Assessment, Care and Intervention Service (ACACIA)

The NSLHD Alcohol and other drug Consultation, Assessment, Care and Intervention Service (ACACIA) is being developed to address issues related to problematic substance use in adolescents and historic gaps in care. The primary aim of ACACIA is the reduction of harms associated with Alcohol and other drug (AOD) use through the provision of specialist multidisciplinary assessment and interventions for ACACIA's target population – adolescents with moderate to severe issues related to problematic AOD use. This includes providing care directly to individuals and their families and carers and providing specialist consultation to other services supporting this target population. The ACACIA Service has replaced the Specialist Addiction Service for Adolescents (SASA), is currently providing medical consultations, and is in the process of recruiting the remainder of the multidisciplinary allied health team.

The service is based at Brookvale Community Health Centre and will service young people and their families across NSLHD.



**SAFETY**  
QUALITY DIMENSION



**TIMELINESS & ACCESSIBILITY**  
QUALITY DIMENSION



## Our staff are engaged and well supported

### Supporting Psychosocial Wellbeing at Work

A psychosocial risk management framework for NSLHD is currently under development and due to be launched in 2023. The purpose of this framework will be to support NSLHD to implement the Safework NSW Code of Practice for Managing psychosocial hazards at work.

People and Culture have reinvigorated the managers training module on workplace behaviours. This module was piloted in April 2023 with high attendance and has received excellent feedback. This module will become a requirement for all managers to complete once the framework is launched. It aims to support managers to support their teams in promoting acceptable workplace behaviour and is aligned with existing Speaking up for Safety training, Safe Behaviours Together program, and the Statement of Commitment to Creating a Safe Culture which was launched late March 2023.



## Research, innovation and digital advances inform and improve the delivery of patient care

### Self-service data analytics

NSLHD data needs have been growing and changing. Access to high-quality and timely data is essential to develop a comprehensive understanding of clinical performance and to inform opportunities for continuous system, process and practice improvement.

The NSLHD Analytics and Performance Unit and other key data teams are working on advancing the use of data across the district.

NSLHD's Advanced Analytics program explores innovative ways of using data from the electronic medical record system to support our staff to have greater insights into the quality of clinical care provided. The program is also exploring ways to simplify and automate otherwise manual and time-consuming data activities.

All districts within NSW Health is transitioning to a new data warehouse (Enterprise Data Warehouse for Analysis, Reporting and Decision Support) for mandatory reporting. This transition has provided an opportunity for NSLHD to modernise our data analytics approach to meet the district's data needs.

NSLHD is moving towards a practical and scalable 'self-service' approach to data analytics. A range of data dashboards will be made available for staff to access the data they need when needed. Additionally, to build staff confidence and capability with data analytics, staff will be strongly supported with training and resources to empower them to use data to drive healthcare improvement.



**CLINICAL GOVERNANCE**  
STANDARD

## Appendix: Attestation Statement



This attestation statement is made by **Mr Trevor Danos AM**

Holding the position/office on the Governing Body **Chair, Northern Sydney Local Health District Board**

For and on behalf of the governing body titled **Northern Sydney Local Health District Board**

**Northern Sydney Local Health District**

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.
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



Name

Mr Trevor Danos AM

Position

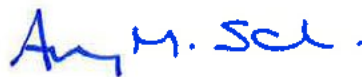
Chair, Northern Sydney Local Health District Board

Date

18/7/23

Counter signed by the Health Service Organisation's Chief Executive Officer (however titled)

Signed



Name

Adjunct Professor Anthony Schembri AM

Position

Chief Executive, Northern Sydney Local Health District

Date

18.07.2023



Northern Sydney  
Local Health District