

AM-5

Service Purchasing Request

The NSW Health Purchasing Framework informs the funding model by determining the annual mix and volume of services that should be purchased from Districts and Networks in order to deliver the objectives, goals and outcomes articulated through Future Health and the emerging priorities of both NSW Government and NSW Health.

Activity purchasing decisions are made to deliver health services that improve health outcomes, the experiences of receiving and providing care, and the efficiency and effectiveness of care.

Completing this request form will provide the required evidence for a purchasing request to be considered by the NSW Ministry of Health.

Please complete the form and return to System Purchasing Branch at MOH-ServiceAgreementSPB@health.nsw.gov.au or email if you have any questions about the form.

1. GENERAL INFORMATION

Completed By:				
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Date	17/04/2024			

2. PURCHASING REQUEST OVERVIEW

Overview							
Brief description of request	Funding of additional Activity and activation of additional ICU Beds						
Request reason	Built capacity						
Request type	✓ Activity	☐ Block	□ Both				
Total request	NWAU22 3740 NWAU \$ 19.5m						
Funding type Select one	☐ One-off	 R€	ecurrent				
Funding year	2024/25 and ongoing						
Net Present Value (\$) (if known)	\$	Benefit Cost Ratio (if known)					
Request impact	☐ Local Initiative	✓ Statewide Program	1				
Divestment/Offsets considered?	☑ Yes ☐ No	Value (\$)	\$				

3. PURCHASING REQUEST

3.1 Service description

In 2020 St Vincents Hospital Sydney (SVHS) received a capital works grant from the MOH to commence the Darlinghurst Integrated Campus redevelopment program. Part of this funding was to facilitate some immediate priority works for 6 additional Intensive Care Unit (ICU) beds. It was identified that current ICU capacity was inadequate to effectively manage the demand, with increasing access block resulting in cancellations in elective surgery, delayed inter hospital transfers and early discharges to the ward. It was acknowledged that the need for this additional capacity couldn't wait until the broader campus redevelopment, which would deliver significant and broader growth in health infrastructure for the people of NSW. Planning for the additional beds was delayed due to COVID-19, commencing in August 2021. Construction works are projected for completion prior to the end of June 2024. This crucial growth in essential infrastructure is in alignment with St Vincent's role as provider of Adult Intensive Care Services, as designated by the NSW Ministry of Health.

3.2 Need for service

Describe the need for the service, including:

- Provide local population health needs epidemiological, qualitative or quantitative data
- · The problem this service is trying to solve
- Identify inequalities or gaps in service

It has been identified that the current ICU capacity is inadequate to effectively manage current and projected demand, with an average occupancy of 97% during 2022-23.

Increasing access block in ICU has resulted in 100 cancellations of surgical patients requiring an ICU post op bed during 2022-23. Twenty-two of these were inpatients, who would have had an increased LOS as a result which would otherwise have been avoidable with sufficient access to ICU beds. These cancellations and delays of treatment also impact on patient outcomes and Theatre utilisation. Inadequate ICU capacity also leads to delayed interhospital transfers, after-hours discharges, and readmissions that are far above those of our peers.

St Vincent's provides specialised services that further impact on ICU demand. SVHS operates a Level 6 Emergency Department, delivers a Major Trauma Service, and is the sole provider of Heart and Lung transplantation and Haematopoietic Stem Cell Transplantation for Severe Scleroderma. It is one of three hospitals responsible for organ retrieval, and is designated by the state to deliver:

- Critical care incl. Extracorporeal Membrane Oxygenation and Intensive Care
- Transcatheter Aortic Valve Implantation (as the NSW referral centre)
- The Human Immuno Virus (HIV) Reference Laboratory
- The Bone Marrow Transplantation and Laboratory

SVHS is also a key referral centre for a number of other highly specialised services, with established referral pathways across NSW and beyond. This includes a formal partnership with Murrumbidgee Local Health District, with significant patient flows from the region for complex treatment and services often requiring ICU. The dual role in the public health system, providing services to the local community as well as highly specialised services for patients across the state, increases demand on SVHS ICU services, necessitating an increase in physical capacity to ensure efficient and equitable access.

The proportion of patients admitted to ICU following transfer from other hospitals has risen over past years. In a great majority of cases these patients require advanced care for severe respiratory failure and/or heart failure which cannot be provided in our peer hospitals.

- These patients are critically unwell and require significant resource inputs.
- ICU admissions following transfer from other hospitals contribute to about a quarter of our bed-occupancy and about 30% of all ventilator hours.
- The complexity of patient care is rising adding to an increasing number of bed days.

Should the broader Darlinghurst Integrated Campus Redevelopment program proceed, all ICU beds would be planned for a single podium, allowing efficient resource allocation and operationalization of the ICU bed base. In

the meantime, the additional 6 ICU beds will be located in a different location, separated by a floor from the main Unit. These beds will therefore function as a separate pod for the foreseeable future. Due to the significant staffing resources required to operationalise these beds, and the existing vacancies in ICU, a two staged implementation plan is proposed. The first stage would see 4 of the 6 ICU beds opening with the proposed commencement date of 1 July 2024. The opening of the final 2 beds would occur during the second stage, 6 months later, the proposed commencement date in January 2025

3.3 Outcomes / benefits

Describe:

 The creation of additional ICU capacity with the construction of the additional 6 beds is essential to maintain provision for specialised services for the people of New South Wales, and to provide appropriate care in a timely manner in the right place to maintain patient safety.

3.4 Strategic alignment

Select priorities or outcomes that this service will contribute to achieving:

Future Health priority	Regional Health priority			
Patients and carers have positive experiences and outcomes that matter	Strengthen the regional health workforce			
Safe care is delivered across all settings	Enable better access to safe, high quality and timely health services			
People are healthy and well	Keep people healthy and well through prevention, early intervention and education			
Our staff are engaged and well supported	☐ Keep communities informed, build engagement and seek feedback			
Research and innovation, and digital advances inform service delivery	Expand integration of primary, community and hospital care			
✓ Managing for a sustainable health system	Harness and evaluate innovation to support a sustainable health system			
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Oral Health Strategic Plan	NSW Aboriginal Mental Health and Wellbeing Strategy			
Oral Health Strategic Plan Improving oral health wellness across the population	NSW Aboriginal Mental Health and			
├─ Improving oral health wellness across the	NSW Aboriginal Mental Health and Wellbeing Strategy Holistic, person and family-centred care and			
Improving oral health wellness across the population Providing safe, high quality patient-centred	NSW Aboriginal Mental Health and Wellbeing Strategy Holistic, person and family-centred care and healing			
Improving oral health wellness across the population Providing safe, high quality patient-centred care	NSW Aboriginal Mental Health and Wellbeing Strategy Holistic, person and family-centred care and healing Culturally safe, trauma-informed, quality care			

Oral Health Strategic Plan

NSW Aboriginal Mental Health and Wellbeing Strategy

The availability and accessibility of Intensive Care beds directly impacts the hospitals' ability to provide care to sick and vulnerable patients requiring both elective and emergency treatment. The additional capacity is required to address the very high ICU occupancy and meet demand for our flagship specialist services in heart and lung transplantation and other cardiothoracic surgery, trauma and other complex surgery. The creation of this additional ICU capacity aligns closely with the SVHA mission and values, including compassion, justice, integrity and excellence.

4. ACTIVITY AND FUNDING BREAKDOWN

Describe:

- SVHS is currently 4.1% above YTD Feb 24 NWAU target (2,100 NWAU). Full Year Forecast is 2,260 NWAU above target. Funding for this activity is requested as majority is in highly complex surgery and ED where presentations have increased significantly.
- This table indicates the growth in NWAU (19%) produced by SVHS across the various inflow
 origins. Of note is the fact that flows have increased from Rural LHD's (30%) and continue to flow
 from Metro areas.

				NSW Not Further		Regional	SVHN	
Row Labels	Inner Sydney	Interstate	Metro	Defined	Overseas	& Rural	Catchment	Grand Total
2018-2019	7,037	661	3,875	361	845	5,284	5,591	23,654
2019-2020	7,069	662	4,450	254	751	5,839	6,067	25,091
2020-2021	7,045	966	5,061	300	514	5,862	6,165	25,913
2021-2022	7,710	808	4,796	256	415	4,454	6,980	25,419
2022-2023	7,682	817	4,274	173	764	6,126	6,784	26,619
2023-2024	7,661	905	4,662	330	892	6,879	6,821	28,150

- ICU receive 0.0437 NWAU per hour per patient. SVHS ICU beds are running at 97% occupancy, that being 24 hrs a day for the full year, then that will generate 370 NWAU annually per ICU bed.
- Total request for SVHS is an increase in NWAU funding of 3,740 NWAU.
- · Estimated cost of running one ICU bed is approximately \$2m.
- Please also note the impact of the Third Schedule Adjustment calculations are impacting on the allocation of funding (reduction). This requires review on its applicability to SVHS

5. DISINVESTMENT AND/OR OFFSET OPPORTUNITIES

Describe options considered:

 Reduce activity in line with ICU capacity, but this may not be a viable option as SVHS is a tertiary hospital that provides highly complex services across the State (and Australia).

6. OTHER

Nil