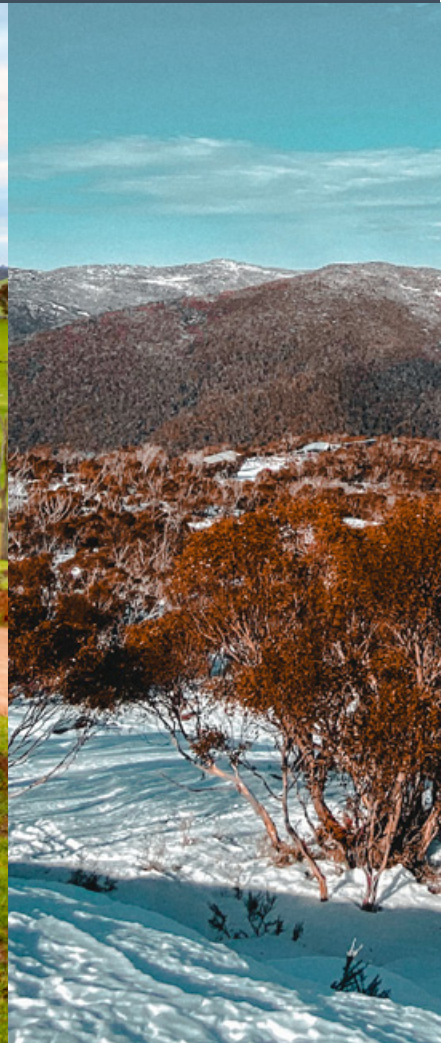


# Strategy 2026

“Leading rural healthcare”

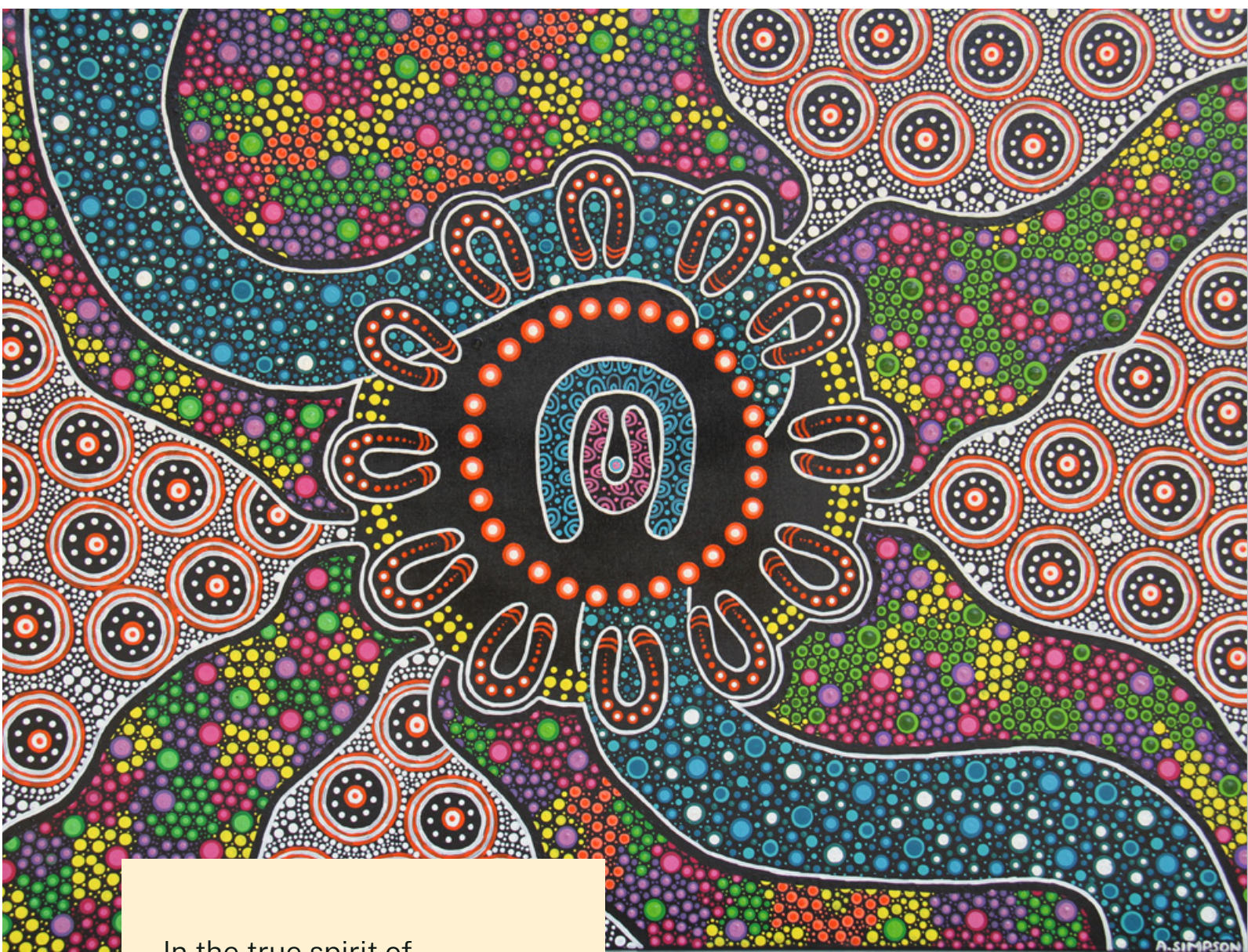
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Southern NSW  
Local Health District







# Contents

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05

Message from our Chief Executive and Board Chair

06

Get to know Southern NSW Local Health District

17

Our strategic priorities

41

Enablers

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**Strategy 2026 outlines the direction of the Southern New South Wales Local Health District for the years ahead. Southern NSW Local Health District aims ‘to be a recognised leader in rural healthcare’. Our Purpose is to improve the wellbeing of the community we serve.**

In the true spirit of Reconciliation and through embracing the values of collaboration, openness, respect and empowerment, Southern NSW Local Health District acknowledges and pays respect to the traditional custodians of the land; the Gundungurra, Ngarigo, Ngambri, Ngunnawal and Yuin peoples.

*“Partnerships and Collaboration” Artist: Alison Simpson*

We share and celebrate the rich history of the Aboriginal culture and recognise the diverse and proud Aboriginal nations across our District.

Southern NSW Local Health District acknowledges Aboriginal and Torres Strait Islander Elders, community members and staff for their ongoing contribution to society and their commitment to improving the health and wellbeing of Aboriginal and Torres Strait Islander people.





# Message from our Chief Executive and Board Chair

We are proud to introduce our refreshed Strategy 2026. Our plan provides a clear direction for Southern NSW Local Health District over five years. It guides our journey of renewal as we strive to become ‘a recognised leader in rural healthcare’.

Strategy 2026 outlines the five strategic priorities to deliver a sustainable health service that meets the needs of our community. The plan also highlights that services must be accountable, responsive and data driven. Elevate is the cultural framework and foundation to shape and guide our success in our commitment to consistently excel in everything we do. To do that, we seek to incorporate our CORE values of Collaboration, Openness, Respect and Empowerment with our patients and consumers, and with each other.

Strong collaboration with our consumers, neighbouring health services, community providers and government is integral to our provision of person-centred and integrated care. These partnerships will support better outcomes for our consumers and keep them healthy and well. The dedication of our staff and their pursuit of excellence is central to achieving the priorities identified in the Plan.

Our strategic priorities and enablers align with Future Health: Guiding the next decade of health care in NSW 2022-2032, and the NSW Regional Health Plan 2022-2032. These plans, along with Strategy 2026, recognise the importance of maintaining the highest quality healthcare in an environment of increasing demand and complexity.

On behalf of the Southern NSW Local Health District Board and Executive team, we would like to thank our staff, consumers, and healthcare partners for their contribution to Strategy 2026. We are committed to working ‘together as one’ to realise our strategic objectives by 2026.



*Margaret Bennett*

Margaret Bennett  
SNSWLHD  
Chief Executive



Elizabeth Hoskins  
SNSWLHD  
Board Chair



# Get to know Southern NSW Local Health District

## Our Story

### Our Future

**A recognised leader  
in rural healthcare**

### Our Purpose

**To improve the wellbeing  
of the community we serve**

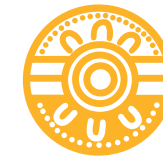
### Our Values



**Collaboration**



**Openness**



**Respect**



**Empowerment**

Our people are at the heart of what we do. We are committed to building a strong, vibrant culture that demonstrates our values in action. Our values underpin how we care for our patients, staff and the community every day.

*Artist: Deborah Stiles*







Elevate describes the way we work together at Southern NSW Local Health District. It signifies our passion and responsibility to ensure that we focus on lifting our people and performance to provide the high level of support and care that our staff, patients and community deserve.

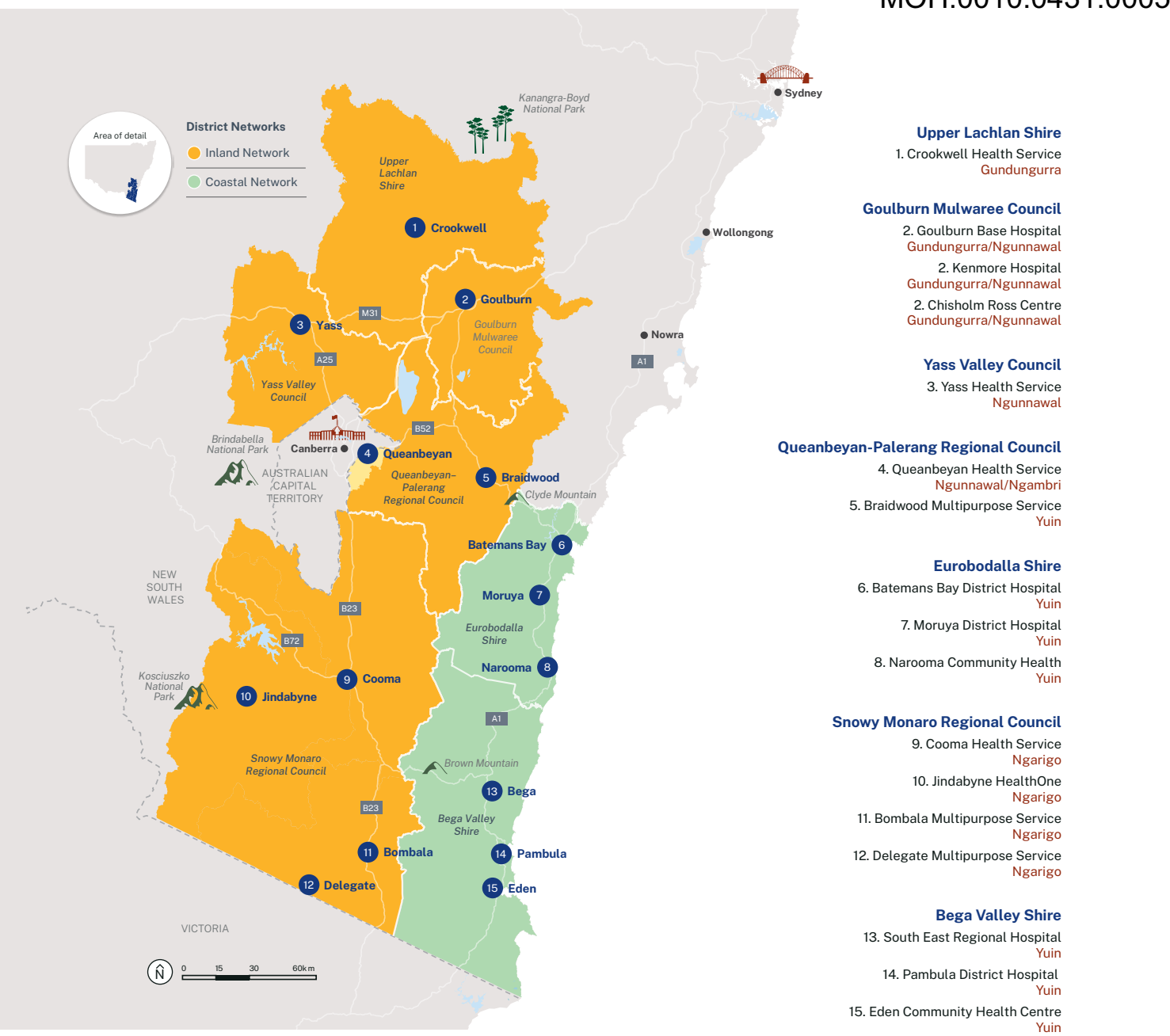
The Elevate logo colours remind us of the geographical diversity within our region as we provide services in our communities reaching from the mountains to the sea. From sunny beaches and picturesque tablelands to Mt Kosciusko's snowy mountain peaks, our network of facilities and services joined together to ensure we are delivering high quality, consumer-centred services.

We have a long history of providing excellent, safe care for our people and have worked tirelessly to overcome tragedy and disruption in our region. As we continue to engage our people, support recovery and improve outcomes the arrow in the Elevate logo reminds us to also focus on the future with clarity, purpose and direction.

'Together as one' is our mantra to be united in providing high quality, safe care to support our communities to lead healthy lives. We depend on the engagement of our nearly 4,000 staff, doctors

and volunteers as we strive towards greater alignment of goals, consistency of values in action, together with systems and processes that elevate our performance and outcomes. We are diverse, geographically dispersed and provide a vast array of services across many sites, however, we join together as Southern NSW Local Health District with a shared passion that enables us to provide services that meet the needs of those we support.

'Together as one' we are building an organisation where our patients, consumers, our people and community can see and feel the difference in how we provide care and support.



# Who are we?

Southern NSW Local Health District (SNSWLHD) provides public health care services across regional south-east NSW.

The District spans 44,534 square kilometres over seven local government areas (LGAs): Bega Valley, Eurobodalla, Goulburn-Mulwaree, Queanbeyan-Palerang Regional, Snowy Monaro Regional, Upper Lachlan and Yass Valley.

SNSW operates 15 health service sites including eight acute hospitals, three Multi Purpose Services, three community health centres and two mental health inpatient facilities.

SNSWLHD partners with ACT Health, tertiary partners and major Sydney hospitals to support local patients who require high-level specialist care.



# Our People

Our people are at the heart of what we do. We are committed to building a strong, vibrant culture that demonstrates our values in action. Our values underpin how we care for our patients, staff and the community every day.

2022-23 FY

277 

Allied Health

136 

Medical

50 

Other Prof & Para professional & support staff

496 

Corporate services & hospital support

1,252 

Nursing

49 

Scientific & technical clinical support staff

92 

Hotel services

27 

Oral health practitioners & support workers

24 

Maintenance & trades

0.2 

Other staff

3,101

Number of individuals employed



## Volunteers

Our volunteers are highly valued as key members of our organisation. We recognise and value the role our volunteers play in supporting us to provide quality health care and improve the health outcomes for our communities. Currently the District has many volunteer programs across its health sites and community based services, supported by the participation of hundreds of volunteers. We are working to enhance and enrich our current program, build our volunteer workforce, then look at future opportunities and partnership with NGOs, community based groups and corporate organisations.



## Community Engagement


Partnerships with patients, families, carers and community guide our future direction. Across Southern NSW Local Health District there are many Community Consultation Committees that provide advice, input and link communities with their local health services. Consumer representatives work closely with our teams to provide a lived experience perspective on the way we care for and deliver services across the community. Engagement with each community occurs in various ways including focus groups, open days and information sessions. We are committed to expanding our opportunities for engagement digitally, informally and in partnerships with other organisations. Our aim is for all people to be involved in the direction of health services now and into the future.



# Our Community

Our community is experiencing growing social, economic and health pressures. The way our community changes helps shape our growth, and our future models of care.


## People


219,353   
Residents in SNSWLHD


5 million   
Tourists attracted to the region's snowfields and pristine coastal areas

4.2%   
9,146 Aboriginal people (NSW 3.4%)

249,393   
Projected population in 2036

21.6%   
Aged 65 and older (NSW 17.2%)

Growth in residents by 2036  
18,851   
70+ years

45.7   
Average age (NSW 39)

1,230    
0-15 years

## Other Statistics



Life expectancy in our District is 85.8 for males (NSW 86.2) and 88.7 for females (NSW 89.0)



15.4% of residents are living with disability



203 intentional self-harm hospitalisations – much higher than NSW rate per 100,000 population (106.2 compared to 83.7)



11.8% of adults in 2019 had diabetes or high blood glucose



95.5% of children fully immunised at 1 year of age



10.5% of adults consume alcohol daily (NSW 6.5%)



64% projected growth in cancer diagnoses from 2011 to 2031



66.6% of pregnant women in SNSWLHD have their first antenatal visit before 14 weeks gestation (NSW 80.0%)



34.7% of adults consuming adequate fruit intake (NSW 37.7%)



2,219 hospitalisations related to falls in 2019/20



65.1% adults are overweight or obese (NSW 58.0%)



12.2% of adults smoke (NSW 11.4%)



566 hospitalisations for dementia in 2020/21



24.5% children are overweight or obese (NSW 22.1%)



13.6% of women smoke during pregnancy (NSW 7.9%)



1,786 residents reported having dementia in 2021



33% adults have high blood pressure



Aboriginal residents are more than twice as likely to be admitted for a potentially preventable condition



19.2% of adults have high or very high psychological distress (NSW 17.1%)



# A day at Southern NSW LHD

**6**   
people are discharged from our Hospital in the Home services

**1,739**  
people are seen/treated through non-admitted and community-based services


**89**   
people are admitted to a hospital/MPS

**4**  
people are admitted for psychiatric care

**81**  
people are admitted for acute care

**5**  
people are admitted for sub- and non-acute care

**50**  
SNSWLHD residents are admitted to a public hospital in the ACT

**331**   
people present to our Emergency Departments

36 people (10.8%) have serious conditions (Triage 1 & 2)

104 people (31.4%) are categorised as Triage 3

191 people (57.6%) have conditions that are not urgent (Triage 4 & 5)

**12**  
admissions are potentially preventable

**29**  
people complete their hospital stay on the same day as when they were admitted

**8**  
people are admitted for respiratory disease

**43**  
people are admitted for chronic kidney disease

**3**  
people are admitted for coronary heart disease

**2**  
people are hospitalised for dementia

**4.3**   
people birth in our District hospitals (multiple births counted as one)

**5**   
people die

**1.3**  
deaths are from cardiovascular disease

**0.7**  
deaths are tobacco related

**0.4**  
deaths are from chronic kidney disease



## In a typical year

**32,657**  
episodes of care in hospitals/MPS

**121,011**  
presentations to our EDs

**1,568**  
people births in our District hospitals (multiple babies birthed counted as one)

**125,704**  
bed days

**668,489**  
occasions of non-admitted care (635,003 involving the patient)

**12,967**  
operations

**12,292**  
renal dialysis occasions of service







# Our strategic priorities

## Our Challenges

- Higher level care for Southern NSW Local Health District residents is provided by partners in ACT or other NSW Local Health Districts and Networks.
- The burden of potentially avoidable deaths and hospitalisations caused by chronic diseases such as cardiovascular disease, diabetes, chronic obstructive pulmonary disease and cancer.
- High rates of developmental vulnerability among children.
- Financial and workforce limitations to respond to the service demands of the community.
- A relatively small population dispersed over a large geographic area.
- Vulnerable communities who may need to travel to access health care but may not have the infrastructure, social or financial resources to easily do so.
- Ageing population with complex health needs.
- Projected future increased demand for health services.
- Aboriginal life expectancy gap and high rate of chronic conditions.
- Attracting and retaining an engaged and highly skilled workforce.
- A changing environment and disasters such as drought, floods and bushfire.
- Maintaining financial sustainability.

## Our Opportunities

- Recognising and enhancing the skills our wonderful staff who care for our community.
- Using innovation in service delivery and adapting new models of care to meet the needs of our communities.
- Using virtual health care and technology to improve access to services, and deliver better patient outcomes.
- Renew our focus on and commitment to improving the health of Aboriginal people.
- Providing more out-of-hospital care and improving integration of care.
- Developing a regional approach to health and wellbeing in partnership with other healthcare organisations.
- Supporting high performing primary care by building stronger partnerships with the community, GPs, the Primary Health Network, Aboriginal Community Controlled Health Services and other service providers.
- Delivering a financially and environmentally sustainable health system.





# Our strategic priorities

Strategy 2026 has five strategic priorities supported by two enablers.

## Strategic priorities 1-3



### Elevating the human experience

Improved access to healthcare  
Patient designed services  
Empowered to make change in your health services



### Keeping people healthy and well

Healthy start to life  
Culturally safe health services  
Health needs approach to services  
Health promotion and prevention  
Minimise health impacts of natural disasters, epidemics and pandemics



### Delivering safe care in all settings

Equity in access  
Improved outcomes for ageing residents  
Care that is safe, respectful and dignified  
Align service directions with future care needs

**How we will support our patients and community**

**How we will support our people and organisation**

Collaborative work spaces  
Flexible working locations  
Active support and mentoring

Work that makes a difference  
Culturally competent and respectful staff  
Safe rosters

Connecting our regional partners  
Integrated service delivery

## Strategy priorities 4-5



### Supporting our people

Positive experiences  
Kind and compassionate workforce  
Strengthen diversity

Skilled team of professionals  
Pride in our work  
Agreed behaviours  
Zero tolerance to bullying  
System of accountability



### Value, sustainability, and research

Sustainable healthcare for the future  
Services that meet our people's needs  
Prioritise patient outcomes and collaboration  
Safe and high quality health services  
Improved health outcomes for our community  
Evidence based practice

Planning for our future  
Sustainable models of care  
Access to high quality research, education, and training outcomes  
Enhancing the skills and capabilities of our people

## Enablers



### Health data and analytics

Timely and up-to-date clinical information  
Choice of care modality

Real time performance and outcomes data



### Leadership and Governance

Coordinated and consistent care  
Integrated journey across health services

Collaborative teamwork across the District  
Role models for our values



# Strategy on a page

Southern NSW Local Health District has identified five strategic priorities and two enabling priorities that respond to our direction over the next five years. These priorities will guide our delivery of high-quality services with outstanding health and wellbeing outcomes for our communities.

## Our Future

**A recognised leader in rural healthcare**

## Our Purpose

**To improve the wellbeing of the community we serve**

## Our Values

**Collaboration, Openness, Respect, Empowerment**

## Our Strategic Priorities

### Elevating the Human Experience

- Partner with patients and caregivers to make decisions about their care
- Bring kindness and compassion into the delivery of personalised, high quality care
- Encourage greater health literacy and access to information
- Engage patients and caregivers in co-design and implementation of new models of care
- Strengthen equitable outcomes and access to care for priority populations

### Keeping people healthy and well

- Focus on healthy beginnings to ensure everyone gets the best start in life
- Make progress toward zero suicides recognising the devastating impacts on society
- Facilitate mentally healthy living for our whole community
- Close the gap by focussing on Aboriginal health and wellness
- Connect with partners to identify the social determinants of health within our communities
- Promote early intervention and prevention of chronic disease
- Prevent, prepare for, respond to, and recover from the health impacts of natural disasters, epidemics and pandemics

### Delivering safe care in all settings

- Embed a closer to home philosophy, delivering more services in the community
- Support healthy ageing ensuring people can live independently at home for longer
- Connect with partners to deliver integrated care services
- Deliver world class hospital care for all patients
- Align infrastructure and service planning around future care needs
- Enhance local transport solutions to support access to care as close to home as possible

### Supporting our people

- Strengthen diversity in our workforce and decision-making
- Empower staff to work to their full potential
- Enhance workforce capability through targeted training and development
- Build positive work environments that bring out the best in everyone
- Attract and retain quality workers who put patients first

### Value, sustainability and research

- Prioritise environmental sustainability initiatives to achieve net zero by 2030
- Sustainable procurement practices
- Use of virtual care to reduce travel miles
- Connecting Aboriginal health and sustainability
- Value based healthcare that prioritises outcomes and collaboration
- Safety and quality through innovative health and medical research
- Increase access to clinical trial programs
- Increase research projects
- Targeted health care through personalised and precision medicine





## Strategic Priority 1



# Elevating the Human Experience

We will empower our patients to make decisions about their healthcare, and provide personalised care to achieve the outcomes that matter most to our community.

## Our Objectives

### 1.1 Partner with patients and caregivers to make decisions about their care

#### How will we do it?

- Set clear goals for what healthcare we provide.
- Encourage the discussion about advance care plans with all patients.
- Periodically review the effectiveness of feedback systems.
- Understand what is important to the patient and family and what limits their access.

#### What will success look like?

- Choices offered where clinically appropriate.
- Increase in advance care plans in medical records.

### 1.2 Bring kindness and compassion into the delivery of personalised, high quality care

#### How will we do it?

- Define true kindness and compassion.
- Changing to people centred services.

#### What will success look like?

- Increase in person centred models of care.
- All staff complete Small Acts of Kindness training.

### 1.3 Encourage greater health literacy and access to information

#### How will we do it?

- Listening to feedback from clients/ patients.
- Invest in health promotion programs.
- Promote community awareness of how to access health services, both close to home and beyond where required.
- Target health literacy for priority populations.

#### What will success look like?

- Communities understand their health condition and related information.
- Improved rates of health literacy.



**1.4 Engage patients and caregivers in co-design and implementation of new models of care**

**How will we do it?**

- Embed community member representation on redesign and infrastructure change projects.
- Involve the voices of people with disability, their families and carers, to co-design services.
- Involve Aboriginal voices in the co-design of services.
- Re-launch of the REACH (Recognise, Engage, Act, Call, Help) program across the District.

**What will success look like?**

- Improvement in patient reported outcomes and experience.
- Increased knowledge of REACH in patient surveys.
- Increased community and consumer representation and co-design.
- Increase in people-centred system design.
- Improve health outcomes for Aboriginal people and people with disability.

**1.5 Strengthen equitable outcomes and access to care for priority populations**

**How will we do it?**

- Invest in services that meet community needs.
- Provide interpreters for the refugee and CALD communities.
- Further embed initiatives to provide cultural safety for Aboriginal people, such as cultural training, acknowledgement of country and including artwork where possible.

**What will success look like?**

- Increased engagement with representative community organisations.
- Services delivered in line with community need.



**Strategic Priority 2**



**Keeping people healthy and well**

By taking a wellness-focus, we aim to prevent the causes of ill health and establish equitable health outcomes in our community.



## Our Objectives

### 2.1 Focus on healthy beginnings to ensure everyone gets the best start in life

#### How will we do it?

- Implement the First 2000 Days Framework together with GPs and maternal and child health units and services in all areas of our District.
- Investment in health services for children and young people, including continuing to promote early access to preconception, early antenatal care and early intervention.
- Enhance the continuity of care for pregnant women to improve outcomes, with a particular focus on smoking in pregnancy and providing maternity services as close to home as possible.

#### What will success look like?

- Children in our community have improved developmental, physical and psychological wellbeing.
- Increase in perinatal support programs.
- Reduction in maternal smoking rates.
- Increase the percentage receiving early antenatal care.
- Reduce the percentage of low birth weight babies.
- Increase screening rates and timely access to early intervention services.
- Decrease rate, severity and complications of obesity in childhood.
- Maintain or improve immunisation rates.
- Reduce the percentage of children classified as developmentally vulnerable.

### 2.2 Make progress toward zero suicides recognising their devastating impacts on society

#### How will we do it?

- Expand mental health services targeted towards self-harm and suicide.
- Build mental health support in the community by working with GPs and other organisations.
- Invest in improving physical health for people with mental health issues.

#### What will success look like?

- Drastic reduction of self-harm and suicide within our communities.
- Facilitating access to timely intervention services.

### 2.3 Facilitate mentally healthy living for our whole community

#### How will we do it?

- Better understand the needs of our mental health clients by hearing about and sharing lived experiences.
- Partner with all community groups to optimise their well-being in the community.
- Improving access to support services for people with mental health issues.

#### What will success look like?

- Increase in information about mental health wellbeing.
- Reduction in self-reported rates of psychological distress.
- Reduction in mental health presentations and admissions.

### 2.4 Close the gap by focussing on Aboriginal health and wellness

#### How will we do it?

- Have clear targets created in consultation with all relevant groups to ensure action.
- Progress implementation of Closing the Gap priority service developments including culturally safe antenatal, postnatal and infant health services, and an increased focus on the early years and cultural safety.

#### What will success look like?

- More Aboriginal people access healthcare services when and where they need it.
- Lowered mortality rate.
- Decrease in potentially preventable hospital services.







## 2.5 Connect with partners to identify the social determinants of health within our communities

### How will we do it?

- Ensure that Closing the Gap action plan is alive and thriving in our District. Benchmark services against similar populations.
- Focus on the drivers or determinants of health.
- Continue work to prevent domestic, family and sexual violence and child abuse, in alignment with the IPARVAN (Integrated Prevention and Response to Violence, Abuse and Neglect) Framework.

### What will success look like?

- Increase in health promotion programs.
- Increase in life expectancy.
- Reduction in rates of adults and children who are overweight and obese.
- Reduction in smoking rates.
- Reduction in rates of domestic, family and sexual violence and child abuse.
- Increase in enrolments to Get Healthy Service.
- Reduction in burden of disease.
- Equity in services across our District.

## 2.6 Promote early intervention and prevention of chronic disease

### How will we do it?

- Implement prevention programs and services to target priority health challenges.
- Partner with GPs to undertake cancer and chronic disease screening.
- Promote healthy eating and an increase in physical activity.
- Implement vaccination programs.

### What will success look like?

- Reduction in rates of adults and children who are overweight and obese.
- Reduction in avoidable hospital admissions.
- Reduce alcohol, tobacco and drug related deaths and hospitalisation.
- Reduce incidence of alcohol intake and smoking, as well as e-cigarette use.
- Increase life expectancy.
- Reduce prevalence of chronic disease.

## 2.7 Prevent, prepare for, respond to, and recover from the health impacts of natural disasters, epidemics and pandemics

### How will we do it?

- Promote vaccination programs.
- Promote use of Personal Protective Equipment (PPE).
- Strengthen District disaster plans.

### What will success look like?

- Maintain or improve immunisation rates.
- All staff responsible for managing disasters are aware of their role.
- Strong partnership with cross government agencies and external service providers to support coordinated and integrated responses and planning activities.





### Strategic Priority 3



## Delivering safe care in all settings

We will think beyond the Hospital to provide safe, quality care in settings that can deliver better outcomes and experiences for patients.

## Our Objectives

### 3.1 Embed a closer to home philosophy, including delivering more services in the community

#### How will we do it?

- Invest in care options across the health journey.
- Education for communities on services provided.
- Focus on reversal of flows from the ACT.
- Develop and implement a single point of entry model to improve access and service navigation.
- Develop a District wide model for Hospital in the Home (HITH) services.
- Develop public outpatient services.
- Invest in flexible transport options that support timely access to care.

#### What will success look like?

- Care coordinators manage patient journeys.
- Choice of service providers and method.
- Improved self-management of health conditions.
- Increase in Hospital in the Home, ambulatory care and non-admitted activity.
- Increase in virtual health care delivery activity.
- Increase in public specialist outpatient services provided in the District including via telehealth.

### 3.2 Support healthy ageing ensuring people can live independently at home for longer

#### How will we do it?

- Optimise community based care.
- Better collaboration and meaningful communication with GPs.
- Ensure we live the philosophy that we value and actively respect the elderly in our community.

#### What will success look like?

- People receive care that is safe, respectful and dignified.
- Care coordinators manage patient journeys.
- Community accessing care in the home.
- Reduction in preventable hospitalisations.
- Timely access to coordinated care and smooth transitions across services.



### 3.3 Connect with partners to deliver integrated care services

#### How will we do it?

- Co-locate community health services with regional partners.
- Embed and monitor partnership agreements, processes, policies and Memorandums of Understanding (MoU)
- Partner with other LHDs to support workforce planning and sustainable models.
- Enhance virtual models across clinical streams and care settings.

#### What will success look like?

- Multidisciplinary approach to all services.
- Community health delivered in community hubs.
- Borderless health services.
- Increase provision of timely discharge summaries.
- Reduction in presentations related to local commissioned programs.
- Formalised agreements in place for cross-border and networked services.
- Patient journeys are connected across the health system.
- Increased access to virtual care services.

### 3.4 Deliver world class hospital care for all patients

#### How will we do it?

- Invest in our staff to maintain and acquire skills.
- Continue to invest in virtual care to improve access, while ensuring that it addresses cultural and digital barriers.

#### What will success look like?

- Increased access to specialist care.
- Reduced cost per separation.
- Improved elective surgery access.
- Improved emergency treatment performance and time.
- Improved data capture and generated revenue.
- Increased access to virtual care services.

### 3.5 Align infrastructure and service planning around the future care needs

#### How will we do it?

- Infrastructure plan developed.
- Partner with population health, planning and delivery providers.
- Implement and embed improved asset management, maintenance and replacement programs.

#### What will success look like?

- Local services based on community needs.
- Networks in place for services.
- Planning incorporates emerging trends for models of care.
- Planning addresses key demand for services.
- Amenities that support patient and caregiver emotional and physical wellbeing.
- Reduced cost of procurement and maintenance.







#### Strategic Priority 4



## Supporting our people

We will support a flexible, adaptable workforce to meet changing health needs and expectations, and deliver the best outcomes and experiences for our community.

## Our Objectives

### 4.1 Strengthen diversity in our workforce and decision-making

#### How will we do it?

- Embed and maintain staff profile to meet needs.
- Implement leadership principles to enable greater diversity and experience.
- Establish structured career pathways and identified positions to grow our Aboriginal workforce.
- Achieve rainbow tick accreditation through continued progress on our Pride in Southern initiative.

#### What will success look like?

- Increase number of women in leadership.
- Increase Aboriginal workforce as a proportion of the workforce.
- Increase workforce with lived experience of disability.
- Increase younger workforce.
- Increase mentorship opportunities for staff.
- Increase in the workplace culture index, psychological safety and reduced incidence of racism for staff.

### 4.2 Empower staff to work to their full potential

#### How will we do it?

- Develop Education/training strategy / key skills framework.
- Create an 'ideas fund' to generate ideas for improvements.
- Empower staff through ongoing implementation of Elevate.

#### What will success look like?

- Formal mentoring, education and development plans for all leaders.
- Renewal implemented from the ground up.



### 4.3 Enhance workforce capability through targeted training and development

#### How will we do it?

- Enhance feedback loop from clients/ patients.
- Define career pathways for all positions.
- Partner with other LHDs on agreed priorities for collaboration.
- Enhance our partnerships with universities to support research, education and workforce development and sustainability. Focus on developing and supporting our volunteers.

#### What will success look like?

- Succession plans in place for every position.
- Trauma informed care for all frontline staff.
- Increase the percentage of workforce completed cultural awareness training (face-to-face and online).
- Volunteers are onboarded and supported with training and resources.

### 4.4 Build positive work environments that bring out the best in everyone

#### How will we do it?

- Implement Elevate.
- Engage patients and clients in the assessment of health services.
- Empower staff as patient advocates.
- Support staff health and wellbeing programs.
- Improve the complaints and workplace grievance processes.

#### What will success look like?

- Kind and compassionate staff.
- Improvement in patient reported outcomes and experience.
- Improved complaint resolution.
- Staff who are well and resilient.
- Improvement in staff engagement and culture measures.

### 4.5 Attract and retain quality staff who put patients first

#### How will we do it?

- Align medical workforce establishment and sustainability to current and future needs.
- Targeted strategies to improve recruitment and retention rates.
- Partner with patients and carers to create meaningful content for staff and volunteer orientation.
- Promote the available recruitment incentive schemes to attract new staff to the District.
- Continue to plan for the development of key worker accommodation.

#### What will success look like?

- Reduced annual staff turnover.
- Continued networking opportunities.
- Shared employment strategies across the region/agencies.
- Decreased VMO and agency staff usage.
- Decreased staffing vacancies.







### Strategic Priority 5



## Value, sustainability and research

We will develop and promote innovations that support value-based healthcare, are environmentally sustainable and financially sustainable.

## Our Objectives

### 5.1 Prioritise environmental sustainability initiatives to achieve net zero by 2030

#### How will we do it?

- Develop a District Environmental Sustainability Plan.
- Establish and implement solar projects.
- Implement a plan to reduce food waste and improve patient experience.
- Apply a 'reduce, reuse, recycle' approach across the District.
- Plan transition to an electric vehicle fleet.
- Reduce staff and patient travel through use of virtual platforms.

#### What will success look like?

- Decrease in food waste at our facilities.
- Increase in recycling at our facilities.
- Decrease in energy bills.
- Decrease in cost of fuel.

### 5.2 Sustainable procurement practices

#### How will we do it?

- Increase access to accurate reporting for procurement.
- Continue to embed procurement and purchasing practices that are financially and environmentally sustainable.

#### What will success look like?

- Decrease in wastage of procurement items.
- Increase in environmentally stable product choice.



**5.3 Value based healthcare that prioritises outcomes and collaboration**

**How will we do it?**

- Embed Value Based Healthcare (VBHC) and Commissioning for Better Value (CBV) principles into planning for a new or enhanced service, to ensure that our health service is focussed on patient outcomes.

**What will success look like?**

- Reduction in avoidable hospitalisation rates.
- Increased satisfaction by patients and carers.
- Increased staff satisfaction.

**5.4 Improve safety and quality through innovative health and medical research**

**How will we do it?**

- Establish a Transformation Office to improve our capacity and capability to develop new research, innovation, partnerships and planning.
- Establish a clinical trials unit in partnership with other LHDs.
- Support staff to apply for research grants.
- Provide support for staff to incorporate research in their roles.



Enablers



## Enabler

# Health data and analytics

## Investing in digital health

### Our Objectives

- Integrated and accessible health data and information to be shared with clinicians.
- Investment in digital hardware and software.
- Technology enabled health care services and delivery models.
- Enable a digital literate workforce.
- Optimise capture of our activity to ensure our data reflects our service activity and complexity.

### How will we do it?

- Ensure our District is actively involved in the development of the Single Digital Patient Record.
- Continue to enhance cross-border health information sharing practices.
- Work with telecom agencies to support improved connectivity.
- Partner with other LHDs to further develop our Business Intelligence Data and Analytics.
- Provide training and support to optimise data capture for activity.
- Embed enabling technologies to support health system management including workforce, analytics and financial management tools.
- Embed Clinical Documentation Improvement Programs across all sites.
- Embed systems and processes to optimise data capture.

## Enabler

# Leadership and Governance

### Our Objectives

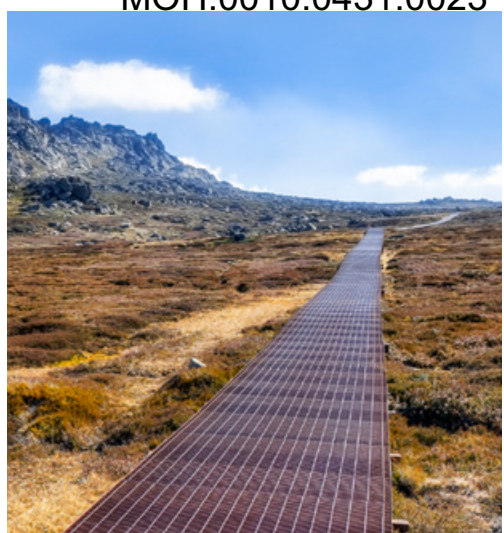
- Performance measures aligned with outcomes.
- Governance and leadership supporting the system and delivering outcomes.
- Continue to identify and harness 'critical friends' to improve our effectiveness.

### How will we do it?

- Growing innovative models of care.
- Flexibility to change quickly and nimbly.
- Invest in clinical and non-clinical leadership development.
- Staff are encouraged to share responsibility for renewal and improvement.
- Continue embedding the Elevate program across the District, with a focus on accountability, leadership, culture and operational consistency.











Southern NSW  
Local Health District