

Safety & Quality Accounts

Year in Review | 2024-2025 Report



2025-2026 Future Priorities

Acknowledgment

South Western Sydney Local Health District (SWSLHD) acknowledges the Traditional Owners of the land described in this document as south western Sydney; the Darug, Dharawal and Gundungurra peoples and their continuing connection to this land.

We acknowledge and pay respect to Elders past, present and emerging. We thank them for their leadership in improving the health of our local Aboriginal people and communities.



ISBN 978 1 74079 264 6

Contents

Acknowledgement	2
Board Chair and Chief Executive message	4
Consumer and Community Council message	5
Our District	6
Our services	7
Safe quality care and positive experiences	8
Quality Award winners 2024	14
Strengthen and promote healthier communities	18
Support and develop our people	24
Award winners	28
Lead research and innovation	30
Build a sustainable future	34
Update on previous priorities	40
Future priorities	44
Our leadership	47
Key performance indicators 2024-2025	48
Attestation statement	55

Board Chair and Chief Executive Message

Working together to continually improve the care we provide the people of south western Sydney is central to our work at the District. We take a multi-factored approach to meeting the health needs of our communities, seeking opportunities to understand and improve shortfalls, expand and scale improvements and celebrate our achievements. We foster research and innovation, building our capacity to interrogate our models of care through a lens of equity, to deliver the healthcare of the future.

This past year, we empowered our leaders to bring out the strengths of their teams, recognising that we truly are better together. Through this work, we are forging collaboration, breaking down silos and leveraging the expertise and creativity present across our District. Similarly, we are looking for new ways to work with our community, engaging a broader range of demographics in the design of our care.

We have applied this collaboration to many of the challenges we face providing care to such a large and diverse region – from clinical redesign projects to ensuring our patients and consumers receive the right care at the right time in the right setting. Looking at how we can take care out of clinical settings and into homes and community settings is expanding reach and transforming the experience for patients.

This year, we have combined our annual the Year in Review and Safety and Quality Accounts into a single publication, to showcase our achievements and offer transparency on our performance, both where we have achieved our goals and where we have further work to do.

Thank you to all District staff, volunteers, partners and supporters. We are incredibly proud of the outstanding work being carried out across South Western Sydney Local Health District, as we work towards our vision of leading safe, sustainable care for healthier communities. We could not achieve all we do without you.



**Adjunct Associate Professor
Billie Sankovic**
Board Chair



Ms Sonia Marshall PSM
Chief Executive

Consumer and Community Message



This year marks the 25th anniversary of consumer engagement in South Western Sydney Local Health District (SWSLHD), a significant milestone that reflects the deep and enduring partnership between our consumers and the District. The District's commitment to valuing and appreciating consumer perspectives has allowed for meaningful integration of their voices across all levels of the health service.

A major highlight of the year was the formal launch of the 7th Consumer Engagement Framework. Importantly, this framework was also developed and published in Easy Read format, ensuring greater accessibility and inclusivity for our diverse communities. This has further been supported by the increased engagement with our online platform, Engage South Western Sydney Local Health District, which has had over 6000 unique views.

Our consumer networks have expanded, a testament to the dedication and impact of our consumer and community engagement managers. We are also proud of the strengthened partnerships with key community groups, including the Pasifika Council, the Vietnamese Community of Australia (NSW Chapter), and our local councils.

These collaborations, supported by our consumer and community engagement managers, have fostered greater trust and ensured their community voices are heard and respected across a range of projects.

Consumers have been instrumental in supporting District through impactful contributions, such as:

- Success in meeting accreditation standards under the Partnering with Consumers criterion. This year, we achieved accreditation in Oral Health, Primary & Community Health, and Mental Health – each recognising the excellence of our consumer partnerships.
- Achievements to service planning and quality improvement initiatives, including:
 - The Homeless Dental Outreach program reaching its embedding stage,
 - The Not 1 More Minute campaign, and
 - The development of local sepsis information resources.

Major redevelopment projects, particularly in Bankstown and Fairfield, where engagement activities and public consultations have been highly successful, giving insight to inform future planning.

Playing a vital role in shaping recognition across the District, including participating in the review and selection of recipients for the Board Award and Quality Awards.

As we reflect on this milestone year, we celebrate the collective achievements of our consumers, staff, and partners. Together, we continue to build a more inclusive, responsive, and community-driven health system for South Western Sydney.

South Western Sydney Local Health District
Consumer and Community Council

Our District

South Western Sydney Local Health District (SWSLHD) covers an area of 6,243km² across the Local Government Areas of Canterbury-Bankstown, Fairfield, Liverpool, Campbelltown, Camden, Wollondilly and Wingecarribee.

This area includes a diverse mix of urban and regional landscapes and is home to some of the most multicultural communities in Australia.

The south western Sydney community is among the fastest growing in the nation and is expected to grow to around 1.2 million people by 2031.

Facilities and Services

SWSLHD is home to six hospitals and a range of community-based health services including:

- Bankstown-Lidcombe Hospital
- Bowral & District Hospital
- Camden Hospital
- Campbelltown Hospital
- Fairfield Hospital
- Liverpool Hospital
- Mental Health Service
- Primary and Community Health Service
- Oral Health Service
- Drug Health Service
- Aboriginal Health Service
- Population Health Service
- Multicultural Health Service

Our Care 2024-25



10,645

Babies born



315,000

Presentations to our Emergency Departments



263,569

People admitted to our Hospitals



1,434,188

Occasions of service provided through outpatient clinics



60,676

Operations completed in our Hospitals



117,853

Drug Health occasions of service



417,420

Primary and Community Health occasions of service



17,303

Prevention and Response to Violence Abuse and Neglect (PARVAN) occasions of service



350,638

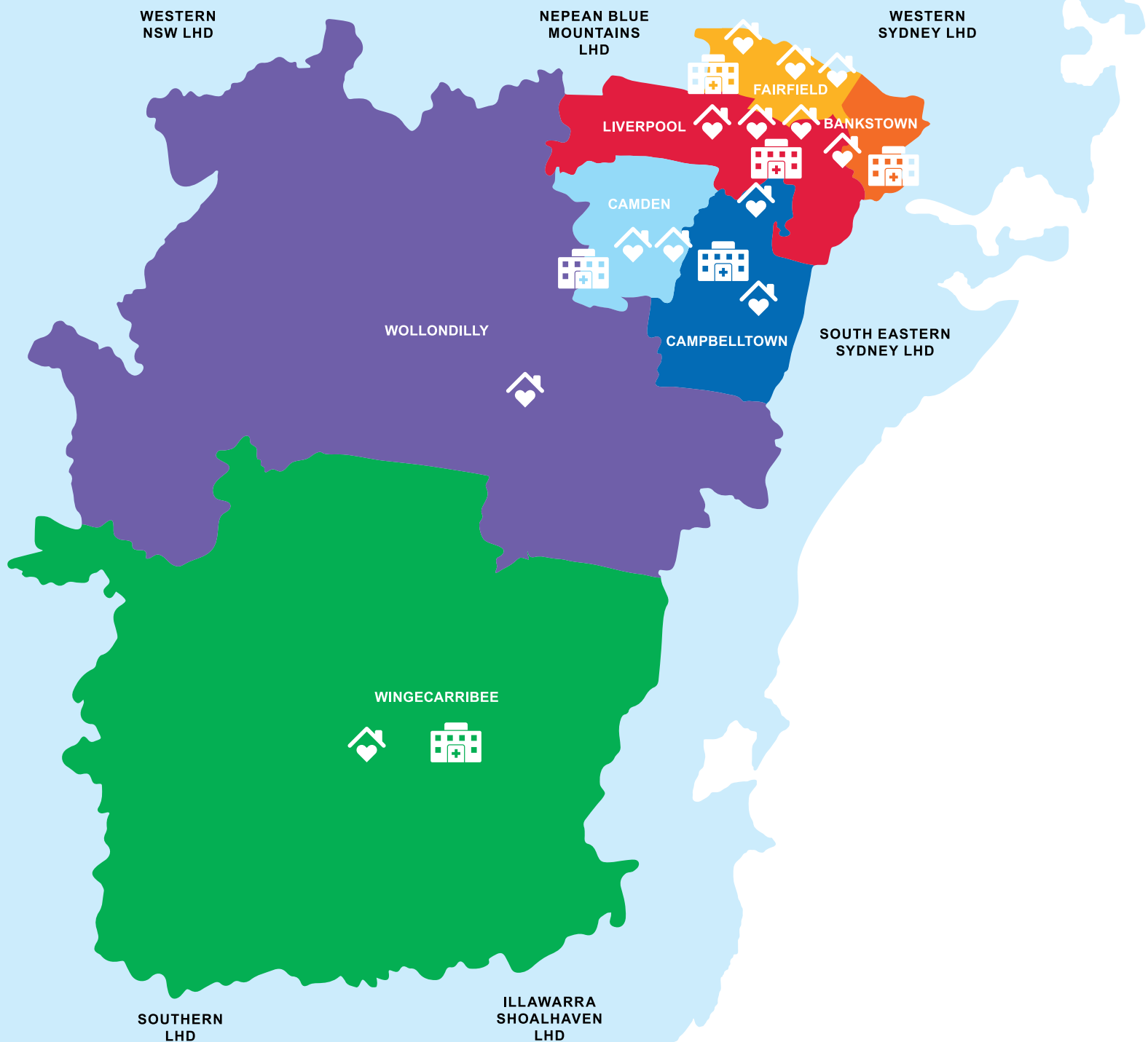
Mental Health occasions of service (service events)





87,206

Oral Health Occasions of Service

Our Services



KEY  Hospitals  Major Community Health Centres and Integrated Health Hubs

Safe quality care and positive experiences

To support south western Sydney communities to thrive, we must not only provide safe, high-quality care we must also ensure our services are respectful, compassionate, person-centred and individualised and that patients are truly partners in their care.

We must engender trust with communities by listening and adjusting services to ensure they are culturally responsive.



Continuous improvement

Our vision of leading safe, sustainable care for healthier communities guides our work and the strategic directions set out within the Strategic Plan 2022-2027 Framework.

Our first Strategic Direction, 'Deliver safe quality care and positive experiences', has clear objectives and supporting plans enabling the delivery of safe, consistent, timely, high-quality care to our communities. The SWSLHD Clinical Governance Framework 2023-2028 is built upon state and national models including the Australian Commission on Safety and Quality in Health Care National Model Clinical Governance Framework. Our Quality Plan operationalises the Clinical Governance Framework.

The Board's Health Care Quality and Safety Committee provides strategic direction and oversight of quality and safety systems and processes.

Our integrated reporting process to the Board committees includes reviewing Service Level Agreement (SLA) key performance indicators, safety and quality-related risks, and updates on the Strategic Plan. Our hospitals and services maintain full accreditation status, providing assurance of strong and effective governance for safety and quality.

Our District's Safety and Quality Essentials Program leads the state in terms of implementation. Training is being successfully delivered at foundational, intermediate and adept levels.

The Clinical Redesign Program is well established and integrated within the District. There are currently nine redesign projects being undertaken within the District, with planning underway to initiate 'Rapid Redesign' projects between July-December 2025.

Introduction to Project Management workshops resumed in April with strong uptake. Accelerating Implementation Methodology (AIM) training continues to be delivered across the District to uplift the capability of our staff in completing quality improvement and clinical redesign projects.

Transforming Your Experience

Transforming Your Experience (TYE) is the lens through which we provide care and make decisions. We continuously work to find new and better ways of partnering with our patients and their carers, and supporting our workforce and volunteers who deliver care and contribute to our health service.

We implement TYE through a set of tools which foster our Core Values: Collaboration, Openness, Respect and Empowerment. All facilities and services have progressed with the implementation of TYE, with 80 per cent of

units consistently implementing relevant TYE tools as of 30 June 2025 (up from 73 per cent at December 2024). All facilities and services have action plans in place to support the remaining units to consistently implement TYE.

This year, we introduced an introductory learning model to provide staff with the knowledge and confidence to understand the background of the TYE strategies and its application to improving quality and safety for all.

Hello my name is...

Introducing ourselves to patients, consumers and staff is critical to developing trust and rapport with patients and consumers, and to support effective communication between staff. It also helps create a positive workplace where there is clear communication between staff.

The 'Hello my name is..' campaign was launched in August 2024 prompting staff to begin interactions with patients, carers and consumers with a warm introduction. Since the campaign launch, data from patient experience surveys, My Experience Matters Surveys has shown that staff are introducing themselves more consistently.





Elevating the Human eXperience

At the Transforming Your Experience –Elevating the Human eXperience Symposium we celebrated all the ways we work together to enhance the experience of our patients, consumers, carers and their loved ones. We heard about a range of topics including the achievements of TYE since its inception in 2018. We explored some of the ways we elevate the children’s voice and how we engage with our diverse communities.

Engaging with our community

The Engage SWSLHD community consultation platform has been launched to facilitate digital consumer engagement. One of the first projects to use the platform was the development of the Consumer and Community Engagement Framework, which resulted in 162 unique views via the platform. Since the launch of Engage, in-person engagement has also increased as a result of our projects being available to new audiences.

Consumer engagement is supporting our District’s antenatal redesign, urology redesign, Child Safe Standards implementation, interpreting for equity clinical redesign, remote patient monitoring and the patient entertainment system (PEX) in Campbelltown Hospital.

Our teams are going out into the community through events such as the Vietnamese Community

of Australia Health Expo, Specialist Menopause Service Multicultural Community Information Session, Liverpool Health and Academic Precinct Redevelopment Community Open Day, TAFE and NSW Community and Government Expo.

Achieving Safe Staffing nursing levels

In alignment with the NSW Government’s Safe Staffing initiative, South Western Sydney Local Health District (SWSLHD) has made significant progress in implementing nurse-to-patient ratios across key hospital sites, enhancing patient care and workforce sustainability.

Liverpool and Campbelltown Hospitals have successfully gone live with Safe Staffing ratios in their Emergency Departments, resulting in the employment of additional nurses. Bankstown-Lidcombe Hospital has commenced recruitment for Safe Staffing implementation for their Emergency Department, with plans to employ an additional 37.05 FTE nurses.

This staffing uplift enables:

- 1:1 nursing care for generally occupied ED resuscitation beds across all shifts.
- 1:3 nurse-to-patient ratios for generally occupied ED treatment spaces and short-stay unit beds on all shifts.

To date:

- Liverpool Hospital has employed an additional 34.32 FTE nurses.
- Campbelltown Hospital has employed an additional 41.67 FTE nurses.

The implementation of Safe Staffing across SWSLHD focuses on strengthening workforce capability and improving patient safety outcomes. By introducing nurse-to-patient ratios and increasing frontline nursing staff, the District is actively addressing key safety and quality indicators — such as timely care, reduced clinical risk, and enhanced patient experience. This alignment ensures that Safe Staffing is not only a workforce initiative but a critical component of the District's broader commitment to delivering safe, high-quality healthcare.

End-of-life care

We have enhanced the capacity of both our staff and community when it comes to making end-of-life decisions. The first Dying To Know Expo was held at Yagoona Community Centre in August 2024, featuring interactive workshops, informative talks and personal stories, participants gained valuable insights into planning for the end of life, understanding their options, and supporting loved ones through the process.

Meanwhile, staff across the District were empowered to support those in their care through attending workshops on effective end-

of-life conversations. The workshop builds both confidence and capability in navigating sensitive conversations with patients, families, and carers.

Streamlining our care

Work to streamline patient care by improving access to diagnostic tests, ensuring faster discharge and enhancing patient safety is being undertaken across each of the hospitals in our District.

Liverpool Hospital is a pilot site for the Discharge Patient Flow Portal predictive analytics, an algorithm that is used to identify patients with complex needs early in their stay so their care can be better managed.

The implementation of the Nurse Navigator initiative at Bankstown, Fairfield, and Hoxton Park Community Health Centres introduced a nurse-led model to improve intake coordination, triage, and care delivery resulting in significant reduction of missed visits.

Developed through root cause analysis, staff feedback, and process mapping, the role enabled real-time scheduling, clearer communication, and reduced reliance on the nurse unit manager.

Outcomes included full elimination of missed visits at two sites, an 80 per cent reduction at the third, and a drop in unscheduled daily visits from 400 in 2023 to 56.7 in early 2025. Compliments rose from 11.1 per cent to 44.4 per cent. By embedding leadership, support standardised workflows, and data tracking, the model strengthened safety, efficiency, and responsiveness.



The Hospital to Home Collaborative has improved access to community-based care referral pathways, improving the patient experience and care journey. During the pilot, 596 eligible patients were identified, with early results showing improved coordination, timeliness and transfer of care for patients leaving hospital, better management of patients at risk of readmission and improved discharge planning.

Reducing length of stay post appendectomy

Traditional surgical management of acute appendicitis across New South Wales involves admission and emergency laparoscopic removal of the appendix as an inpatient followed by one to two nights in hospital for continuing observations. In collaboration with patients, clinicians at Campbelltown Hospital have successfully trialed a novel clinical pathway that allows patients to be discharged on the day of their surgery. This project has changed the surgical and postoperative management of patients presenting to the facility with suspected or acute appendicitis to enable the patient to be safely

discharged into the comfort of their own home on the day that their surgery is performed at Campbelltown Hospital. The trial has resulted in positive outcomes for patients, with none requiring readmission for post-surgical complications.

Aboriginal Health

Our District built a model of shared service management, which fosters collaboration between service providers and our Aboriginal Health Unit. This approach harnesses both clinical and cultural expertise and has led to multiple Aboriginal Health Models of Care implemented across inpatient and community health settings.

To assist in adapting models of care to be culturally responsive to the needs of Aboriginal people and communities, the Aboriginal Health Unit has collaborated with Primary and Community Health to develop a collaborative service statement. This includes a set of governing principles, roles and responsibilities, and systems to support the co-management model. We are in the final stages of producing a cultural adaptation toolkit, which will support District-wide services in developing culturally-adapted models of care.

Children's Short Stay Unit at Campbelltown Hospital

Campbelltown Hospital has opened a new specialist Children's Short Stay Unit in its Emergency Department – the first in NSW.

The new \$50,000 unit includes four beds and two isolation rooms with ensuites and was delivered as to ease pressure on hospitals and improve the flow of patients through the system.

The purpose-built unit is co-located but physically separated from the 12-bed children's acute zone within the department. Each bed has full cardiorespiratory monitoring capacity.

The new unit provides more than 100 children each week an alternative to inpatient care for less serious conditions including asthma and respiratory illnesses, gastroenteritis, abdominal pain, and injuries such as fractures, sprains and dislocations. This improves flow through the paediatric ED space.





Serving our diverse communities

South western Sydney is one of the most multiculturally diverse regions in the country. Culturally-responsive care is a key consideration for our District to ensure equitable access to care for all the communities who call the south west home.

We work closely with our communities, partnering with organisations such as Community First Step, CORE Community Services, Arab Council Australia and the Assyrian Resource Centre to foster health and wellbeing and make connections with migrant communities.

We have delivered in-language focus groups with Vietnamese, Chinese, Hindi, Pasifika, Arabic and Assyrian communities, which informed the design of menopause services to better meet community needs. We have provided training for mental health

staff and the administrative teams at Fairfield Hospital's Emergency Department to help them work more effectively alongside interpreters. Our many projects aimed at improving healthcare for our diverse communities included projects such as the Arabic Bilingual Trial Navigator, which empowers the Arabic-speaking community to participate in clinical trials as well as dementia education sessions, and a health passport for African communities support targeted engagement and health literacy. In partnership with universities, we explored Artificial Intelligence (AI) and plain language tools to improve health information access for culturally and linguistically diverse (CALD) communities, with multiple research papers submitted.

CALD voices were embedded in service design through research advisory roles, culturally appropriate patient reported outcome measures (PROMs) reviews, and a new bilingual co-design pilot funded by the NSW Health Literacy Hub.

Quality Award winners 2024!

South Western Sydney Local Health District recognises excellence through the annual Quality Awards Program. These awards acknowledge the contribution of clinical and non-clinical teams to the high standards of care and service delivered within the District.



Board Award

Primary and Community Health

Hospital avoidance for bloods tests for children and young adults with severe disability and challenging behaviours - Innovative pathways in the community

Primary and Community Health has developed a new model of care allowing children and young adults with severe disability and challenging behaviours to undergo blood tests without the need for hospital care.

Staff Member of the Year

Katherine Kelly - Disability and NDIS Coordinator

Katherine exemplifies visionary leadership in healthcare, seamlessly integrating innovative strategies with effective change management to enhance service delivery and patient care.



Patient Safety Champion

Nicola Chappelow - District Stroke Service

Nikki is an outstanding individual who demonstrates a true desire to improve patient safety and care for the residents of south western Sydney.

Environmental Sustainability

Primary and Community Health

SWSLHD GoShare Healthcare Pilot 2023-24

Primary and Community Health has implemented GoShare, a digital resource library and content distribution platform, across seven services, significantly reducing reliance on paper-based materials.

Excellence in Aboriginal Healthcare

SWSLHD BreastScreen

Following in the Footsteps of my Sistas Video: Breast screening for Aboriginal Women in south western Sydney

Following in the Footsteps of my Sistas was developed through a partnership between SWSLHD BreastScreen, the Aboriginal Health Unit and the Health Promotion Service. The video was created by, with and for local Aboriginal women to engage local Aboriginal women in screening.



Health Research

Oral Health Services and Ingham Institute for Applied Medical Research

The Diabetes-Oral Health program:
A research partnership

Research partnerships with diverse stakeholders resulted in the development and implementation of a Diabetes-Oral Health model of care for diabetes educators.

Health Innovation

Liverpool Hospital

Home oxygen policy evaluation (HOPE) study: Earlier discharge, better feeding and less time on oxygen through a comprehensive nurse-led home oxygen program

HOPE improves safety and uniformity in practice for infants diagnosed with chronic neonatal lung disease without increasing length of stay or the number of infants being discharged on home oxygen therapy. It also empowers parents with infants who do require home oxygen therapy to take their baby home earlier.



Keeping People Healthy

Drug Health Service

RISE: Skills for emotional resilience

The innovative skill development therapeutic group, known as Resilience and Insight through Skills of Emotion regulation (RISE), targets the intersection of substance use, adverse childhood experiences and overall health outcomes, focusing on education, tools for emotion regulation and resilience-building.



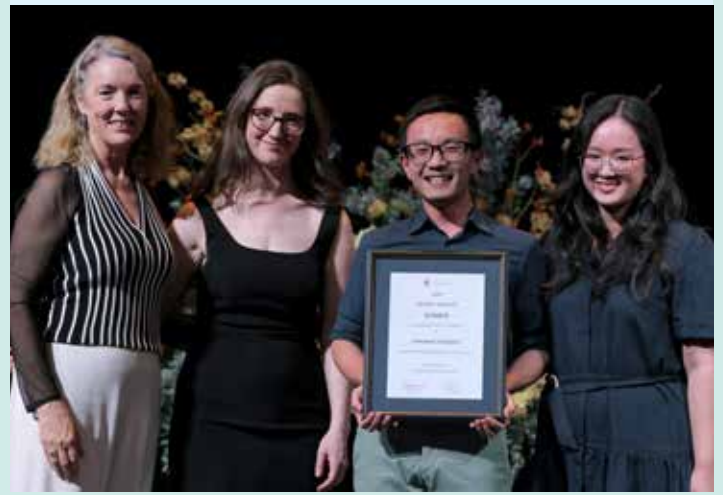


Patient Safety First

Campbelltown Hospital

Empowering patients for safety: Enhancing anticoagulant treatment experience in Emergency Departments with collaborative patient-centered care

A standard process for addressing issues surrounding the use of direct oral anticoagulants (DOAC) in Emergency Departments was implemented in consultation with a multidisciplinary team of physicians and pharmacists. Outcomes included improved access to medication, post discharge compliance, and patient reported engagement, satisfaction and confidence with treatment.



Transforming Patient Experience

Liverpool Hospital

Treating acute myeloid leukaemia in ambulatory care

Liverpool Hospital Cancer Services has developed an outpatient model of care to deliver cytarabine, a form of chemotherapy which reduces the risk of relapse for acute myeloid leukemia. This Model of Care has transformed the experience of patients requiring long-term treatment for this condition, giving them control over their treatment delivery.



Bright Ideas

Campbelltown Hospital

Primary laser of ureteric stones – A novel, efficient and value-based model of care

A collaborative project between clinicians, patients and administration has shifted the treatment paradigm for acute ureteric colic to perform up-front primary ureteroscopy and laser lithotripsy (P-URPS) at Campbelltown Hospital. This initiative has prevented patients having to stay overnight, reduced re-presentations, saved almost \$5,000 per patient, improved patient-reported outcome measures and produced measurable carbon savings.

People and Culture

District Palliative Care and Interpreter Service

Improving interpreter integration in palliative care settings

Using a multi-stage education program along with clinician reminders, the team has improved pre-briefing process for interpreters in palliative care and cancer settings.



Transforming Your Experience - Clinical

Kate Short - Liverpool Hospital

Kate has been integral in several innovative programs which have not only resulted in positive outcomes for children's communication and health, but also in developing the clinical knowledge and skills of paediatric clinicians across the District and State.



Transforming Your Experience – Non-Clinical

Erin Jelacic - Primary & Community Health

Erin is the first Aboriginal Health Worker to be established in the Aboriginal Community Paediatrics Pathway and has made a significant impact on the cultural responsiveness of the service. Erin has a high standard of care and this is reflected in the increase in patient attendance rates at the paediatric clinics and the wrap-around services being provided to the children and families who are linked to the service.



Volunteer of the Year

Larry Voegt – Campbelltown Hospital

As the Pastoral Care Volunteer Coordinator at Camden and Campbelltown Hospital, Larry Voegt empowers his fellow volunteers to attend to patients' spiritual needs at some of the most trying times of their lives.

His own approach to care comes from a non-denominational and humanist perspective recognising that spiritual health is important for patients, consumers and their loved ones.



2024 Harry Collins Award for Excellence in Consumer and Community Participation

Varsha Tembe



Strengthen and promote healthier communities

Empowering our communities to strengthen their health is one of the most important things our District can do to improve the quality of life for the people of south western Sydney. By working collaboratively with our diverse communities and listening to their individual and collective needs we can offer prevention programs and care in a way that helps them feel comfortable and safe, improving health outcomes and reducing the need for acute care in our hospitals.



Dental care outreach

In the past 12 months, the District's Mobile Dental Service Program has seen a total of 68 patients experiencing or at risk of homelessness through a pilot project in the Macarthur region, 'Homeless individuals deserve healthy smiles'. The project is delivered in collaboration with local NGOs and community service providers, including Uniting Church Campbelltown, St Vincent de Paul, and the Women's Shelter in Narellan.

The Mobile Dentist Service focuses on public school children during school term, and during downtime over the school holidays is now able to service additional priority populations.

Showcasing maternity service options

The Maternity Service Open Days introduced an innovative consumer-focused approach to increasing accessibility to health information and services. The days allowed us to build relationships with the community through preventive and proactive strategies, supporting earlier engagement, and improving outcomes across pregnancy and the first 2000 days of a child's life.

Maternity Open Days empowered families with evidence-based information to support informed decision making, reduce health risks, and promote healthier pregnancies, aligning with key preventative health strategies.

Held across five sites over four months, the events attracted over 1,400 consumers. Of the 210 consumers who completed an evaluation, all indicated they would recommend the event to friends and family.

This initiative is the first of its kind in NSW and is being replicated in other hospitals across the State.



This diverse project team demonstrates what can be achieved through collaboration and innovation.

Targeted diabetes care

Among the south western Sydney population, 14.5 percent of people over the age of 16 have diabetes or high blood glucose levels. Our District works in many ways to support people with diabetes and address lifestyle factors and preventative measures.

In March 2025, the National Association of Diabetes Centres (NADC) Accreditation Committee recognised the Liverpool Hospital High Risk Foot Service as a NADC Centre of Excellence Interdisciplinary High Risk Foot Service. The service has a multidisciplinary approach, supporting patients through well-coordinated care between services and self-management. They were also recognised for their evidence-based decision making, clinical information systems and focus on proactive maintenance of good health and complication prevention.

Diabetes Centres of Excellence also actively

bridge the gap between the acute care hospital system and the care provided by primary care and community services.

One key project in south western Sydney is the Pasifika Preventing Diabetes Program, a groundbreaking lifestyle, church-based initiative empowering Pasifika communities to detect, prevent and manage type 2 diabetes. The pilot study, Le Taeao Afua (which translates to 'a new dawn'), showed significant health and lifestyle improvements and sparked broader community health progress. Pasifika communities collaborate with researchers and organisations as equal partners to identify and address community health needs.

Menopause support, anywhere

In July 2024, we opened a virtual hub to enhance support available to women experiencing severe or complex menopause symptoms. The 10-person team includes medical, nursing and allied health professionals and offers the flexibility to attend



appointments through telehealth consultation using a phone, computer, laptop or handheld device. Face-to-face consultations are also available as required.

Culture leading the way

In collaboration with our partner, Tharawal Aboriginal Corporation, we established an integrated hub for paediatric allied health care at Tharawal early education centres. The hubs deliver two models of care:

- Primary prevention and early identification, educators and allied health (psychology,

occupational therapy and speech pathology) clinicians work together to support and promote children's development in the classroom.

- direct care, where children identified with greater health or developmental need can access a clinician on site. These include a child and family health nurse, developmental paediatrician, psychologist, speech pathologist, occupational therapist and dietitian. An Aboriginal Child and Family Health Connector supports families through case management.

The integrated hub has increased identification of developmental vulnerability, improved access to culturally-responsive care, enhanced coordination of supports across systems. This has led to better child health outcomes including readiness for school, and increased educator and parent confidence.

Pathology testing for children with disability

The Primary & Community Health Specialist Intellectual Disability Health Team identified a need for equitable options to access blood testing for children and young adults with severe intellectual disability and challenging behaviours. The development of a new, community-based, patient-centred, equitable access pathway offers an alternative to hospital-based care by enabling blood collection in familiar, non-clinical environments such

as schools and homes, as recommended by carers.

The pathway, delivered in partnership with a large pathology provider, has demonstrated potential cost savings, improved patient outcomes, carer satisfaction and carer satisfaction.

Supporting multicultural communities

Our Multicultural Service team leads and supports a range of initiatives to foster connection with, understand and improve health outcomes for diverse communities.

We are addressing health literacy by looking at a range of initiatives to support how people access, understand, appraise and apply health information in order to make decisions about their health and navigate the complex health system. Implementation of the SWS Health Literacy Framework 2024–2029 is underway, with the establishment of an implementation advisory group.

We have received a number of grants supporting in-language co-design, AI literacy, and digital inclusion for migrant and refugee communities to progress this work.

Several bilingual and multicultural research projects progressed to implementation or publication stages, including the Arabic Cancer Clinical Trials pilot, the Strengthening Emergency Engagement





& Communication for Multicultural Communities initiative, and the co-design of a multilingual online health information hub.

Other projects include:

- Consultation with culturally and linguistically diverse (CALD) communities about the planned redevelopment of Fairfield Hospital.
- Targeted health literacy and cancer screening projects, including a bilingual educator-led project for Arabic, Chinese, Greek and Lao communities (funded by Cancer Institute NSW).
- The Pacific Islander end-of-life care project
- The Multicultural Men's Shed for Assyrian and Arabic men
- The Vietnamese stroke literacy initiative.

Equitable access to vaccinations

We recognised that some populations have lower immunisation rates and have established the

SWSLHD Priority Population Immunisation Project (PPIP). Led by the Public Health Unit, it aims to improve access to and delivery of immunisations to vulnerable populations.

We are taking a multi-pronged approach:

- Improving immunisation awareness and knowledge in priority populations by building trust, improving equity, and driving culturally-responsive engagement through sustained partnerships with community groups and external stakeholders.
- Identifying opportunities to take immunisations directly to the community, through our own health services and working in partnership with local community organisations and other agencies.
- Supporting our workforce to understand and meet the health needs of priority populations.
- Strengthening data-driven decision making.

From April to June 2025, four school-based clinics in Intensive English Centres vaccinated 46 refugee



students delivering 160 catch-up vaccinations, while 30 community-based clinics provided vaccinations to 519 vulnerable individuals.

Vulnerable populations

We recognise that some people and groups in our community need additional or tailored support to meet their health needs.

Over the last five years, 19,000 people have arrived in NSW as humanitarian entrants, with over 10,000 of these settling in south western Sydney, with 7,000 in Fairfield and nearly 3,000 in Liverpool.

In 2024-2025, NSW Refugee Health Service provided 1,393 newly arrived humanitarian entrants with a nurse-led health assessment. We provided 1,042 primary health care clinic appointments to asylum seekers, while a Refugee Health school nurse provided health screening to 452 high school students attending Intensive English Centres. Overall, these screenings resulted in 123 referrals to the Refugee Health dietitian, 183 referrals to the Refugee Health disability support team and 43 referrals to occupational therapy.

In June 2025 we marked Refugee Health Week by setting up a 'Refugee Camp in My Hospital' on the grounds of Fairfield Hospital. Staff were led through

a simulated camp by guides with lived experience and NSW Refugee Health staff to give insights into the refugee experience and the barriers they face in accessing care.

Addressing the needs of our consumers

Child and family health nurses partnered with women and families, offering culturally-safe education about female genital mutilation, giving them the skills to intervene respectfully and effectively to prevent this harmful and illegal practice.

The health needs of those experiencing or at risk of homelessness continues to be a focus. A partnership with Homes NSW has strengthened the process for and increased referrals to temporary accommodation for south western Sydney Drug Health and Mental Health clients who are homeless or at risk of homelessness. This work continues across District facilities and services.

People experiencing mental ill health may experience difficulty accessing, affordable food. A new clinician-led screening and referral tool was developed to identify and support individuals. Embedded in routine mental health care, it

enables timely connections to food and social supports, aiming to reduce health disparities and improve long-term health outcomes of mental health consumers.

South West Kids

The District is leading the transformation of children's healthcare services in the region through the South West Kids Strategy.

Supporting children and their families to thrive across all stages of life, South West Kids expands on our centre of excellence in paediatric care at Campbelltown Hospital. It demonstrates our commitment to enhancing and expanding children's services to provide high-quality, safe and responsive care close to home, reducing the need for families to travel outside the area.

The Statewide First 2000 Days of Life framework is being implemented in south western Sydney, recognising these crucial early days of a child's life will have a big impact on the next 30,000 days (that's 82 years). What happens from conception to age five shapes a child's development and mental and physical health throughout their life as 90 per cent of a child's brain is forming over this time.

In 2024, our District received \$2.23 million from the NSW Government to improve equity in healthcare access for priority groups living in the Bankstown Local Government Area. A new model of care was developed based on principles of integration, continuity of care and stacked services models across the first 2000 days of life.

Eligible women (and their children) with perinatal substance use and/or a disability will receive care from a single service, which includes nursing, medical and allied health support, from pregnancy



Support and develop our people

Our workforce is our greatest asset. Developing a skilled and capable workforce who are passionate about supporting their communities is vital in delivering our vision of leading safe, sustainable care for healthier communities.



Better together

Building culture by design is one of the key priorities for the District's executive. Under the 'Better Together' umbrella is a program of work to drive a positive shift in culture across the District's sites, services and directorates. Better Together is about fostering an organisational culture that encourages staff to deliver safe, sustainable care in a way that embodies the CORE values. This culture:

- **Looks like:** teams working together to solve complex problems in an innovative, patient-centred way.
- **Sounds like:** open, respectful communication where colleagues can exchange constructive feedback in the interest of helping one another to grow.

- **Feels like:** a place where people are supported to try new things and empowered to tackle challenges head on.

The groundwork for Better Together was laid at the 2025 Leadership Forum, which involved workshops on Gallup's Strengths framework to empower leaders to leverage the strengths of their teams and build something greater than the sum of its parts.

Leadership strategy

To deliver safe, high-quality care to the people of south western Sydney and be an employer of choice, the District needs great leaders who take accountability in the moments that matter, demonstrate courage in the face of the unknown, and work effectively with and through others to achieve great outcomes without compromising on kindness or compassion. At the 2025 Leadership

Forum, we launched the South Western Sydney Local Health District Leadership Strategy 2025 –2028. The strategy is designed to build the capability and capacity of our workforce. It enables us to be an organisation where everyone feels confident they can come to work and be the best version of themselves as they deliver safe, sustainable care for healthier communities.

Diversity inclusion and belonging

The Diversity, Inclusion and Belonging Committee was established, focusing on key priority populations across the District. The committee has created a governance framework for the District with hospital-based committees feeding in to the District-level committee, sharing ideas and projects. Two workshops were conducted to identify the committee's priorities and key actions, with working groups being formed. Complementing this work, the District's partnership with the Diversity Council of Australia provides the opportunity for all staff to have access to membership resources, including:

- Inclusive Recruitment and Career Development
- Culturally Safe and Psychologically Supportive Work Environments
- Communication, Policy and Systems Reform.

Aboriginal trainees

Aboriginal and Torres Strait Islander people are at the forefront in shaping our Services to meet the needs of the Aboriginal communities across the Dharawal, Darug and Gundungurra lands. The District is expanding its Aboriginal workforce, while training and nurturing individuals to reach their potential. The Aboriginal Workforce Team supports the community and staff to develop their skills across a broad range of careers. In August 2024, 22 Aboriginal trainees commenced the Aboriginal Trainee Program. Two have completed their studies and moved into permanent employment and 17 continue their training. Seven students currently undertaking the Aboriginal Allied Health School-Based Traineeship Program are expected to complete the program in December 2025.

You said, we did

The People Matter Employee Survey (PMES) is an important indicator of staff engagement and satisfaction. Since reviewing and refining data capture in 2023, the Organisational Development team has worked with leaders and their teams on tailored PMES action plans to improve their areas of the workplace. Initiatives include recognition programs, increased communication between leaders and staff, education and development opportunities and more. The results also inform District-wide initiatives, such as the development of the leadership strategy and flexible work practices. Results of the 2024 People Matter Employee Survey showed a four per cent improvement in people believing the District acted on survey results, a five per cent increase in satisfaction with flexible working and a five per cent increase in satisfaction in learning and development.



Staff wellbeing

It is important we support our staff to prioritise their own health and wellbeing.

Implementation of our SWSLHD Wellbeing Framework and Plan continues, supported by the District's Wellbeing Committee.

Staff Health Clinics were developed and piloted in January 2025 to give staff an opportunity to have a general health check-up, discuss healthy living factors and family history, and receive referrals to relevant services.

'Connect and Care' workshops commenced providing education to leaders and managers on engage with



injured workers and supporting those at particular risk of a psychological injury. We are supporting injured staff to recover at work through the appointment of an occupational physician who works proactively with injured staff, treating doctors and health professionals, the Recover at Work Team and others. We continue to review and update policies and procedures relating to return to work and work, health and safety, to improve and standardise practices across the District.

Our annual influenza vaccination campaign delivered more than 14,000 doses to staff, protecting themselves, their patients and consumers and their loved ones. Overall, 92 per cent of the District's frontline were vaccinated.

Staff are informed of upcoming initiatives through a quarterly wellbeing newsletter, which highlights key calendar and event dates, the staff vaccination program, and offerings such as Fitness Passport, wellbeing webinars and opportunities to get involved in team activities and competitions.

Communicating with colleagues

Following on from the 2024 "Hello my name is..." campaign, where staff were encouraged to begin interactions with patients, consumers and carers with a simple introduction, Transforming Your Experience championed a campaign to strengthen collaboration, particularly at the frontline of care, where the effective exchange of information is vital.

Clear, concise and respectful communication helps us work together to ensure we deliver safe, high-quality care and positive experiences to our patients and consumers.

ISBAR is helpful mnemonic tool to ensure staff relay relevant information. Standing for Introduction, Situation, Background, Assessment and Recommendation, ISBAR gives staff a quick way of ensuring clear and concise information transfer during handovers.

Professional education

Reviewing and elevating the professional education we provide to frontline staff has been a key focus for the Education and Organisational Development Team this past year. This work has included courses on basic and advanced life support, emergency care assessment and treatment (ECAT) and the dementia capability and capacity framework. A suite of courses aimed at the early recognition of deteriorating patients includes updates to the 'Between the Flags' protocols, which assist clinicians to recognise when patients are deteriorating and respond appropriately. In partnership with the University of Newcastle, we are developing virtual reality learning modules for sepsis and hypovolemia (low blood volume).

Through structured mentoring, targeted clinical education, and regular reflective practice sessions more than 350 staff have developed the skills needed to perform effectively as Registered Nurses or Allied Health professionals. The program has a 99 per cent retention rate and great feedback from participants. A new pilot program scheduled for 2026 will provide nine new graduates opportunity to work in a perioperative environment.

A project supporting nurses and midwives to perform skills like venepuncture and cannulation empowered them to take ownership in the development of clinical skills and care practices. By addressing systemic barriers to training completion and enhancing professional development, the initiative promotes a supportive and evolving work environment and enhances timely patient care.

Inaugural Corporate Services Conference

In October 2024, the District hosted its Inaugural Corporate Services Conference. With the theme, "We are the future", more than 90 corporate staff from across the District attended the day, which delved into a range of topics including customer service, leadership and data-driven decision making.



Human at Heart: Culture Focused Leadership in NSW

Exploring the connections between kindness, accountability and the experiences of our staff, patients, consumers, carers and families was the overarching theme of Human At Heart: Culture Focused Leadership in NSW Health.

This special Human Experience Week event facilitated in partnership with the Ministry of Health gave us the opportunity to look at our CORE values of Collaboration, Openness, Respect and Empowerment and the ways we can build our workplace culture around these values.



NSW Health Awards

WINNERS

Excellence in Aboriginal Healthcare

Culture leading the way

Primary and Community Health

This project improves access to paediatric allied healthcare for Aboriginal children through a culturally-led partnership. The hub has provided 542 appointments to Aboriginal children, improving coordination of culturally-responsive care and child health outcomes.



Excellence in the provision of Mental Health Services

Aboriginal mental health transfer of care

Mental Health and Aboriginal health

This model provides short-term (6-8 week) support to assist patients from hospital to community care. The team offers early support, helps navigate care, and manages discharge for Aboriginal and Torres Strait Islander patients with mental health needs.



Keeping People Healthy

Improving physical and mental health in people with severe obesity

Camden Hospital

This holistic multidisciplinary model improves access to care and enhances physical and mental health for people with severe obesity. It has shown significant improvements in obesity-related comorbidities, quality of life, psychological distress and eating disorders.

SWSLHD finalists

Environmental Sustainability – Reducing the use of disposable non-sterile barrier plastic gowns

Multicultural Healthcare – Multicultural partnership strategy for Liverpool Hospital redevelopment

Order of Liverpool Awards

Liverpool City Council
Health Professional of the Year

Dr Glen Schlaphoff, Head of Department
Interventional Radiology, Liverpool Hospital

2024 ZEST Award

Outstanding Community Partnership Award
Fairfield City Health Alliance Gambling Working Group

The ZEST awards recognise and celebrate the achievements and innovative work of the community sector across Western Sydney.

NSW Nursing and Midwifery Awards

SWSLHD winner

Judith Meppem Lifetime Achievement Award

Sandy Eagar, Nurse Manager,
South Western Sydney Local Health District



Sandy Eagar's journey in nursing spans nearly five decades, and over those years she has left an indelible mark on emergency nursing, nurse education, and refugee health nursing, demonstrating a remarkable commitment to excellence in each role.

Sandy's lifelong commitment to nursing is inspirational, touching the lives of countless patients and their families, colleagues, and stakeholders across the healthcare system: a testament to her exceptional leadership, advocacy, and unwavering compassion.

SWSLHD finalists

Nursing and Midwifery Leadership Award - Sangam Shiwakoti, Clinical Nurse Educator, Liverpool Hospital

Midwife of the Year - Victoria Elder, Midwifery Unit Manager, Bowral & District Hospital

Team of the Year - Coronary Care Unit, Liverpool Hospital

Excellence in Allied Health Awards

SWSLHD winner

Allied Health Professional of the Year

Dr Kate Short, Speech Pathologist, Liverpool Hospital



Kate is a respected health clinician, educator and researcher currently working as a Senior Speech Pathologist at Liverpool Hospital, Senior Lecturer at the University of Sydney, and an Adjunct Fellow at Western Sydney University.

She is passionate about translating evidence-based practice into care and focuses on child development and prevention/intervention for children with communication disorders and those experiencing adversities.

SWSLHD finalists

Aboriginal Allied Health Professional of the Year Cheryl Martin, Social Worker

Allied Health Educator of the Year Karishma Deo, Pharmacist

Allied Health Leader of the Year Manasi Thornley, Occupational Therapist

NSW Premier's Awards

Honourable mention in for World Class Education and Training - Vocational Education in Schools program

Finalist Staff member of the year - Bernadette Brady



Lead Research and Innovation

Always striving for better is at the heart of our thinking, planning and working at South Western Sydney Local Health District. Innovation and research must be embedded in care and decision making.



The future of research and innovation

A strong research culture is vital for achieving equity and delivering outstanding health outcomes for our diverse communities. As healthcare is complex and ever evolving, it is important we remain agile in our research priorities, which can have a significant impact on patient outcomes by enabling access to new and novel treatments, procedures and technologies.

With a strong research legacy on which to build, the District's Research Strategy to 2030 outlines how we will continue this success through five strategic directions:

- Prioritising translational research for local and global impact
- Driving equity through research that is inclusive and culturally led
- Enhancing research capacity and capability through agile, responsive systems that support our people
- Leveraging local, national and international research partnerships
- Increasing access to clinical trials for our community

We recognise the importance of finding and creating solutions to the health challenges our

community faces and the complexity of healthcare delivery. By implementing systematic approaches to research and innovation, we can empower our staff and teams to tackle these challenges, ensuring we deliver fit-for-purpose healthcare and, ultimately, better outcomes for our patients and communities.

The Inspire South West Sydney: Driving Impact Through Innovation Strategy defines what innovation looks like across our District. It outlines how we will embed innovation within daily operations, creating an environment that encourages creativity and curiosity across all levels of the organisation by supporting and scaling great ideas and projects.

The first initiative launched to support innovation identification is the OpenIdeas Platform. The platform invites staff from any area to share ideas to enhance the way we work, provide care and collaborate. A panel identifies those ideas which can be implemented or scaled, and connects contributors with relevant support.

Cutting edge interventional radiology

The opening of Australia's first multifunctional Interventional Radiology Suite at Liverpool Hospital has set a new world-class standard in life-saving patient care and medical innovation.

The pioneering facility combines cutting-edge magnetic resonance imaging (MRI), angiogram, computed tomography (CT) and sonar (ultrasound) in one purpose-built, centralised location.

Dubbed the IR-MACS suite (IR to the Max), it features the latest interventional CT, a ceiling-mounted angiographic suite and a wide-bore MRI across three state-of-the-art rooms. The technology can operate individually or as a single, seamless allowing patients to undergo highly complex, combined procedures without leaving the table, delivering unparalleled safety, and unprecedented precision and outcomes.

From minimally-invasive procedures that kill cancer cells in tumours, to blocking the flow of blood in aneurysms, IR-MACS is redefining interventional radiology and saving lives.

The unit also allows specialist staff to deliver this advanced care in a radiation-free environment - without the burden of lead aprons - marking not only a technical leap forward, but a meaningful shift in how the hospital cares for those who care for others.



Personalised immunotherapy for treatment-resistant cancer

Liverpool Hospital has been chosen as one of two sites in NSW to deliver CART-T personalised immunotherapy, which uses a patient's own white blood cells re-engineered to fight disease. cutting-edge Immune Effector Cell (ICE) therapies, of which CART-T-cell therapy is one of the most common, has been revolutionary in curing patients with treatment-resistant cancer who would have previously died. The new ICE therapy centre will also be a home for research and clinical trials for complex cell and gene therapies.

Expanding research in the Macarthur region

Our partnership with the Ingham Institute for Applied Medical Research continues to expand, with a new research centre nearing completion on the Campbelltown Hospital campus.

Being delivered in partnership with Western Sydney University, the Ingham Institute for Applied Medical Research and UNSW Sydney - with the support of Walker Corporation, the \$55 million Lang Walker AO

Medical Research Building - Macarthur will deliver world-leading research and innovation to improve patient outcomes in south-western Sydney.

The new building will be home to the Ingham Institute for Applied Medical Research Macarthur and provide the latest research technologies, laboratories and collaboration spaces in the new multi-storey, purpose-built facility.

Local clinicians and researchers will help find answers to complex health issues in the community such as diabetes, mental health, Indigenous health, paediatrics and child wellbeing, and addiction medicine.

The locally-based expertise will improve community access to clinical trials, enhance local health care and lead research of national significance and global impact.

Allied health research leadership

The District has welcomed Professor Cathie Sherrington as Conjoint Professor of Allied Health, in partnership with the University of Sydney. Conjoint Professor Sherrington is an internationally recognised leader in physical activity promotion and falls prevention, with a distinguished career focused on improving outcomes for older adults and people with chronic conditions. She began her clinical and research journey in south western Sydney and through her work, will continue to strengthen our commitment to innovative, evidence-based care.



Driving equity in cancer research

The District is proud to be a founding partner for the Australian Centre for Cancer Equity (AcCE), along with Cancer Institute NSW and The Ingham Institute for Applied Medical Research. With parts of south western Sydney communities facing socio-demographic challenges, we see firsthand the disparity in healthcare this creates.

The unequal burden of cancer on communities is worsened by limited access to life-saving treatment,

lack of opportunity to participate in clinical trials, and a global under-representation of vulnerable populations (some of which have multiple vulnerabilities) in cancer research. AcCE targets each of these factors and tailors solutions with three strategic priorities identified:

- Identifying research and funding opportunities, particularly around equity and access for priority populations, to support the implementation of the National Lung Cancer Screening Program
- Identifying opportunities and funding to improve participation in clinical trials and research for priority populations.
- Ensuring digital innovation and artificial intelligence consider the particular health and access needs of, and applications for vulnerable populations. AcCE received a \$100,000 grant from the Avant Foundation to create a multilingual chatbot to provide cancer information to patients, which will commence in June 2025. Future opportunities are being explored in a collaborative project involving key stakeholders including community partners, Digital Health and Multicultural Health. The project aims to reduce re-admissions in cancer patients through the Emergency Department, exploring ways to prevent patients being admitted to hospital and improve patient outcomes.

Nursing and midwifery research

The South Western Sydney Nursing and Midwifery Research Alliance (SWS NMRA) is fostering the future of care by empowering nurses and midwives to take on research projects to improve patient outcomes for generations to come. SWS NMRA's Quarantine Research Time Program (Q RTP), a first-of-its-kind, provides a structured, evidence-based approach to building research capability, grounded in adult learning principles, it directly addresses key barriers to clinician-led research. Since its inception late 2022, 59 nurses and midwives took part in the Q RTP with 90 per cent completing a research protocol and ethics application, 61 per cent preparing and or publishing manuscripts 11 per cent taking on a higher degree in research. In SWS NMRA sponsored 146 research projects in 2024-2025, supporting 28 higher degrees, with three complete at with seven Universities and 84 peer-reviewed publications (a 150 per cent increase from previous year).

Frailty in the prediction of delirium in the intensive care unit

A research project to determine the most effective nursing-led interventions in preventing adverse events experienced by patients in Intensive Care Unit (ICU) is under way through NMRA in collaboration with Local Health District Critical Care Research in Collaboration and Evidence Translation (CCRiCET) group. Approximately 50 per cent of adult patients admitted to the ICU experienced an adverse event such as delirium, a pressure injury or hospital acquired infection. This study is examining the relationship between frailty and episodes of delirium in the ICU.

Research highlights

Conjoint Professor Justine Naylor from Fairfield Hospital received a grant from the HCF Health Foundation to investigate the effectiveness of the Hospital in the Home (HITH) for Hip Fracture Patients following low-trauma hip fracture. This is the first HITH program for hip fracture in the District and the first Allied Health-led HITH program.

Dr Padmanesan Narasimhan from Bankstown-Lidcombe Hospital received a National Health and Medical Research Council Grant to research an AI chatbot to address language barriers in Emergency Department triage and improve triage outcomes, admission rates, and the length of stay for patients.

Professor David Simmons from Liverpool Hospital was invited by medical journal The Lancet to collaborate with local and international experts in the gestational diabetes mellitus (GDM) field to complete a three-paper special series.

Research Showcase 2024

'Harnessing Diversity' was the theme of the 2024 Health Beyond Research & Innovation Showcase, celebrating one of south western Sydney's greatest strengths – our vibrant, diverse community.

Our region's rich tapestry of cultures, ages, life stages, socioeconomic backgrounds, abilities,



genders, and LGBTQIA+ identities were at the heart of the showcase, where we highlighted how our innovative research addresses the unique needs of this dynamic population.

Partnering with leaders in our region

Partnerships help shape and amplify the District's work. We collaborate with educational institutions such as schools, universities and the Department of Education, local governments, research institutes, (such as The Ingham Institute of Applied Medical Research and Victor Chang Cardiac Research Institute) and Affiliated Health Organisations such as HammondCare's Braeside Hospital, Karitane Children's Services, the NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS), and the Benevolent Society's Scarba Services.

Regional partnerships such as the Campbelltown Health and Education Precinct (CHEP) and the Liverpool Innovation Precinct (LIP) help us advance the goals of our organisation and enhance the lives of our communities.

Through CHEP, we have engaged in TAFE NSW project developing a roadmap for their health programs in south western Sydney, building on CHEP's advocacy for increased program offerings at the TAFE Campbelltown campus. CHEP recently welcomed a new member – Genesis Care, which provides cancer care services to the Macarthur community at a new purpose-built facility in Campbelltown. Design work is now underway for the CHEP wayfinding and connectivity project. Funded by the NSW Government, the project focuses on linkages between Campbelltown Hospital and the TAFE NSW and Western Sydney University campuses.

Build a sustainable future

One of the key responsibilities we have to our communities is to ensure we can continue to provide care both now and into the future. Strengthening the financial and environmental sustainability of our services involves a multifaceted approach that encompasses our entire operation, from infrastructure, and procurement through to service design and models of care.



Looking after our planet

Reducing waste has been a continuing theme across the District for 2024-2025, with a four per cent reduction in general waste and a six per cent reduction in clinical waste year on year. These improvements are even more significant when compared to activity data, which shows a six per cent reduction in general waste per occupied bed day and an eight per cent reduction in clinical waste per occupied bed day. Clinicians are actively working to reduce usage of disposable materials such as gloves and plastic gowns by ensuring they are used only when needed. Education to improve waste segregation has resulted in 18 per cent more cardboard diverted from landfill. We have reduced our electricity use by two per cent, with an efficiency improvement of four per cent when accounting for hospital activity. While our water usage increased by two per cent, efficiency has remained stable.

Liverpool Hospital has prevented 500,000 metres of plastic waste going into landfill by removing plastic strapping from linen packs. In finding new ways to package the sheets, including separate folds on every tenth sheet to allow packs to be easily counted, the team has reduced waste going to landfill and made the packs easier to use. In partnership with HealthShare's Newcastle Linen Service, the initiative has since been expanded across the state, saving a total of 3 million metres of plastic straps – enough to stretch from Sydney to Fiji!

Net Zero Hub grants

The District has received two Net Zero Hub grants for intensive care and endoscopy, which are working to reduce the use of disposable gowns and introducing reusable or biodegradable materials where appropriate.

The Pathology Stewardship in the Intensive Care Unit (ICU) project was designed to optimise pathology test ordering across the Liverpool and Campbelltown Hospital ICUs. With annual pathology spending reaching \$2.15 million, unnecessary testing was found to increase costs and contribute significantly to healthcare's carbon footprint. The project implemented a structured approach involving senior medical oversight and protocol-driven test ordering. Preliminary analysis showed that over a six-month period, the initiative achieved a reduction of 517,778 kg of carbon dioxide and cost savings of almost \$180,000. The project successfully aligned with sustainability goals by balancing financial, environmental, and patient care benefits.

Meanwhile, the Endoscopy Unit is developing updated information materials on pre-procedure bowel preparation to support better outcomes for patients, including tailored education for people with low English language proficiency. The goal is to reduce the rate of inadequate bowel preparation,

which contributes to repeat colonoscopies, procedural backlog, and increased emissions. They are also examining the use of non-invasive solutions to reduce reliance on diagnostic endoscopy. Both these measures are already resulting in improved environmental outcomes and enhanced patient care and experiences.

The Travel for the Future Strategy focuses on six key initiatives to ultimately move towards a more sustainable transport system by introducing electric vehicles (EV) into the fleet, creating an EV corridor from Bankstown to Bowral, consolidating pool vehicles to encourage resource sharing, implementing telematics to provide vehicle utilisation information, rolling-out ride share as an alternate mode of transport, and establishing a fleet governance committee to drive the strategy. These initiatives aim to reduce the environmental impact caused by fuel combustion vehicles, improve resource management, and create savings through fleet reduction. The District has reduced its fleet size



by 101 cars since January 2024 and is scheduled to reduce by a further 18 cars by December 2025 to meet the 20 per cent (119 cars) reduction target.

Compression sleeves

The Cardinal Health Compression Sleeve collection processing program started in February 2024 at Liverpool Hospital, and has since been rolled out across the District. In the first 12 months of operation, a total of 1,557 kg of sleeves were collected and returned to Cardinal Health, where they're cleaned, pressure tested and sterilised before being reused.

Driving enabled innovative patient care solutions and service delivery

We are future-proofing our digital infrastructure, with work underway across the District moving digital services to the cloud, allowing secure access for staff outside of traditional work sites with enhanced ability to leverage tools available in the Microsoft Suite. Preparation for when our District joins the NSW Health Single Digital Patient Record is also in progress. We are piloting AI-assisted clinical record coding to support a range of functions across the District, reducing administrative burden and providing improved data and activity capture.

Cyber Security has been a keen focus for our District this year, with exercises and training designed to improve staff awareness of cyber risks and how to play their part in protecting the District from cyber attack.

Reducing reliance on paper

The Follow-me Print managed services, which began in the District Services administration building, is now rolling out at Liverpool, Fairfield and Bankstown-Lidcombe Hospitals, with Camden and Campbelltown Hospitals, and Bowral & District Hospital expected to be complete by the end of 2025. The project, which is anticipated to reduce paper use by 20 to 30 per cent, enables users to print documents from any networked location using a pin code or swipe card, reducing accidental and unnecessary printing.

Digital referrals

An e-referral application was rolled out at Campbelltown Hospital to connect primary care providers directly to specialists and hospital networks. The Consultmed application seamlessly integrates with programs in use across the District to streamline referrals. Patients and clinicians can receive real-time updates on the status of referrals via secure email or SMS, helping to reduce uncertainty and the need for follow-up. Consultmed will continue to be rolled out across the District over the next 12 months.





Emergency Care Assessment and Treatment (ECAT) First rolled out at Liverpool Hospital in 2023-2024, the ECAT program has now been implemented across the District. The ECAT program aims to provide an improved experience for patients and increase staff satisfaction by facilitating consistent care across NSW. The program consists of standardised ECAT protocols, including 41 adult and 32 paediatric protocols, a consistent education pathway for emergency nurses and a governance framework. Implementation of the protocols has been made possible by the collaborative development of a digital solution and educational support resources, with the District's Emergency Departments, Education and Organisational Development, the Critical Care Clinical Stream and Digital Health working closely to make this happen.

Emergency notifications

A pop-up alert messaging system has been put in place throughout the District to alert users of planned and unplanned system downtime, giving them real-time instructions on how to ensure their work can continue using downtime plans. Work is under way to expand use of the system to alert staff to internal and external emergencies.

Infrastructure for the future

Bowral & District Hospital centrepiece opens

Bowral & District Hospital's new Outpatient Centre, the centrepiece of the Stage 2 Redevelopment of the hospital, opened in April 2024. The contemporary centre now operates in the refurbished 1930s building, preserving the heritage of the campus. Construction activities continue on the General Services Building, Aboriginal Dreaming Garden and landscaping, and access improvements.

Liverpool Hospital milestone reached

The Liverpool community celebrated the opening of Stage 1 of the Liverpool Health and Academic Precinct with music and dancing at the Community Open Day held in October 2024. Stage 1 delivered a new five-storey building which includes an expanded Neonatal Intensive Care Unit (NICU), new birthing suites, a new centralised pathology department and a new entrance for the hospital

The first stage of the Emergency Department, including the new public entrance, drop-off zone and new reception and waiting room is complete. Stage 2 of the project is now under way and will double the size of the Emergency Department, deliver a new multi-storey Integrated Services Building, which will house inpatient units, an integrated cancer centre, including a wellness centre and expanded women's and children's ambulatory care.



Farfield Hospital expansion

A \$630 million redevelopment is set to expand Fairfield Hospital and create modern integrated health facilities, allowing for future development opportunities on the current site. The Master Plan, which was completed in April of 2025, outlines the vision for the redevelopment and shows how it will integrate with existing health facilities, while allowing for future development opportunities on the site.

New Bankstown Hospital

A \$2 billion New Bankstown Hospital project is progressing, the largest capital works investment in a public hospital in the state's history. Featuring a new, state-of-the-art Bankstown Hospital in the heart of the Bankstown CBD with an expanded Emergency Department, operating theatres, intensive care, services for women and children, mental health services, and parking.



Valuing our care

Teams from across our organisation have collaborated to ensure our care is valued as highly as it should be. Nursing, medical, allied health and clinical administration teams have worked with Digital Health and Finance to accurately capture activity across the District, ensuring our services are funded correctly. New clinical coding audit software and education packages delivered to key staff members assisted in this process.

Each patient in our facilities who chooses to use private health cover assists us in the delivery of public health care. Procurement has worked with nurse unit managers, ensuring they are able to work with patients to understand the additional benefits of using their insurance, and billing is correctly applied.

Uplifting our use of technology is also assisting in a review of radiology diagnostic billing, with the District's Finance Team collaborating with eHealth and radiology to build and refine the Statewide Radiology Dashboard. Standardised pathology request forms have been implemented in outpatient clinics across the District, resulting in improved ordering practices and reduced costs.

The Operational Sustainability Team was established to support facilities and services in the identification and implementation of efficiency projects. During financial year 2025, the District achieved \$37.9 million in efficiency improvement projects which exceeded the target of \$36.3 million.

Enhancing and promoting care outside of hospitals is also reducing costs on the system, while providing improved patient experiences.

Highlighting healthdirect 1800 022 222 as the go-to for non-emergency but urgent medical care connects the community with a registered nurse who can provide health advice and connect people with appropriate health services, including virtual care doctors, and local urgent care services. The District has also partnered with the South Western Sydney Primary Health Network to promote urgent care an alternative for non-hospital non-life-threatening illnesses and injuries.

The Community Older Persons Intervention and Liaison Outreach Team (COPILOT) is a multidisciplinary outreach team providing urgent care across SWSLHD for older people living at home or supportive accommodation. The benefits of this service have seen the reduction in low-acuity Emergency Department presentations in people over 65 years of age across south western Sydney, resulting in significant cost savings in ED presentations and from avoided admissions.

Expenditure	\$'000
Visiting Medical Officers	\$143,850
Employee-related expenses	\$1,795,996
Other operating expenses	\$795,204
Depreciation and amortisation	\$119,992
Payments to Affiliated Health Organisations	\$39,379
Total	\$2,764,921

Own Source Revenue	\$'000
Sale of goods and services	\$243,053
Grants and contributions	\$12,956
Other income	\$7,492
Total	\$263,501

Update on previous priorities



Priority: Networked models of care

Focus

A networked approach to developing models of care enables equitable access, ensuring services are delivered with expertise and provided at the most appropriate location.

Progress update

We undertake District-wide, networked approach to planning to ensure consistency and equity in service delivery.

All service plans and models of care must now

include a networked approach as a key requirement.

The Model of Care Guide and template has been reviewed and updated to support this approach. Models of Care/Model of Service Delivery templates include a section on monitoring systems, outlining measures specific to the model.

In 2024, 29 Models of Care and five Models of Service Delivery were developed to support the Fairfield Health Neighborhood Clinical Services Plan using the networked approach. This then continued as Models of Care were developed for the Fairfield Health Neighbourhood, supporting the Fairfield Hospital Redevelopment.

Priority: Aboriginal Community Outreach Drug Health Service

Focus

To provide care coordination and therapeutic interventions for Aboriginal clients with substance use issues.

Progress update

The Aboriginal Drug Health team is a multidisciplinary team that includes clinical nurse specialists, social work, counsellors, Aboriginal health workers and a program coordinator.

The team has established strong partnerships and networks across south western Sydney, enabling clients from multiple communities to access comprehensive support. Our collaborative relationships include our own services, such as:

- Campbelltown and Liverpool Opioid Treatment Programs
- Community Mental Health Emergency Team (CoMHET)

- MERIT, a court-based diversion program for adults facing charges in the local court who have issues related to their alcohol and other drug use
- Adult Drug Court
- Needle and Syringe Program
- Gandangara Local Aboriginal Land Council
- Tharawal Aboriginal Corporation
- The Hub at Miller
- Bankstown Community Corrections

These partnerships enhance capacity to engage effectively with clients and ensure culturally-safe, holistic care across the region.

The Aboriginal Drug Health team works in collaboration with the Fairfield Inpatient Withdrawal Management Unit and multiple residential rehabilitation programs, offering client referrals to relevant programs.

In 2024, the team assisted 95 clients to commence treatment.





Priority: End-of-life care

Focus

To implement the South Western Sydney Local Health District End-of-Life and Palliative Care Strategy to 2028, a five-year roadmap to support clinicians and inform future service development.

Progress update

Extensive work has been led by the District's Planning Unit to review and recommend improvements to governance for End-of-Life and Palliative Care services.

The District and hospitals offer a range of services and care options for people with life limiting illnesses and those at end of life. These include:

- Specialist Palliative Care services in hospitals and in the community
- End of Life services for chronic and complex care patients to enhance advance care planning and care coordination
- The Voluntary Assisted Dying (VAD) service.

The District is bringing all these services together in to a single a unit to improve governance and equity and access across the District.

We are expanding access to palliative care. Bankstown-Lidcombe Hospital is commencing a nursing-led service that will operate seven-days-a-

week supporting patients in the last 12 months of their lives. Campbelltown Hospital is working to establish a new acute palliative care ward and increase the palliative care capacity at Camden Hospital.

We are examining our offerings and making improvements.

A review of the 1300 936 350 Palliative Care advisory phone line, which is available for patients and carers at any time, demonstrated the value patients and carers place on the service, which allows them to remain at home. It also recommended several key service improvements, including introducing a new telephone referralsystem, service guidelines for phone operators and increased staffing. We have also reviewed our service agreement with Braeside Hospital's Palliative Care resulting in the integrations of after hours medical care between Braeside Hospital and the District.

We are implementing an Aboriginal Palliative Care and Cancer team to deliver culturally-responsive end-life-care to our First Nations communities. We have also undertaken significant work with the Macarthur Pasifka community and held a successful Dying To Know Day event in Fairfield with over 250 attendees.

Priority: Aboriginal Mental Health Transfer of Care

Focus

To ensure holistic support for Aboriginal mental health inpatients and their families, and facilitate effective transfer of care back into the community.

Progress update

Aboriginal Mental Health Transfer of Care (AMHTOC) has embedded a culturally-safe model of care across all stages of care. The AMHTOC team is embedded within multidisciplinary teams and builds the capacity of the team to work effectively with Aboriginal consumers. The use of the Aboriginal Psychosocial Assistance Tool has enabled the team to identify and support the inpatients holistically,

catering to their cultural and psychosocial needs.

The team collaborates with Gandangara and Tharawal Aboriginal Community Controlled Health Organisations and have regular shared-clients meetings to enable culturally-coordinated and effective transfer of care, and ensure continuity of care.

AMHTOC's partnership with the District's Community Mental Health Services and other government and non-government organisations has provided positive consumer outcomes addressing psychosocial needs. Since the inception of the service in the District, the team has supported 670 consumers, helping them transition from hospital to community care. There has been a significant reduction in the rate of unplanned readmissions and an increase in post discharge follow up. AMHTOC was awarded the Excellence in the Provision of Mental Health Services Award at the NSW Health Awards 2024.

Priority: South West Kids

Focus

The vision of South West Kids is "to become a leading NSW health service supporting children and their families to thrive through all stages of life".

Progress update

Excellence in children's health care remains a priority.

Our District continues to support families and promote child safety. In October, the District will launch its Child Safe Organisation initiative, including a Statement of Commitment and a Child-Friendly version of our Child Safe Policy.

Sub-committees have been established to support local activities related to the NSW Health First 2000 Days Framework. Collaborative work with Sydney Children's Health Network (SCHN) is underway on several joint initiatives. These include coordinating with SCHN to host a First2000Days seminar in early 2026 and sharing resources to raise awareness among staff and the broader community of the

importance of the first 2000 days of life and ways to improve the health of children across our region.

Paediatric palliative care inpatient beds will become available at Campbelltown and Bankstown-Lidcombe Hospitals, alongside the formation of a Paediatric Hospital in the Home working group to look at service options available outside the hospital setting.

The Stage 1 of the Liverpool Hospital and Academic Precinct Redevelopment project has delivered a new and expanded neonatal intensive care unit (NICU) and a purpose built birthing unit.

Research and innovation are driving improvements in paediatric care. A Paediatric Nursing Professor has been appointed as part of the South West Institute for Translational Child Health (SWITCH) research group which, brings together child health leads across the District.

Community partnerships continue to grow. The District collaborated with Liverpool City Council's 2168 Children's Parliament to design our District's Statement of Commitment to Child Safety. The District hosted the Metropolitan Paediatric Level 4 (MP4) Conference in February, bringing together medical staff, paediatric trainees, nurses, allied health professionals and health managers working with children to share and learn.



Future priorities

Priority:

Networked models of care

Focus

A networked approach to our models of care enables equity of access, ensuring services are delivered with expertise and provided at the most appropriate location.

Planned and progressing initiatives

- Progress networked planning through development of District-wide modelling
- Embed networked services in clinical service and strategic planning
- Help people navigate the healthcare system by promoting healthdirect to access health advice and alternatives to attending the emergency department
- Supporting people with options for care in settings outside hospital, closer to home.

Measures

- Number of services planned through District-wide modelling
- Number of models of care developed with underpinning networked approach
- Increased calls to healthdirect
- Expanded scope and uptake of programs that support out-of-hospital care, for example, Hospital in the Home.

Priority:

Improve access to renal dialysis services

Focus

Improve access to renal dialysis services across the District.

Planned and progressing initiatives

- Increase dialysis chair capacity
- Increase the number of private dialysis patients utilising private services, such as dialysis in the home and private dialysis centres
- Increase the number of patients dialysing at home via the Renal Home Therapy Services to greater than 40 per cent
- Increase the use of Renal Supportive Care Services to support advanced care plan discussions
- Implement renal transplant at Liverpool Hospital
- Improve access to transplant services in the District.

Measures

- Number of dialysis chairs
- Number of private patients receiving dialysis in the District
- Percentage of patients dialysing at home
- Percentage of Renal Supportive Care patients with a documented Advanced Care Plan
- Number of renal patients active on the transplant list in the District.

Priority:

Address cancer inequity

Focus

To address the social determinants of health affecting diverse, multicultural, and low socio-economic communities within SWSLHD, which contribute to poorer cancer outcomes, particularly in breast, cervical and lung cancers.

Planned and progressing initiatives

- Enhance collaboration by pooling expertise and resources to create a scalable approach to health equity, improving program efficiency and impact through shared best practices
- Embed research, particularly around equity and access for priority populations
- Build capacity around clinical trials with a focus on digital innovation.

Measures

- Reduce re-admissions in cancer patients through the Emergency Department
- Prevent patients being admitted to hospital and to improve patient outcomes Aboriginal people.

Priority: Aboriginal Diabetes Prevention Program

Focus

Develop and implement a District-wide Aboriginal Diabetes Prevention Strategy

Planned and progressing initiatives

- Cultural needs mapping completed with engagement across multiple District service areas
- Key focus areas identified and plan in development due for completion December 2025 and implementation to begin in 2026
- Measures tracked annually via Aboriginal Health governance structures alongside plan progression.

Measures

- At least five per cent reduction in chronic kidney hospitalisations for Aboriginal people
- At least five per cent reduction in diabetes hospitalisations for Aboriginal people.



Priority: Child Safe Standards

Focus

The standards aim to establish and sustain environments that protect children and young people from harm within our organisation.

Planned and progressing initiatives

- Test a child friendly version of the My Experience Matters patient survey in hospital and community settings

- Increase all staff and manager awareness about the Child Safe Standards and implementation of the SWSLHD Child Safe Environments Policy
- Develop and implement a child-focused complaints process.

Measures

- Attendance at Child Safe Standards webinars
- Child experience feedback
- Reduction in child and family, and staff complaints/allegations.

Priority: Management of patients with Behavioural and Psychological Symptoms of Dementia (BPSD)

Focus

To strengthen hospital processes and staff capability to deliver safer, more effective, and more efficient care for patients with BPSD at Bankstown-Lidcombe Hospital.

Planned and progressing initiatives

- Develop clear evidence-based clinical pathways for BPSD management
- Reduce Emergency Department length of stay for patients with BPSD
- Promote patient-centred, appropriate sedative use in Emergency Departments
- Targeted BPSD training in de-escalation and communication
- Ward-based health and security assistants to support patients with BPSD
- Strengthen partnerships with residential aged care facilities
- Collaborate with Community Older Persons Intervention and Liaison Outreach Team (COPILOT) to ensure the provision of the right care in the right setting.

Measures

- 50 per cent reduction in median Reduce Emergency Department length of stay from 11 hrs to 5.5 hrs
- Improved behaviours evidenced by the Behaviour Assessment and Observation form scores

- Reduction in-ward length of stay by 20 per cent from 23 days to 18 days

- Increased staff knowledge, skills and confidence in caring for people with BPSD.



Priority: South West Kids

Focus

The vision of South West Kids is “to become a leading NSW health service supporting children and their families to thrive through all stages of life”.

Planned and progressing initiatives

- Enhance recognition of paediatric deterioration
- Introduce Paediatric Pulse, a newsletter publication tailored to clinicians to support changes to vital sign charts for children and babies, including the addition of the question “Are you worried they are getting worse?” to be asked of parents and carers.
- Launch SWSLHD Child Safe Statement of Commitment and Child-Friendly version of our Child Safe Policy

- Develop the South West Institute for Translational Child Health (SWITCH) Research group, which includes paediatric and child health leads across the District
- Engage with Sydney Children’s Hospitals Network for a First 2000 Days seminar in 2026.

Measures

- Quantitative and qualitative indicators, aligned with NSW Health’s broader survey and evaluation frameworks
- Use of updated observation charts
- Staff confidence in recognising patient deterioration
- Number and quality of child health research projects initiated, published, or translated into practice.

Our leadership

Our Board

Our Board leads, directs and monitors the activities of the organisation, supporting continuous improvement and has a deep commitment to safe, high-quality care. Board Members bring a wealth of experience and local knowledge to the management of our District.

Adjunct Associate Professor Billie Sankovic, Board Chair since June 2025, member since January 2023

Sonja Stewart, Board Chair, July 2024 to January 2025

Current members

Professor Jill White AM, Deputy Chair since May 2023, member since August 2022

Associate Professor Deepak Bhonagiri member since January 2023

John Roach PSM, member since January 2019

Associate Professor Vince Roche member since January 2023

Shamil Samji, since January 2025

Anette Lamb, since June 2025

Annamaria Wood OAM since June 2025

Outgoing members

Max Bosotti, January 2017 to until December 2024

Professor Hugh Dickson OAM, January 2019 until December 2024

Teresa Harm, March 2022 to until December 2024

Annette Houston AM, January 2022 until December 2024

Kerrie Murphy, January 2015 until December 2024

Our Executive Leadership Team

Sonia Marshall PSM, Chief Executive

Karen McMenamain, Executive Director Operations and Performance

Kate Reakes, Director Healthier Communities

Brenda Gillard, Director Clinical Governance

Angy Dinevska, Director People and Culture

Angela Davey, A/Director Finance

Dr Sayali Pendharkar, Director Strategy, Planning and Research

Jemma Milloy, A/Director Aboriginal Health

Dr Brett Oliver, Director Medical Services

Helen Goldsack, Director Nursing and Midwifery

Matthew Jennings, A/Director Allied Health

Damian Harrington, Director Capital Works and Infrastructure

Michael Dickinson, Director Digital Health










Our Board holds meeting at each of our hospitals to build connections with our operations across south western Sydney. Pictured are Board members John Roach, Associate Professor Deepak Bhonagiri, Board Chair Billie Sankovic with Liverpool Hospital General Manger Scott McGrath and Nurse Manager for Demand Management Tennille Hockey and Board Member Jill White.









Key performance indicators 2024 – 2025









The following safety and quality-related key performance indicators (KPIs) are chosen to measure progress against NSW Health priorities. They contribute as a scorecard and are reported regularly at different levels within the District and to external stakeholders in healthcare, government and the community. These KPIs form part of our Service Level Agreement with NSW Health.




While the past year has seen a high level of activity, we have maintained a safe and high level of care across our hospitals and services.


INDICATOR	TARGET PERFORMANCE	SWSLHD PERFORMANCE		DEFINITIONS / COMMENTARY
NSW Health Strategic Outcome: Safe care is delivered across all settings				
Hospital acquired pressure injuries (rate per 10,000 admitted patient service events)	≤5.4	2.2		Pressure injuries are damage to skin or soft tissue as a result of pressure or friction.
Fall-related injuries in hospital – resulting in fracture or intracranial injury (rate per 10,000 admitted patient service events)	≤6.6	4.4		Fall-related injuries are injuries that occur when someone falls while at our hospitals.
Healthcare associated infections (rate per 10,000 admitted patient service events)	≤124.7	86.1		Healthcare associated infections are infections people contract while receiving care in our hospitals.
Hospital acquired respiratory complications (rate per 10,000 admitted patient service events)	≤38.2	23.0		Respiratory complications are conditions that affect the group of organs that assist with breathing.
Hospital acquired venous thromboembolism (rate per 10,000 admitted patient service events)	≤9.5	4.8		Venous thromboembolism is a condition where a blood clot forms in the veins, primarily in the legs, groin or arms.
Hospital acquired renal failure (rate per 10,000 admitted patient service events)	≤2.3	1.41		Renal failure is a condition where the kidneys stop working and are not able to remove waste and extra water from the blood or keep body chemicals in balance.
Hospital acquired gastrointestinal bleeding (rate per 10,000 admitted patient service events)	≤10.4	7.7		Gastrointestinal bleeding occurs in the gastrointestinal tract (between mouth and rectum). This complication may occur due to blood thinning medications.
Hospital acquired medication complications (rate per 10,000 admitted patient service events)	≤8.9	5.36		Medication incidents are events that may cause or lead to inappropriate medication use or patient harm while in our care.
Hospital acquired delirium (rate per 10,000 admitted patient service events)	≤45.1	29.7		Delirium is a change in the brain that causes confused thinking and reduced awareness.





INDICATOR	TARGET PERFORMANCE	SWSLHD PERFORMANCE		DEFINITIONS / COMMENTARY
Hospital acquired incontinence (rate per 10,000 admitted patient service events)	≤2.7	1.1		Persistent incontinence is a loss of control over urination or bowels.
Hospital acquired endocrine complications (rate per 10,000 admitted patient service events)	≤32.5	40.7		<p>Hospital acquired endocrine complications are when patients do not maintain a satisfactory blood sugar level or receive enough nutrition.</p> <p>South Western Sydney Local Health District has the highest rates of diabetes in NSW (6.9% of the population or a total of 77,750 people), which impacts hospital-acquired endocrine complications.</p> <p>A range of District-wide strategies including introducing new supplemental scales (patient-reported outcomes such as health-related quality of life) and setting up insulin safety committees in each hospital are progressing for improved performance.</p>
Hospital acquired cardiac complications (rate per 10,000 admitted patient service events)	≤42.5	23.5		A cardiac complication is a problem with the heart.
Third- or fourth-degree perineal lacerations (rate per 10,000 admitted patient service events)	≤337.4	210.9		A perineal laceration is a tear of the skin surrounding a woman's vagina that occurs during childbirth.
Hospital acquired neonatal birth trauma (rate per 10,000 admitted patient service events)	≤69.8	42.5		Neonatal birth trauma is an injury to a newborn baby. Examples of injuries include bruising, swelling or a broken bone.
Overall patient experience index – adult admitted patients (number)	≥8.7	7.9 (Dec 2024)		Patient experience index refers to the rating given by consumers of their experience in our hospitals and is calculated by the Bureau of Health Information (BHI).
Patient engagement index – adult admitted patients (number)	≥8.7	7.8 (Dec 2024)		
Overall patient experience index – Emergency Department patients (number)	≥8.6	7.6 (Dec 2024)		
Patient engagement index – Emergency Department patients (number)	≥8.5	7.3 (Dec 2024)		<p>Patient Experience Officers support patients in Emergency Department waiting rooms and keep them informed about waiting times.</p> <p>Emergency Departments and inpatient units continue Leader Patient Rounding and Risk Huddles to improve communication with patients and carers and reduce risks.</p> <p>We are leading a statewide initiative piloting a 'playbook' resource to support staff in improving patient experience in the Emergency Department.</p>

INDICATOR	TARGET PERFORMANCE	SWSLHD PERFORMANCE		DEFINITIONS / COMMENTARY
Emergency Department presentations treated within bench - mark times – Triage 1 (%)	100%	100%		We are committed to delivering services to people who present to our Emergency Departments, ensuring the right patient is in the right place at the right time for the care they require.
Emergency Department presentations treated within benchmark times – Triage 2 (%)	≥80%	69.8%		Campbelltown and Liverpool Hospitals consistently record the highest number of Emergency Department presentations of any NSW Hospitals.
Emergency Department presentations treated within benchmark times – Triage 3 (%)	≥75%	68.2%		We are continually reviewing front-of-house triage triggers to support timely triage of patients. A triage benchmark project is assisting in improving performance.
Incomplete Emergency Department attendances: Aboriginal patients who departed from an ED with a “Did not wait” or “Left at own risk” status (%)	1 percentage point decrease from previous year (11.1%)	10.8% (April 2025)		Incomplete treatment has a potential for an increased risk of readmission or other harm to patient safety. A quality improvement project is under way to improve cultural safety and responsiveness of services for Aboriginal families. Enhancements to the Aboriginal Liaison Officer workforce at Liverpool and Campbelltown Hospitals are also part of the improvement strategy.
Transfer of care – patients transferred from ambulance to Emergency Department ≤ 30 minutes (%)	≥90%	77.5%		Transfer of care is the time between ambulance arrival and clinical handover to hospital staff. Improvement initiatives include: • Daily patient access and performance teleconferences commenced as part of the mid-year plan to identify patient flow issues and support staff to resolve them. • Monthly review of all facility transfer of care projects and actions items to ensure efficiency of project outcomes.
Potentially preventable hospital services (%)	>=2 percentage point Decrease from previous year (16.6%)	16.2%		A potentially preventable hospital service is an admission to hospital for a condition where the hospitalisation could have been prevented through early disease-management in primary care in community-based care settings. Primary & Community Health is continually working with NSW Ambulance and the South Western Sydney Primary Health Network to provide clear documented alternative pathways directly to community services.

INDICATOR	TARGET PERFORMANCE	SWSLHD PERFORMANCE		DEFINITIONS / COMMENTARY
Discharged against medical advice for Aboriginal inpatients (%)	1 percentage point decrease from previous year (3.8%)	3.1% (April 2025)		<p>Discharging against medical advice is when a person leaves the hospital before our health professionals advise them it is safe to do so.</p> <p>We measure the number of Aboriginal inpatients who leave our hospitals against the advice of doctors so we can develop strategies to provide more effective and culturally appropriate care.</p> <p>A quality improvement project is progressing with Liverpool Hospital Obstetrics and Gynaecology to improve cultural safety and responsiveness of services for Aboriginal families.</p>
Overdue elective surgery patients (number) category 1 > 30 days	0	0		Elective surgery is planned surgery that can be booked in advance following a specialist clinical assessment.
Overdue elective surgery patients (number) category 2 > 90 days	0	144		We have implemented strategies to meet our targets and achieved significant improvements. Our strategies include monitoring capacity and demand, staffing to support activity and implementing models of care to reduce length of stay and improve patient outcomes.
Overdue elective surgery patients (number) category 3 > 365 days	0	114		
Unplanned hospital readmissions: all unplanned admissions within 28 days of separation (%)	Decrease from previous year (6.1%)	6.1%		<p>An unplanned hospital readmission occurs when a person returns to our hospitals within 28 days of their initial hospital stay and the second hospital stay is not expected and not part of their treatment plan.</p> <p>We are progressing strategies including an ongoing review of re-presentations and frequent presenters.</p>
Mental health: acute seclusion occurrence – (episodes per 1,000 bed days)	<5.1	3.7		Acute seclusion is the confinement of a patient alone in a room or area from which free exit is prevented.
Mental health: acute seclusion duration – average (hours)	<4.0	6.6		While seclusion can be used to provide safety and containment at times, it can also be a source of distress for the patient, staff and support persons.
Mental health: frequency of seclusion (%)	<4.1%	3.7%		<p>This is why we aim to reduce the duration. Wherever possible, we use alternative and less restrictive ways of managing behaviour.</p> <p>We have demonstrated an improvement in our performance.</p> <p>Mental Health High Dependency Unit (HDU) in Liverpool is being refurbished to create a better therapeutic environment and minimising seclusions.</p> <p>A senior clinician reviews consumers with extended duration of seclusion to determine an appropriate higher level of care. More detailed data is also discussed at regular therapeutic practice meetings to enhance patient safety.</p>

INDICATOR	TARGET PERFORMANCE	SWSLHD PERFORMANCE		DEFINITIONS / COMMENTARY
Mental health: frequency of seclusion (%)	<4.1%	3.7%		Acute post-discharge community care refers to the percentage of mental health consumers that received a call from the Community Mental Health within seven days of discharging from one of our facilities. Calling within this timeframe increases patient safety in the immediate post-discharge period.
Mental health acute readmission – within 28 days (%)	≤13.0%	14.7%		Acute readmission occurs when a person returns to our facilities within 28 days of their initial stay. The second stay is not expected and not part of their treatment plan. Mental Health Services across the district hold monthly meetings to identify and support consumers who frequently present to Emergency Departments with input from inpatient, community, and Ambulance staff. We are also strengthening follow-up care in the community to help patients stay safe after discharge.
Mental health involuntary patients absconded from an inpatient mental health unit – incident types 1 and 2 (rate per 1,000 bed days)	<0.8	0.44		This measures the rate of patients under an involuntary mental health order leaving hospital inappropriately.
Hospital in the Home – admitted activity (%)	≥5%	6.7%		The Hospital in the Home (HITH) program is an early discharge or prevention of admission service that enables eligible hospital patients to be treated at home or in a clinic by experienced community nurses. Nurses provide high-quality personalised care in the patient's home according to each patient's individual needs.
Inpatient discharge performance: inpatient discharges from Emergency Department accessible and rehabilitation beds by midday (%)	≥35%	24.1%		Our hospitals are focussing on early discharges, ensuring patients are transferred to the discharge lounge as a priority once appropriate. A trial use of the discharge lounge for mental health at Campbelltown has commenced. A transfer of care nurse is supporting the process. The Not 1 More Minute (N1MM) project is examining ways to remove barriers from discharge to ensure patients are able to return home when clinically appropriate, without experiencing delays. We are enhancing Hospital in the Home services to allow early discharge where appropriate, to allow patients to recover at home.

INDICATOR	TARGET PERFORMANCE	SWSLHD PERFORMANCE		DEFINITIONS / COMMENTARY
Dental access performance – non-admitted dental patients treated on time (%)	≥97%	100%		Our performance ensures public dental patients receive care in oral health clinics within the clinically recommended timeframe.
Children fully immunised at one year of age (%)	95%	89.1% (March 2025)		Immunisation helps to protect children from the most serious childhood infections, some of which may threaten their lives. Children overdue for their immunisations are placed on catch-up plans through their General Practitioner to ensure they receive missed vaccinations.
Childhood obesity – children with height/length and weight recorded in inpatient settings (%)	70%	68% (March 2025)		
Domestic violence routine screening – routine screens conducted (%)	70%	78.9%		The domestic violence screening program carried out in Drug Health, Mental Health, Child and Family Nursing Services and Antenatal Nursing Services promotes awareness of the health impacts of domestic violence. Clinicians ask questions about the patient's safety in relationships and the safety of their children. It also provides information on accessing relevant health services.
Sustaining NSW Families Programs – families completing the program when child reached 2 years of age (%)	50%	65.9%		The program is offered to NSW families who need extra help in the first two years of their child's life. Health professionals support families through home visits. We will continue to identify families who meet participation criteria. It is important that we engage with families and provide support to sustain them to complete the program.
Sustaining NSW Families Programs – families enrolled and continuing in the program (%)	65%	58.9%		
BreastScreen participation rates – women aged 50 - 74 years (%)	≥50% in most	48.9%		The aim of screening is to detect breast cancer early when it is most treatable. The marketing and mobile van strategies are now finalised and being rolled out. We are focusing on recruiting more women and following up with those who are yet to respond.
Workplace culture: People Matter Employee Survey culture index – variation from previous survey (%)	≥1 percentage point increase on previous survey (61%)	64.6%		Each year, many of our staff take the time to complete the NSW Government's People Matter Employee Survey. Since last year's survey, leaders from across the District have worked together with staff to develop action plans tailored to address their results and provide regular updates on progress towards their goals.
Take action: People Matter Employee Survey take action as a result of the survey – variation from previous survey (%)	≥1 per centage point increase on previous survey (38%)	42%		Improvements include staff recognition, improved communication and enhanced dispute resolution.

INDICATOR	TARGET PERFORMANCE	SWSLHD PERFORMANCE		DEFINITIONS / COMMENTARY
Recruitment – average time taken from request to recruit to decision to approve/decline/defer recruitment (business days)	≤10	2.9		Ongoing reviews improving timelines and collaboration with hiring managers and approvers to reduce the time it takes to gain approval to fill a role to a minimum.
Aboriginal workforce participation – Aboriginal workforce as a proportion of total workforce at all salary levels (bands) and occupations (%)	3.10%	2.5%		Increasing the number of Aboriginal people employed by the District supports the economic and social wellbeing of Aboriginal people as well as the delivery of culturally safe healthcare. The Aboriginal workforce as a proportion of our total workforce has remained stable at 2.5% Improving targeted recruitment and introducing Nursing VeT Targets aiming to improve employment of nurses/midwives.
Staff engagement and experience – People Matter Employee Survey – racism experienced by staff – variation from previous survey (%)	≥5 percentage point decrease on previous survey (10%)	8%		Strategies implemented following the 2024 PMES has resulted in improved results, with further improvement still targeted.
Staff engagement – People Matter Employee Survey engagement index - variation from previous year (%)	≥1 percentage point increase on previous survey (61%)	61%		The annual PMES asks our employees about their experience and perceptions of a range of workplace issues and practices. We take this survey seriously and keep them updated with the progress of actions taken as a result of their feedback.

Attestation Statement

This attestation statement is made by Billie Sankovic

Name of office holder

Holding the position/office on the Governing Body Chair

Title of officeholder of Governing Body

For and on behalf of the governing body titled Board

Governing body's title (the Governing Body)

South Western Sydney Local Health District (Attached schedule lists all facilities and services covered by this attestation statement)

Health service organisation name (the organisation)

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.
2. The Governing Body is overseeing the implementation of the Actions in the National Clinical Trials Governance Framework, or parts thereof, relating to the responsibilities of governing bodies generally for Governance, Leadership and Culture
3. 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 overseen the Organisation's current clinical trials governance framework
 - f. 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

- g. has monitored the action taken as a result of analyses of clinical incidents occurring within the Organisation's facilities and/or services, including clinical trial services
 - h. has routinely and regularly reviewed reports relating to, and monitored the Organisation's progress on, safety and quality performance in health care.
4. The Governing Body has, ensured that the Organisation's safety and quality priorities address the specific health needs of Aboriginal and Torres Strait Islander peoples.
 5. I have the full authority of the Governing Body to make this statement.
 6. 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
- submission of this attestation statement is a pre-requisite to accreditation of the Organisation using the National Clinical Trials Governance Framework under the Scheme
- specific Actions in the National Clinical Trials Governance Framework concerning Governance, Leadership and Culture will be further reviewed at any onsite accreditation visit/s.

Signed	
Position	Chair, South Western Sydney Local Health District Board
Date	28 July 2025

Counter signed by the Health Service Organisation's Chief Executive

Signed	
Position	Chief Executive , South Western Sydney Local Health District
Name	Sonia Marshall
Date	28 July 2025

Schedule of facilities and services covered by this attestation statement

Name of health service organisation	Address
Bankstown-Lidcombe Hospital	Eldridge Road, Bankstown NSW 2200
Bowral & District Hospital	97-103 Bowral Street, Bowral NSW 2576
Campbelltown Hospital	Therry Road, Campbelltown NSW 2560
Camden Hospital	Menangle Road, Camden NSW 2570
Fairfield Hospital	Corner of Polding Street and Prairievale Rd, Prairiewood NSW 2176
Liverpool Hospital	Corner of Elizabeth and Goulburn Streets, Liverpool NSW 2170
SWSLHD Drug Health Services	1 Bolger Street, Campbelltown, NSW 2560
SWSLHD Mental Health Services	Mental Health Centre, Level L1, Liverpool Hospital
SWSLHD Oral Health Services	Corner of Campbell and Goulburn Streets, Liverpool NSW 2170
SWSLHD Primary & Community Health Services	1 Bolger Street, Campbelltown, NSW 2560



To learn more about South Western Sydney Local Health District and our plans for the future, go to the SWSLHD website:


www.swslhd.nsw.gov.au

South Western Sydney Local Health District

Liverpool Hospital Eastern Campus
Locked Mail Bag 7279
Liverpool BC NSW 1871

Tel. (612) 8738 6000

 /SWSLHD

 /swslhd

 /SWSHealth

