

# SWSLHD Bankstown-Lidcombe Hospital A Facility of South Western Sydney Local Health District Operational Plan 2020 – 2022

Leading care, healthier communities

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## Introduction

The Bankstown-Lidcombe Hospital (BLH) Operational Plan aims to highlight the local actions to be undertaken and embedded over the next two years to assist the hospital in achieving the District's Strategic Directions, and vision of "Leading care, healthier communities".

The plan covers the six Strategic Directions:

- Providing safe and quality care to ensure robust governance processes and structures across the organisation
- A healthy community through the integration of care solutions to manage the needs of complex patients
- Collaborative partnerships through the utilisation of external service providers to support the health service
- A healthcare system for the future through investment in infrastructure and new technologies to ensure the demand of the future population can be met
- Our people make a difference and our efforts should strengthen workforce development and succession planning
- A leader in research and teaching by increasing resources at BLH to support the education and development of clinicians

As well as the Strategic Directions of SWSLHD, the Plan considers the community profile of BLH and the subsequent challenges in the provision of healthcare, including:

- Unprecedented population growth;
- A population characteristics with low socio-economic status, culturally and linguistically diverse populations, large refugee populations, low health literacy levels and complex health issues
- Poor health behaviours and status of the local population
- Insufficient and ageing infrastructure to meet the demands of the growing population
- An ageing workforce with a high attrition rate

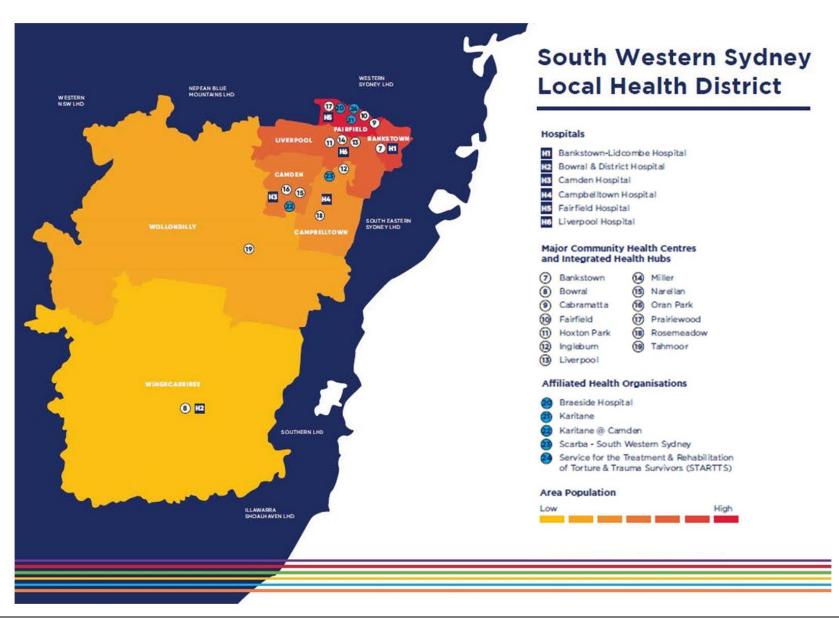
With investment in the BLH Emergency Department from the 2018/19 State Budget, the facility must focus on enhancing subsequent services and ensuring the same safe, quality care is provided. This will be achieved through engaging with clinical streams, further investment in infrastructure and technologies, and upskilling the health workforce to provide such services.

In March 2019, the NSW Government committed \$1.3 billion to redevelop Bankstown-Lidcombe Hospital into a world-class, state-of-the-art facility on a new site. This will see a transformation of the delivery of comprehensive healthcare for the Bankstown community and South Western Sydney. The redeveloped hospital will include enhanced emergency, critical care, medical and surgical services; and expanded and integrated ambulatory care services, including cancer treatment and community health services.

BLH is highly engaged with the local community with a strong consumer and community participation network. This Plan highlights the value of community and plans to strengthen networks, to further support the growing population and associated demands.

The Plan also hones in on the complexity of healthcare and the challenge to support acute services, with primary and community based solutions. The needs of the health consumers and staff at BLH are the forefront of this plan, and wide consultation occurred in its creation. Further detail is provided throughout on the District profile, vision framework, facility profile and strategic goals of SWSLHD.

# **Map of South Western Sydney Local Health District**



# Values Framework

# Our Vision Leading care, healthier communities

### Our Values

The CORE values are fundamental to provision of health services across NSW and are the foundation stones for building trust. They underpin all activities of the District and define how staff and services work together and collaborate with patients, carers, the community and service partners in delivering health care and improving the health of the community.

### Our Mission

Our mission is to promote the health of the residents of the District and patients using our health services through the delivery of high quality healthcare.

We do this by providing health services that are population based, patient-centred and involve families and carers.

We use evidence to inform health practices; and consult, communicate, engage and collaborate with patients, local communities, agencies and care providers to improve the way we plan and provide health care services and programs.

We strive to deliver services that are respectful of personal dignity and autonomy; and sensitive to the needs of people from different cultures.

We emphasise learning and reflection and are committed to continuous quality improvement and innovation in delivering efficient and sustainable health care.

Our culture enables excellence and accountability, values our people and supports positive leadership and teamwork.



### COLLABORATION

Working as one team with patients, carers, the community and other service partners



### **OPENNESS**

Services are transparent and open and explain the reason for decisions



### RESPECT

Everyone involved in patient care or a health project can contribute and their views will be heard, valued and respected



### EMPOWERMENT

Staff, patients, carers and the community can make choices and influence outcomes. Systems and processes will enable participation, supply necessary information, support delegation and ensure accountability

# **Facility or Service Profile**

Bankstown-Lidcombe Hospital is a principal referral group A1B hospital with tertiary affiliations to the University of NSW, University of Sydney and University of Western Sydney. It provides a wide range of general medical and surgical services and some sub-specialty services to the local Bankstown community mainly at role delineation level 5.

### Providing clinical services in:

- Emergency Medicine
- Surgical sub-specialties including general, ENT, colorectal, peripheral neurosurgery, ophthalmology, orthopaedics, plastics, upper gastrointestinal pancreatic and biliary, vascular, breast and urology
- Medical sub-specialties including general medicine, cardiology, endocrinology, gastroenterology, infectious diseases, neurology, neurophysiology, renal medicine, respiratory and rheumatology
- Cancer therapy including medical & surgical oncology, chemotherapy and haematology
- Intensive Care Unit
- Maternity, gynaecology, special care nursery and paediatrics
- Mental Health
- Drug Health
- Rehabilitation and Aged Care
- Imaging interventional, CT, MRI, nuclear medicine, ultrasound and general radiography.

# **Strategic Directions and associated Key Priority Areas**

| Safe, Quality Care   | A Healthy Community  |
|--|--|
| <ul> <li>Consistently safe and outstanding quality</li> <li>Appropriate, timely care</li> <li>Networked and integrated services</li> <li>Evidence based and patient-centred care</li> <li>Governance and risk</li> </ul> | <ul> <li>Healthy people and communities</li> <li>Safe, healthy environments</li> <li>Knowing the needs of the community</li> <li>Prevention and early intervention</li> <li>Culturally safe and responsive to community diversity</li> </ul> |
| Collaborative Partnerships   | A Healthcare System for the Future   |
| <ul> <li>Consumer, patient and carer involvement</li> <li>Genuine engagement and communication</li> <li>Strategic partnerships</li> <li>Funding opportunities</li> </ul>   | <ul> <li>Agile and innovative care</li> <li>Deliver infrastructure for impact and transformation</li> <li>Financial and service sustainability</li> </ul>  |
| Our People Make a Difference   | A Leader in Research and Training  |
| <ul> <li>Workforce for the future</li> <li>Culture of respect and compassion</li> <li>Employer of choice</li> <li>Effective leadership and empowered staff</li> </ul>  | <ul> <li>Continuous education, teaching<br/>and training</li> <li>Driving research and translation</li> </ul>  |

# **Operational Plan Actions**

| KEY PRIORITY<br>AREA                      | STRATEGY  | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below)   | LHD LEAD  | FACILITY/<br>SERVICE<br>LEAD                    | TIMEFRAME        |  |  |  |
|---|---|---|---|---|------------------|--|--|--|
| Safe, Qualit                              | afe, Quality Care   |   |   |   |                  |  |  |  |
| Consistently safe and outstanding quality | Promote and support safe and quality care through improved monitoring and reporting | <ul> <li>Actions as per the SWSLHD Safety and Quality Framework</li> <li>Actions as per the BLH Quality Improvement Plan</li> <li>Actions as per the NSQHS Standards within the User Guide for Aboriginal and Torres Strait Islander Health</li> <li>Compliance with the National Safety and Quality Health Service (NSQHS) Standards</li> <li>Compliance with the Bankstown-Lidcombe Hospital Quality Audit Schedule</li> <li>Monitor compliance through incident reporting on IMS+</li> <li>Promote and support staff with identifying quality improvements and completion of quality improvement projects</li> <li>Strengthen reporting processes of clinical indicators, concerns and issues to relevant committees</li> <li>Provide support to service managers and staff for incident management</li> <li>Implementation of Risk and Safety huddles and Proactive Patient Rounding in line with the Transforming Your Experience 7 Safety Essentials</li> <li>Implementation of the Top 5 Program to enhance delivery of individualised care for high risk and vulnerable patients</li> </ul> | Director,<br>Clinical<br>Governance                   | Director of<br>Patient<br>Safety and<br>Quality | June 2022        |  |  |  |
| Appropriate,<br>timely care               | Enhance surgical and procedural services across SWSLHD                              | Actions as per the SWSLHD Surgical and Procedure Plan to 2031  Review facility models for Emergency Surgery provision  Review opportunities for appropriate procedures to be transitioned from existing models of care to Day Only pathways.  | Director,<br>Nursing,<br>Midwifery and<br>Performance | Director of<br>Medical<br>Services              | December<br>2021 |  |  |  |

| KEY PRIORITY<br>AREA                    | STRATEGY   | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below)   | LHD LEAD  | FACILITY/<br>SERVICE<br>LEAD               | TIMEFRAME        |
|---|--|---|---|--|------------------|
| Appropriate, timely care                | Support the provision of high quality end of life care   | <ul> <li>Actions as per the SWSLHD Advance Care Planning, End of Life &amp; Palliative Care Strategic Plan</li> <li>Incorporate Advance care planning content in admission and discharge hospital documentation, referral processes and assessment and care planning processes</li> <li>Pilot new approaches to enable additional discussion with patients and their families about ACP-through clinical streams/services</li> <li>Implement the CEC End of Life Toolkit supported by staff education and training and ongoing audit</li> </ul> | Director,<br>Allied &<br>Community<br>Health          | General<br>Manager                         | June 2022        |
| Appropriate, timely care                | Reduce the incidence of cancer in the community and improve outcomes for people with cancer and their families | <ul> <li>Actions as per the SWSLHD Cancer Plan 2018-2023</li> <li>Investigate options to provide dedicated parking spaces and/or drop off/pick up zones adjacent to the Cancer Therapy Centre.</li> <li>Investigate feasibility of establishing lymphoedema services</li> </ul>   | Director,<br>Nursing,<br>Midwifery and<br>Performance | General<br>Manager                         | December<br>2022 |
| Networked and integrated services       | Ensure contemporary ways of working through developing innovative and networked models of care                 | <ul> <li>Develop innovative and networked (where required) models of care for specialties and services are developed across the district</li> <li>Review models of care in Emergency Departments to improve responsiveness to weekend demand and improve consistency of service systems across the District</li> </ul>  | Director, Capital Works & Infrastructure              | General<br>Manager                         | December<br>2022 |
| Networked and<br>Integrated<br>Services | Deliver integrated diabetes care across SWS in partnership with the PHN  | <ul> <li>Actions as per the South Western Sydney Diabetes Framework to 2026</li> <li>Establish processes to ensure people with identified diabetes presenting to ED have their blood glucose levels and HbA1c levels checked and their status recorded in the ED</li> <li>Establish Diabetes and Insulin Safety Boards at all facilities across SWSLHD</li> <li>Progressively establish Diabetes Resource Nurses across all adult inpatient settings</li> </ul>   | Director,<br>Allied &<br>Community<br>Health          | Director of<br>Nursing<br>and<br>Midwifery | June 2022        |

| KEY PRIORITY<br>AREA                          | STRATEGY   | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below)  | LHD LEAD                                | FACILITY/<br>SERVICE<br>LEAD                    | TIMEFRAME        |
|---|--|--|---|---|------------------|
| Evidence based<br>and patient<br>centred care | Enable patients, consumers and carers to provide direct, timely feedback about their health-related outcomes and experiences | <ul> <li>Implement systems to capture patient reported outcomes in relation to physical and psycho-social needs to inform clinical decision making</li> <li>Implement structured mechanism(s) to collect patient experience data. (My Experience Matters)</li> <li>Use collected data to drive improvement.</li> <li>Develop an audit tool to capture evidence of consumer involvement in planning and delivery of care</li> </ul>   | Director,<br>Clinical<br>Governance     | General<br>Manager                              | December<br>2022 |
| Evidence based and patient centred care       | Drive outcomes through evaluating new initiatives to ensure effectiveness  | <ul> <li>Develop a formalised review and evaluation process for new initiatives</li> <li>Implement LHD Business Case template</li> </ul>   | Director,<br>Strategy &<br>Partnerships | Director of<br>Finance                          | June 2021        |
| Governance and risk                           | Further develop risk maturity throughout the organisation  | <ul> <li>Actions as per the Enterprise Risk Management Framework</li> <li>Provide training to service managers in CAMMS Sycle and Bow Tie Analysis</li> <li>Implement CAMMS Sycle risk register system to departments across the service, with support of the LHD Risk Project Officer based on project schedule</li> <li>Establish an Enterprise Risk Management Committee to provide oversight of the organisation risk register</li> <li>Monitor and measure the frequency and effectiveness of key risk management activities</li> </ul> | Manager, Risk<br>and Policy             | Director of<br>Patient<br>Safety and<br>Quality | June 2022        |
| Governance and risk                           | Ensure consistency in the development and implementation of the Policy, Procedure and Guidelines                             | Actions as per the District-wide Policy, Procedure, Guideline Framework and ensure alignment with NSW Health PPGs  • Remove policy directives at facilities and services, with documents reviewed and updated into more appropriate document formats (facilities and services only to have procedures and guidelines that offer practical instructions to staff)  • Reduce the number of PPGs overdue for review   | Manager, Risk<br>and Policy             | Director of<br>Patient<br>Safety and<br>Quality | Dec 2020         |

| KEY PRIORITY<br>AREA                 | STRATEGY  | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below)   | LHD LEAD  | FACILITY/<br>SERVICE<br>LEAD  | TIMEFRAME |
|--------------------------------------|---|---|---|---|-----------|
| Governance and risk                  | Ensure robust and efficient processes for the review of incidents and communication of the outcomes | <ul> <li>Review the processes associated with incidents and complaints management as per the NSW Policy Directives PD2020_020: Incident Management Policy and PD2020_013: Complaints Management.</li> <li>Staff meetings to include lessons learnt from local safety and quality issues.</li> </ul>   | Director,<br>Clinical<br>Governance                   | Director<br>Patient<br>Safety and<br>Quality                                | June 2022 |
| A Healthy                            | Community   |   |   |   |           |
| Healthy people<br>and<br>communities | Improve health literacy of<br>consumers to support<br>their engagement with<br>Health Services      | <ul> <li>Actions as per the Health Literacy Roadmap</li> <li>Audit each service, facility and department in consultation with consumers and carers to identify health and service information requirements.</li> <li>Review pre admission and appointment correspondence with signage and wayfinding systems within all hospitals and facilities, checking for consistency.</li> <li>Carry out way finding assessments across all sites, facilities and services.</li> <li>Implement procedure for accessible consumer and carer information and resources and repository guidelines</li> </ul>   | Director,<br>Nursing,<br>Midwifery and<br>Performance | Director of<br>Allied Health  | June 2022 |
| Healthy people<br>and<br>communities | Promote health,<br>wellbeing, capacity and<br>resilience in the first 2000<br>days                  | <ul> <li>Implement actions related to the SWSLHD response to the NSW Health First 2000 Days Framework</li> <li>Ensuring that all staff across the W&amp;CH service are provided and have access to evidence-based information and education about the first 2000 days and the importance of same.</li> <li>Ensuring that woman accessing Bankstown Hospital have access to comprehensive breastfeeding support during all continuums of the pregnancy and birth journey.</li> <li>Develop processes to ensure all units that children 2yrs to 18yrs present to have height and weight measures completed and referrals made to appropriate services.</li> </ul> | Director,<br>Allied &<br>Community<br>Health          | Director of<br>Allied<br>Health,<br>Director of<br>Nursing and<br>Midwifery | June 2022 |

| KEY PRIORITY<br>AREA | STRATEGY                     | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below) | LHD LEAD   | FACILITY/<br>SERVICE<br>LEAD | TIMEFRAME |
|----------------------|------------------------------|---|------------|------------------------------|-----------|
| Healthy people       | Strengthen and integrate     | Implement actions related to the SWSLHD response to the NSW Health  | Director,  | Director of                  | June 2022 |
| and                  | the response to violence,    | iPARVAN framework   | Allied &   | Allied Health                |           |
| communities          | abuse and neglect            |   | Community  |                              |           |
|                      |                              |   | Health     |                              |           |
| Healthy people       | Support families with        | Ensure robust processes for undertaking nursing assessments,  | Director,  | Director of                  | June 2022 |
| and                  | vulnerabilities              | comprehensive care planning and risk huddles to identify vulnerabilities.                                       | Allied &   | Allied Health                |           |
| communities          |                              |   | Community  |                              |           |
| - II II - C          | -                            |   | Health     |                              |           |
| Culturally safe      | Close the gap in health      | Support activity of the Aboriginal Hospital Committee with a focus on:  | Director,  | General                      | June 2022 |
| and responsive       | outcomes and life            | Partnership with the newly established Bankstown Aboriginal   | Aboriginal | Manager                      |           |
| to community         | expectancy in Aboriginal     | Community Health Centre   | Health     |                              |           |
| diversity            | people                       | Maintenance of the Aboriginal frequent user review program  |            |                              |           |
| Culturally safe      | Ensure safe, high quality    | Actions for consideration from the Disability and Carer's Plan:   | Director,  | Director of                  | June 2022 |
| and responsive       | services and opportunities   | Embed TYE expectations in all care provided for persons with a Disability                                       | Allied &   | Allied Health                |           |
| to community         | for people with a disability | Review facility Transport Access guides to include information for people                                       | Community  |                              |           |
| diversity            | and their carers             | with disability   | Health     |                              |           |
|                      |                              | Ensure availability of alternate call facilities for inpatients unable to                                       |            |                              |           |
|                      |                              | utilise the Nurse call buttons  |            |                              |           |
|                      |                              | • Implement 'the Essentials' via the 'self-assessment process' to continue                                      |            |                              |           |
|                      |                              | to improve the hospital experience and pathways to care for people with   |            |                              |           |
|                      |                              | intellectual disability   |            |                              |           |
| Culturally safe      | Build capacity and develop   | Develop organisational capacity to work effectively with people with a  | Director,  | Director of                  | June 2022 |
| and responsive       | systems that are             | disability who access SWSLHD health services, including making reasonable                                       | Allied and | Allied Health                |           |
| to community         | responsive to NDIS           | adjustments to optimise access to care (e.g. communication, service delivery                                    | Community  |                              |           |
| diversity            | implementation               | modifications).   | Health     |                              |           |
| Culturally safe      | Improve cultural safety for  | Encourage and support participation in Respecting the Difference and other                                      | Director,  | Human                        | June 2022 |
| and responsive       | people from diverse          | cultural competency training  | Allied and | Resources                    |           |
| to community         | cultures                     |   | Community  | Manager                      |           |
| diversity            |                              |   | Health     |                              |           |
| Prevention and       | Reduce the impact of         | Development of strategies to support staff and the community to quit  | Director,  | Director of                  | June 2021 |
| Early                | smoking                      | smoking and reduce smoking on facility grounds.   | Population | Corporate                    |           |
| Intervention         |                              | Develop and implement a facility action plan  | Health     | Services                     |           |

| KEY PRIORITY<br>AREA                             | STRATEGY   | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below)   | LHD LEAD                                | FACILITY/<br>SERVICE<br>LEAD | TIMEFRAME        |
|--|--|---|---|------------------------------|------------------|
| Collaborati                                      | ve Partnerships  |   |   |                              |                  |
| Consumer,<br>patient and<br>carer<br>involvement | Strengthen and diversify<br>the engagement and<br>collaboration with our<br>consumers and<br>community | Actions as per the revised Consumer and Community Participation  Framework  Increase the number and diversity of people participating in formal CCP structures  Extend the level of CCP engagement in hospital redevelopments  Develop new ways of gathering community, consumer and carer input to inform the way health services are provided, using technology and informal participation methods  Increase connections with vulnerable people and groups in our community to improve the way health services respond to community needs | Director,<br>Strategy &<br>Partnerships | General<br>Manager           | June 2022        |
| Consumer,<br>patient and<br>carer<br>involvement | Build staff capacity to understand and initiate consumer participation approaches to their practice    | Actions as per the revised Consumer and Community Participation  Framework  Build the capacity of clinical leaders to engage consumers and the community in individual care and in organisational development   | Director,<br>Strategy &<br>Partnerships | General<br>Manager           | June 2022        |
| Genuine<br>engagement and<br>communication       | Foster effective communication with patients, consumers and staff                                      | <ul> <li>Implement TYE Strategies</li> <li>Leader patient rounding</li> <li>Executive rounding with patients</li> <li>Proactive patient rounding</li> </ul>   | Director,<br>People &<br>Culture        | General<br>Manager           | June 2021        |
| A Healthca                                       | re System for the  | Future  |   |                              |                  |
| Agile and innovative Care                        | Deliver an integrated digital strategy to support diverse ways to deliver care                         | Expand and embed the use of telehealth and models of care at Bankstown-Lidcombe Hospital  | Director, ICT                           | General<br>Manager           | December<br>2021 |

| KEY PRIORITY<br>AREA                 | STRATEGY  | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below)   | LHD LEAD  | FACILITY/<br>SERVICE<br>LEAD            | TIMEFRAME |
|--------------------------------------|---|---|---|---|-----------|
| Agile and innovative Care            | Strengthen innovative approaches to deliver interpreting services                           | <ul> <li>Support implementation of interpreter service models. Encourage and support use of video interpreting</li> <li>Support efficient use of interpreters and develop processes to avoid booking interpreters beyond the required time</li> <li>Work with interpreter services to build the skills of clinicians in using interpreters and interpreter models (including phone/virtual/video)</li> </ul>  | Director,<br>Allied &<br>Community<br>Health          | Director of<br>Allied Health            | June 2022 |
| Agile and innovative Care            | Strengthen health system approaches in accordance with learnings from the pandemic response | Review and debrief on the Bankstown-Lidcombe Hospital pandemic response and embed key learnings into operational service delivery   | Director,<br>Nursing,<br>Midwifery and<br>Performance | Director of<br>Nursing and<br>Midwifery | June 2022 |
| Financial and service Sustainability | Promote sustainable funding strategies for future growth                                    | <ul> <li>Improve the financial management of ADOs and Excess Annual Leave through strengthened analytics &amp; performance measures</li> <li>Ensure best practice rostering to limit the use of overtime, agency/locum use and unnecessary backfilling.</li> <li>Strengthen frameworks around VMO rostering, call backs, accruals and discounting of old claims.</li> </ul>   | Director,<br>Finance &<br>Corporate                   | Director of<br>Finance                  | June 2022 |
| Financial and service Sustainability | Drive clinical service<br>sustainability and value<br>based care approaches                 | <ul> <li>Embed models of care from Clinical Services plan into current environment (where practical) for sustainability into new build</li> <li>Review governance of new models of care to assess against values based model prior to implementation</li> </ul>   | Director, Nursing, Midwifery and Performance          | Director of<br>Nursing &<br>Midwifery   | June 2022 |
| Financial and service Sustainability | Drive value in procurement  | <ul> <li>Establish a clinical products advisory group to promote value based products that are aligned to LHD &amp; NSW contracts.</li> <li>Support the procurement decisions for clinical staff through the provision of reporting on opportunities for improvement utilising H Trak functionality and HealthShare reporting</li> <li>Ensure the optimisation of state-wide contracts around prostheses and consumables</li> <li>Support the elimination of paper based requisitioning. Reduce off-catalogue free text ordering of products by way of education for source requisitioners</li> </ul> | Director,<br>Finance and<br>Corporate                 | Director of<br>Finance                  | June 2022 |

| KEY PRIORITY<br>AREA          | STRATEGY                   | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below) | LHD LEAD    | FACILITY/<br>SERVICE<br>LEAD | TIMEFRAME |
|-------------------------------|----------------------------|---|-------------|------------------------------|-----------|
| Financial and                 | Enhance the                | Enhance the effectiveness of Corporate services through continuous  | Director,   | Director of                  | June 2022 |
| service                       | effectiveness and cross    | improvement in business processes   | Finance and | Corporate                    |           |
| Sustainability                | District alignment of      | Recommended: Support the improvement of Outpatient  | Corporate   | Services                     |           |
|                               | Corporate Services         | Administrative and Billing practices and the overall LHD review of  |             |                              |           |
|                               |                            | Outpatient services   |             |                              |           |
|                               |                            | Optional: Formulate retail/commercial strategies to best utilise the  |             |                              |           |
|                               |                            | building footprint  |             |                              |           |
|                               |                            | Optional: Build consistent staffing models across corporate areas,  |             |                              |           |
|                               |                            | including the transition to a HASA model for security   |             |                              |           |
| Our People  Workforce for the | make a difference          | Review internal processes for efficiency and reasons for delays relating to                                     | Director,   | Human                        | June 2022 |
| future                        | recruitment processes      | approvals to fill budgeted vacancies, interview and reviews of preferred  | People &    | Resources                    | 545 = 5== |
|                               | Tool distinctive processes | candidates.   | Culture     | Manager                      |           |
|                               |                            | Encourage manager attendance at recruitment training  |             | ···a.iagei                   |           |
| Workforce for the             | Support the continuity     | Apply the professional development review process   | Director,   | Human                        | June 2022 |
| future                        | and development of our     | Increase uptake of professional development plans to maintain the target  | People &    | Resources                    |           |
|                               | workforce                  | completion rate of greater than 80%   | Culture     | Manager                      |           |
| Workforce for the             | Improve support for        | Implement the SWSLHD revised orientation program locally  | Director,   | Human                        | June 2021 |
| future                        | staff commencing new       |   | People &    | Resources                    |           |
|                               | positions                  |   | Culture     | Manager                      |           |
| Culture of respect            | Improve approaches to      | Promote staff attendance at training and education on conflict resolution                                       | Director,   | Human                        | June 2021 |
| and compassion                | addressing workplace       |   | People &    | Resources                    |           |
|                               | conflict                   |   | Culture     | Manager                      |           |
| Culture of respect            | Keep people safe at        | Provide collaborative input into WHS and Recover @ Work practices to  | Director,   | Human                        | Dec 2021  |
| and compassion                | work                       | ensure these meet operational needs   | People &    | Resources                    |           |
|                               |                            | Other actions as relevant   | Culture     | Manager                      |           |
| Culture of respect            | Increase awareness of      | Promote staff attendance and release of staff for training and education,                                       | Director,   | Human                        | June 2021 |
| and compassion                | mental health issues and   | particularly Mental Health First Aid  | People &    | Resources                    |           |
|                               | reduce stigma in the       |   | Culture     | Manager                      |           |
|                               | workplace                  |   |             |                              |           |

| KEY PRIORITY<br>AREA                                 | STRATEGY   | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below)   | LHD LEAD                         | FACILITY/<br>SERVICE<br>LEAD          | TIMEFRAME        |
|--|--|---|----------------------------------|---------------------------------------|------------------|
| Employer of choice                                   | Enhance recruitment<br>and retention of our<br>aboriginal workforce                                | <ul> <li>Host identified staff programs and liaise with People and Culture on trainee progress</li> <li>Commit to increase targeted recruitment and promote this with managers</li> </ul>   | Director,<br>People &<br>Culture | General<br>Manager                    | June 2022        |
| Effective<br>leadership and<br>empowered staff       | Strengthen the support for our volunteers  | Enhance the support, utilisation and recognition for volunteers   | Director, People & Culture       | General<br>Manager                    | June 2022        |
| A Leader in  | Research and Tea   | aching  |                                  |                                       |                  |
| Continuous education, teaching and training          | Support staff to access training and education   | Support staff to access and complete relevant post graduate qualifications  | Director,<br>People &<br>Culture | Human<br>Resources<br>Manager         | June 2022        |
| Continuous<br>education,<br>teaching and<br>training | Enhance partnerships with education providers to ensure positive student experiences within SWSLHD | Implement innovative, sustainable student supervision models in partnership with education providers  | Director,<br>People &<br>Culture | Director of<br>Nursing &<br>Midwifery | June 2022        |
| Driving research and translation                     | Enhance our vibrant<br>research culture  | <ul> <li>Actions as per the SWSLHD Research Strategy 2019-2023Include research accountabilities in position descriptions and performance reviews for executive leaders, senior managers and clinical directors</li> <li>Support staff undertaking higher degree or other research through the provision of study leave and research opportunities directly related to their existing roles</li> <li>Support researchers to promote their findings nationally and internationally and build research collaborations through participation in conferences and education partnerships</li> </ul> | Director,<br>Research            | Director of<br>Medical<br>Services    | December<br>2022 |

| KEY PRIORITY<br>AREA | STRATEGY               | LOCAL ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY (Suggested actions and contextual information listed below) | LHD LEAD  | FACILITY/<br>SERVICE<br>LEAD | TIMEFRAME |
|----------------------|------------------------|---|-----------|------------------------------|-----------|
| Driving research     | Develop agile response | Develop and implement facility and service-based Research   | Director, | General                      | December  |
| and translation      | systems to support     | Implementation Plans which are relevant to the research maturity and  | Research  | Manager                      | 2022      |
|                      | research               | needs of each facility and / or service   |           |                              |           |
|                      |                        | Continue to develop the capacity and responsiveness of information and  |           |                              |           |
|                      |                        | communication technology infrastructure and systems to respond to the   |           |                              |           |
| D : : 1              | D. III                 | demands of research and researchers   | D: .      | D:                           |           |
| Driving research     | Build strategic        | Further develop health and medical research partnerships at Bankstown-  | Director, | Director of                  | December  |
| and translation      | collaborations in      | Lidcombe Hospital   | Research  | Medical                      | 2022      |
|                      | research               | Incorporate flexible research, teaching and education spaces within the   |           | Services                     |           |
|                      |                        | capital redevelopments in SWSLHD hospitals  |           |                              |           |
|                      |                        | Utilise a range of techniques to support collaboration between clinicians                                       |           |                              |           |
|                      |                        | and sites including mentoring, social media platforms, open space   |           |                              |           |
|                      |                        | technology, participation of academics in clinical meetings, grand rounds                                       |           |                              |           |
|                      |                        | and journal clubs   |           |                              |           |
| Driving research     | Build evidence,        | Investigate options to provide support for investigator led trials through                                      | Director, | General                      | December  |
| and translation      | knowledge and          | internal resource development and collaboration with academic partners  | Research  | Manager                      | 2022      |
|                      | translation            | Improve access to clinical trial support services through further developing                                    |           |                              |           |
|                      |                        | partnerships across academia and industry   |           |                              |           |
|                      |                        | Promote the use of evidence-based knowledge in conjunction with clinical  |           |                              |           |
|                      |                        | expertise and patient values to guide health care decisions and practices                                       |           |                              |           |

# **Specific Initiatives July 2020 – June 2022**

| STRATEGIC DIRECTION                | STRATEGY   | ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY   | FACILITY<br>EXECUTIVE<br>SPONSOR      | LOCAL LEAD  | TIMEFRAME     |
|------------------------------------|--|---|---------------------------------------|---|---------------|
| Safe, Quality Care                 | Commitment to Interventional Radiology   | Establish an Interventional Radiology service   | Director of Medical Services          | Executive Officer   | June 2021     |
| Safe, Quality Care                 | Outpatient review and alignment of models of care  | Clarification and implementation of<br>recommendations from the Outpatient<br>Review  | Director of<br>Corporate<br>Services  | PSIU Manager  | June 2022     |
| Safe, Quality Care                 | To commission the Emergency Department, including the implementation of new and altered models of care | <ul> <li>Operational commissioning of new facility</li> <li>Implementation of new models of care (paediatrics, resuscitation, mental health)</li> </ul> | General<br>Manager                    | Project Officer<br>Director, ED<br>Nurse Manager, ED                        | June 2021     |
| A Healthcare System for the Future | E-Maternity  | Implement e-Maternity PowerChart and<br>make as business as usual practice  | Director of<br>Nursing &<br>Midwifery | Nurse Manager, Women's and Children Health                                  | December 2020 |
| A Healthcare System for the Future | Finalise Clinical Service Plans and related documentation for the new Bankstown Hospital               | Progress planning of the new Bankstown     Hospital   | General<br>Manager                    | Planning Unit, SWSLHD<br>Project Manager<br>Bankstown Project Lead<br>(TBA) | June 2022     |
| A Healthcare System for the Future | Demand Management Hub  | <ul> <li>Relocation of ICT</li> <li>Move in and change to Demand<br/>Management Hub</li> </ul>  | Director of<br>Nursing &<br>Midwifery | Nurse Manager, Demand<br>Management Unit<br>Operational Nurse<br>Manager    | June 2022     |
| A Healthcare System for the Future | Theatre access   | <ul> <li>Improve theatre utilisation and on-time starts</li> <li>Review the current theatre schedule</li> </ul>   | General<br>Manager                    | Nurse Manager,<br>Operating Theatres<br>Director of Surgery                 | December 2021 |

| STRATEGIC DIRECTION      | STRATEGY                  | ACTIONS TO SUPPORT IMPLEMENTATION OF STRATEGY |                         | FACILITY<br>EXECUTIVE<br>SPONSOR | LOCAL LEAD             | TIMEFRAME |
|--------------------------|---------------------------|---|-------------------------|----------------------------------|------------------------|-----------|
| Our People Make a        | Develop a framework for   | • Establishment o                             | f the Working Party     | Director of                      | Consumer Community     | June 2021 |
| Difference               | rewarding and recognising | • Formalisation of                            | the framework through   | Finance                          | Participation Manager  |           |
|                          | staff                     | the TYE Impleme                               | entation                |                                  |                        |           |
| Our People Make a        | Change Management Plan    | Develop a Chang                               | ge Management Plan for  | General                          | Bankstown Project Lead | June 2021 |
| Difference               | for the new Bankstown     | the new Banksto                               | own Hospital to support | Manager                          | (TBA)                  |           |
|                          | Hospital                  | transition into tl                            | ne new hospital         |                                  |                        |           |
| A Leader in Research and | Bankstown-Lidcombe        | Establish an ann                              | ual Bankstown-Lidcombe  | General                          | Chair, Research &      | June 2021 |
| Teaching                 | Hospital Research Forum   | Hospital Researd                              | ch and Quality Forum    | Manager                          | Teaching Committee     |           |