Central Coast Local Health District

Safety and Quality Account

2021-22 Report 2022-23 Future Priorities









Acknowledgement of Country

Central Coast Local Health District acknowledges that we are located on the lands of Australia's first people. The traditional custodians of the land covered by our District are the Darkinjung people.

We pay respect to these lands that provide for us. We acknowledge and pay respect to the Aboriginal ancestors that walked and managed these lands for many generations before us.

We acknowledge and recognise all Aboriginal people who have come from their own country and who now call this country their home. We acknowledge our Elders, both past and present, our elders are our knowledge holders, teachers and pioneers.

We also acknowledge our Aboriginal youth who are our hope and who are our future leaders.



Contents

Statement on Safety and Quality	3
Our Vision and Purpose	4
Snapshot	8
Our Growing Community	12
Our Population	13
Key Facilities and Services	16
Our District COVID-19 Response	17
Safety and Quality Governance	19
Safety and Quality Planning	20
Caring for our Patients	21
Improving the Patient Experience	24
Partnering with Patients, Consumers and Carers	28
Volunteer Services	30
Compliments	32
Caring for our Community	34
Caring for our Community Plan 2021-2031	35
Caring for our Staff	36
Caring for the Coast Awards 2021	38
Improving Staff Safety in the Workplace	40
Improving Staff Wellbeing in the Workplace	41
Staff Safety and Quality Capability Development Strategies	42
Caring for our Resources	44
Information and Communication Technology (ICT) Plan	45
Efficiency and Improvement Initiatives	46
Organisational Sustainability Program	47
Caring for our Future	48
Wyong Hospital Redevelopment	49
Research	50
Performance against 2021-2022 NSW Health KPI	54
Future Safety and Quality Priorities for 2022-2023	59
Board attestation statement	60

Statement on **Safety and Quality**

Central Coast Local Health District (the District) is A major achievement for the year was completion of the committed to providing safe, high quality health care first stage of the \$200million redevelopment of Wyong services to members of the Central Coast community Hospital. Most services moved into the new six-storey and visitors to our region. Caring for the Coast is the building in October 2021, and refurbishments of other strategy we apply to everything we do. Our vision, Caring areas continue. At Gosford Hospital the Central Coast for the Coast-every patient every time, remains strong, Clinical School and Research Institute was officially and our purpose to enhance the health and wellbeing of opened by the Prime Minister, the Honourable Scott Morrison, on Monday 14 March 2022. The facility, a joint our community continues to drive how we plan for and deliver our health care services. initiative with the University of Newcastle, provides teaching and learning spaces for undergraduate nursing and medical students, office space for university highlight the improvements in patient safety and quality academic staff and CCLHD staff, and houses the Central Coast Research Institute for Integrated Care. Co-location of academic staff, clinical staff, researchers and students will foster exchange of ideas and research partnerships with the aim of transforming development and delivery of health care on the Central Coast.

The purpose of this Safety and Quality Account is to of care achieved over the past year, and to keep our community informed about the District's priorities for 2022 to 2023.

Over the past 12 months the District has continued to meet the challenges of the COVID-19 pandemic. These have included delivery of vaccination clinics, continuation In November 2021 the District welcomed Mr Scott of testing clinics, a statewide lockdown from July to McLachlan as the Chief Executive, and thanked Mr Brad October 2021 in response to the Delta strain of the Astill for his role as acting Chief Executive since May virus, significant staff shortages due to the Omicron 2021. variant and easing of restrictions from December 2021. At the same time, demand for inpatient and Emergency As the Chief Executive and Board Chair, we are pleased to present our Safety and Quality Account for 2021-2022. Department services has continued at very high levels. District staff have met these challenges with resilience, It showcases the District's progress and achievements commitment, skill and kindness. over the past 12 months. We share the areas to be worked on in the coming year, to ensure that we continue to deliver on our promise of Caring for the Coast-every patient, every time.

Our community has helped us to meet these challenges by adapting to changing health advice, particularly regarding arrangements for visitors at our facilities, isolation requirements for COVID-positive people and their close contacts, and access to COVID-19 vaccines and testing. We thank the Central Coast community for their patience and support through a complex and challenging year.



Scott McLachlan Chief Executive



Professor **Donald MacLellan Board Chairperson**

Our Vision and Purpose

Caring for the Coast sets out our shared vision, purpose and strategic priorities. Our vision is to deliver exceptional care by caring for our patients, our community and our staff. Our purpose is to enhance the health and wellbeing of our community by working with our community on agreed health priorities and to maintain accessible, high quality and integrated services.

Our Strategic priorities 2021-22

Our District identified the following three safety and quality priorities for the period 2021-22:

Priority 1

Reducing the percentage of Unplanned Hospital Readmissions (including Aboriginal and non-Aboriginal patients) within 28 days of separation to < 6.3% by June 2022.

Result

The percentage of unplanned hospital readmissions is trending downwards but continues to be a challenge. The rate of unplanned hospital readmission for all patients in 2021-2022 was reduced from 8.2% in July 2021 to 6.2% in June 2022 and was 6.6% for Aboriginal patients in June 2022. Work continues on the key focus areas of data accuracy, management of frequent Emergency Department attendees, urgency of admission education to admissions staff as part of the site-based action plans. At Wyong Hospital there is a focus on the cohort of patients presenting with respiratory issues; a multidisciplinary Breathlessness Clinic is being established.

Priority 2

Improving the District performance on all Hospital Acquired Complication (HAC) rates to within target by June 2023.

Result

The District met or exceeded ten of the fourteen HACs benchmark rates in 2021-22, up originally from only five in January 2021. This was achieved following the development of an overarching District HAC recovery plan utilising resources from the Australian Safety and Quality Commission in Health Care. Clinical Safety and Quality leads were allocated to priority HACs along with key clinician leads. Education and information were provided for both clinical and coding staff to improve documentation and coding accuracy. Performance towards improvement in these HACs was reviewed in monthly performance meetings. Rates of Healthcare Associated Infections Delirium, Respiratory Complications, and Falls remain above target and will continue to be a focus for improvement in 2022-23.





Priority 3

Implementation and monitoring of the Towards Zero Suicide initiatives including: Zero Suicides in Care, Alternatives to Emergency Departments for people at risk of suicide and Assertive Suicide Prevention Outreach Teams.

Result

Zero Suicides in Care initiative is supporting staff to redesign procedures and enhance suicide care pathways, reduce risks and build skills through clinician training and community education to prevent suicides among people in hospital inpatient and community care.

Suicide Prevention training schedules are in place, delivering classroom and in-service models across the Mental Health Service, with uptake from outside of mental health also.

A Safe Haven is being developed on the Gosford Hospital site to function as an alternative to Emergency Department presentation for people at risk of suicide. There has been a decline in the number of suicidal presentations to the District's Emergency Departments. The Mental Health Service continues to monitor the impact of COVID-19 on self-harm and suicide-related activity. Additional services have also been funded to support urgent treatment of mental health crises and suicidality in the community:

- Police Ambulance Clinical Early Response (PACER)mental health clinical staff responding alongside police and ambulance in Wyong and Gosford.
- The Way Back Support Service delivered by Coast & Country Primary Care for people following a hospital admission for a suicide attempt.
- SafeGuard a child & adolescent acute mental health response team operating in Gosford & Wyong.





Research and innovation - exploring new and better ways of delivering care and achieving better patient outcomes



Results statement

Enablers

Snapshot

2021-2022 Achievements





Caring for our Patients

- 10 of 14 Hospital Acquired Complications are now meeting or exceeding statewide targets -Medication Complications; Pressure Injury; Venous Thromboembolism: Renal Failure: Gastrointestinal Bleeding; Incontinence; Cardiac Complications; Endocrine; 3rd and as a finalist in the NSW Health 4th Degree Perineal Laceration and Neonatal Birth Trauma.
- Of the non-performing HACs (Healthcare Associated Infections, Respiratory Complications, Delirium, Falls), ongoing focus continues including coding education, clinical documentation, medical education including insights from the Infectious Diseases physicians and review of improvement plans at each facility.

The Nunyara Aboriginal Heath Unit staff provided approximately 2,000 COVID vaccinations to the local Aboriginal community. They

also provided approximately 800 COVIDpositive Aboriginal



community members with social support to enable them to stay at home through the infectious period of their illness.

The Ngiyang Aboriginal Pregnancy, Child and Family Health Service's Cultural Birth Plan was named Awards for 2022. The aim of the project was to improve the cultural birth experience of Aboriginal women in our Maternity Services through implementing cultural birthing practices and providing opportunities for connecting to culture, especially for those women living off Country. It is hoped this initiative will improve Aboriginal women and their families' health and wellbeing; improve perinatal morbidity and infant mortality rates and increase Maternity Services staff awareness and knowledge of First Nation culture and the importance of connection in birthing practices.



Caring for our Community

The District's Caring for our Community Plan 2021-2031 was launched in September 2021. The Plan, developed in consultation with over 200 community members, staff and external partners, sets out a blueprint for what we want to achieve for our Community Health Services over the next 10 years, and provides a roadmap for how we might get there. The Plan acknowledges the important trends towards community-based health care and strives to be at the forefront of this trend.

The Wyong Hospital Redevelopment artwork project, in collaboration with NSW Health Infrastructure, were finalists in the 2021 NSW Premier's Awards. The project improved opportunities in the construction sector for marginalised and local populations during the COVID pandemic. A bespoke art and culture strategy created a culturally safe and welcoming facility for all.



Caring for our staff

COVID-19 and influenza vaccination clinics were run for staff throughout 2021-2022. Staff who were COVID-19 positive or isolating as close contacts were supported by the COVID-19 Healthcare Worker Welfare Team. Caring for the Coast Awards were run again in 2022 to recognise staff-individuals and teams-and volunteers. June 2022 was Staff Appreciation Month with cupcakes and fruit boxes delivered to all CCLHD workplaces.

Caring for our Resources

m

The Organisational Sustainability Plan (OSP) continued to achieve District-wide savings. For 2021-2022, the District identified a total of \$29.042M in savings strategies. A total of \$25.204M was achieved against this target (86.0% achievement rate).

A large scale system of over 2800 solar panels was installed at Gosford Hospital, together with fast electric charging ports at both Gosford and Wyong Hospitals to support establishment of the first electric vehicle fleet for a NSW local health district.





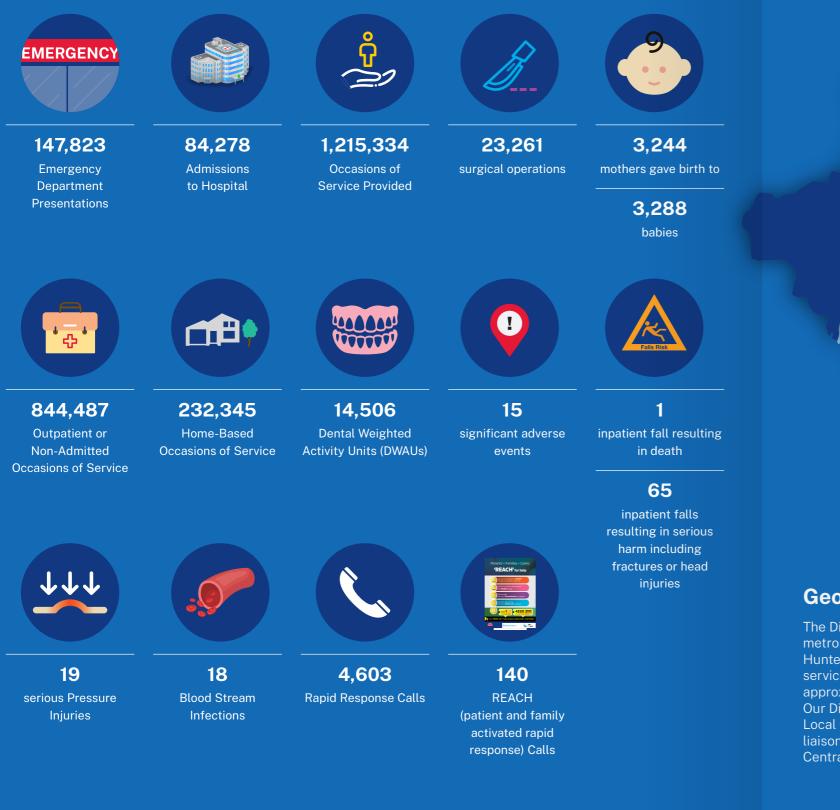


Caring for our Future

The \$200 million redevelopment of Wyong Hospital reached a milestone with clinical services moving into the new six-storey building in October 2021. The Central Coast Clinical School and Research Institute, a joint facility of CCLHD, The University of Newcastle and the Commonwealth Government, was officially opened in March 2022 by the Prime Minister, the Honourable Scott Morrison.



2021-2022 Year in Review at **Central Coast Local Health District**



Central Coast

Mangrove Mountain Gosford 🔾

Woy Woy 🔿 🛬

Geographica Profile

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The District is nestled north of metropolitan Sydney and south of the Hunter Valley and provides health care services across a geographical area of approximately 1853 square kilometres. Our District, covers the Central Coast Local Government Area and works in liaison with the Hunter New England Central Coast Primary Health Network

Safety and Qu

Lake Haven Toukley













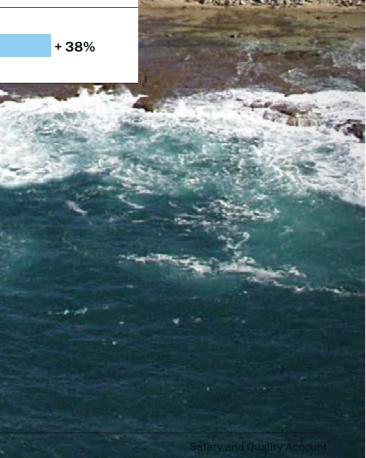
Our Growing Community

The population of the Central Coast is projected to increase to more than 375,000 people by 2031. This is an increase of approximately 40,000 people (or 11 per cent) from 2016. There is projected to be an increase in the Central Coast population across all age groups.

	2016	2031	Growth by age group 2016-2031	the second lines of the line second second	
0-15	67,731	68,178	+ 1%	-37A	
16-44	114,679	129,897	+ 14%		
45-69	106,248	108,615	+ 2%		
70-84	37,760	54,568	+ 45%	AL OF DESIGN	
85+	10,193	14,032	+ 38%		
	336,611	375,290		A CONTRACTOR	

An additional 22,954 older people aged 70-84 years (61 per cent increase) are expected on the Central Coast by 2031, and an additional 4,672 people aged over 85 years (46 per cent increase) by 2031.





Our Population



Socio-Economic Profile

Compared to NSW residents as a whole, Central Coast residents are:

- older;
- more likely to be born in Australia;
- more likely to have not completed Year 12 or equivalent education or attended university; and
- have a lower socio-economic status than the NSW average.

Aboriginal and Torres Strait Islander people

We have a proud Aboriginal community on the Central Coast with 17,047 Aboriginal residents in 2021 (4.9 per cent of the population). The Central Coast Aboriginal population is expected to grow at twice the rate of the non-Aboriginal population. Meeting the health service needs of this large Aboriginal population is essential, as is providing culturally appropriate and culturally safe services.

The Aboriginal population is also a younger population with a median age of 23 years, compared to 43 years for Central Coast residents overall. In 2021, 34 percent of the Aboriginal population were aged 0-14 years, compared to 17 percent for the non-Aboriginal population on the Central Coast.

Safety and Quality Account

Culturally and Linguistically Diverse (CALD) Populations

The Central Coast population is becoming increasingly diverse. In 2021, more than 72,000 Central Coast residents were born outside Australia, including more than 19,000 born in non-English speaking countries. The top non-English speaking countries of birth for Central Coast residents were the Philippines, India, South Africa and China.

Migrants from non-English speaking countries living in Australia for more than 10 years experienced poorer mental health and self-assessed health. In 2021, more than 3,000 Central Coast residents reported having low English proficiency. English proficiency can impact socioeconomic status and the ability to access health services and employment.

Innovative use of technology to support the healthcare access needs of people from culturally and linguistically diverse populations, implemented early in the COVID-19 pandemic, continued in 2021-2022. This includes videointerpreting, language cue cards, and CALD Assist and Vocable communication apps pre-installed on iPads used in clinical services.



People Living with Disability

On the Central Coast, 24,360 residents (or 7 per cent of the population) needed assistance for their disability in 2021. Every census count, the number of residents with a disability has increased.



Further, people with disabilities are more likely to have poorer health and increased lifestyle risk factors (smoking, lower levels of physical activity, risky alcohol consumption) than those without disabilities. More than 9,000 people on the Central Coast were receiving care packages through the National Disability Insurance Scheme as of March 2022.

The District recognises the importance of disability inclusion in health service delivery and its impact on the lives of people with a disability. The CCLHD Disability Inclusion Plan 2020-2023 will continue to build upon the high levels of care provided and work towards proactively identifying and removing barriers faced by staff and consumers with a disability. Some achievements with redevelopments have included incorporated hearing loops, dedicated disability changing place facilities, audio announcements in elevators, and wheelchairaccessible counters.

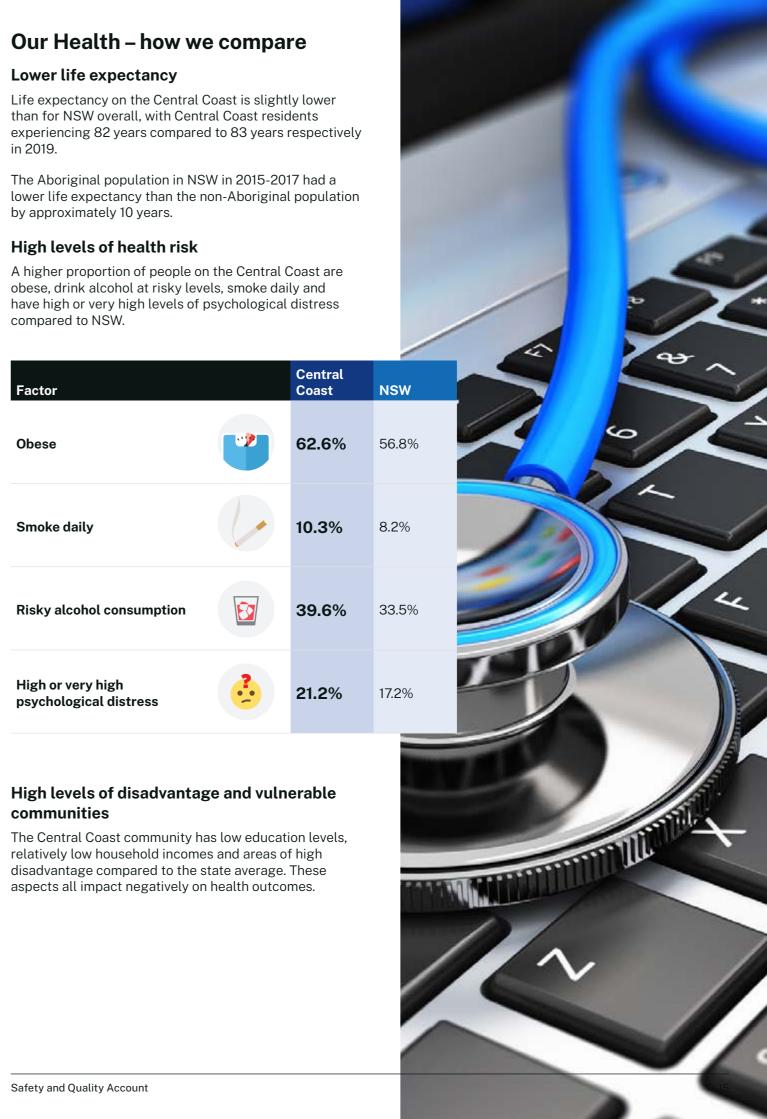
Carers

Carers are people who provide support to family or friends with a disability, illness or health condition. In the 2021 Census, 12.5% of the Central Coast population reported providing unpaid assistance to a person with a disability, health condition or due to old age (compared to 11.5% of the NSW population). The role of carers is often hidden. However, their contribution to community care is immeasurable. With the ageing of the population, increasing complexity and high levels of health risk and disadvantage, there is likely to be a greater need for caring roles in future years.

Increasing Complexity and Prevalence of Chronic Conditions

Chronic conditions can have a substantial impact on a person's health and the need for health services. In 2021, more than 20% people on the Central Coast had one long term health condition, compared to 18% of people in NSW as a whole. Eight per cent of Central Coast residents had two long term health conditions (compared to 6 per cent of the NSW population); and 4.4% of Central Coast residents had three or more long term health conditions (compared to 3 per cent of the NSW population).

In 2021, 1.1% of Central Coast adult residents reported that they have dementia as a long term health condition. (compared to 0.8% of the NSW population). With the ageing of the population, it is expected that the number of people with dementia, and the demand for dementia health and social care services, will continue to increase in future years.



Key Facilities and Services



Principal referral
 hospital
 Gosford



Major metropolitan hospital • Wyong



Sub-acute hospital



Community and early childhood centres

Renal dialysis units

 Lakehaven Community Health Centre, Long Jetty Healthcare Centre, Gosford Hospital

2 Emergency Departments

Gosford and Wyong



3 Oral health clinics

• Gosford, Wyong, Woy Woy Hospitals

Our District COVID-19 Response

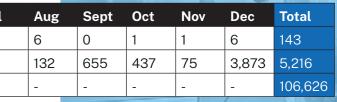
The COVID-19 pandemic continued to challenge the District and Central Coast community in 2021-2022. Reported positive case numbers for the Central Coast since 2020 tell the story of the complex and changing pandemic landscape.

	Jan	Feb	Mar	Apr	Мау	Jun	Jul
2020	0	0	105	12	1	4	7
2021	4	1	3	0	0	4	32
2022	27,114	12,146	22,909	20,591	14,403	9,463	-

Table 1. Confirmed COVID-19 cases per month – Central Coast

CCLHD responded to this challenge to keep our patients, staff and community as safe as possible. In 2021-2022 the District:

- continued to operate COVID-19 testing clinics at Gosford and Wyong Hospitals and Long Jetty Healthcare Centre, and carried out 81,801 tests;
- operated COVID-19 vaccination clinics at Gosford and Wyong Hospitals and delivered 120,941 adult vaccinations (12+ years) and 7709 vaccinations to children 5 to 11 years of age (total 128,650) to both staff and members of the community;
- managed the NSW Ministry of Health policy of mandatory vaccination for all staff, including support for staff with vaccination concerns;
- escalated and de-escalated teams of contact tracers in response to changing demands. Team members generally comprised staff working outside their usual roles;
- introduced and decommissioned Emergency Department 'red' and 'blue' zones to isolate and manage suspected and known COVID-positive patients, as case numbers fluctuated over the year;
- maintained dedicated COVID-19 wards at both Gosford and Wyong Hospitals;
- continued to review and monitor Infection Control processes and procedures and adjusted as needed, with a focus by the Infection prevention and Control (IPAC) team on 'donning and doffing' training, hand hygiene and mask fit testing; hand hygiene compliance rates of 83.9% across the District continue to be a focus area for all staff with emphasis on low performing healthcare workers; additional education and the provision of timely feedback for improvement were provided;
- managed the health service impact of staff who had to quarantine following potential exposure or COVID-19 illness;







- supported healthcare workers isolating due to COVID-19 illness or close contact exposure via the COVID-19 Healthcare Worker Welfare Team;
- continued to support delivery of care via telehealth where appropriate and safe;
- established the COVID-19 Sotrovimab Infusion Clinic for COVID-positive patients who met one or more criteria that put them at risk of more severe disease; and
- continued to liaise with GPs, nursing homes, Central Coast Council, other government agencies and social care providers to ensure a coordinated and effective response.

In July 2021, the Delta variant of the COVID-19 virus took hold in NSW, resulting in lockdowns and escalation of the District to red alert level. The District's COVID-19 response was accelerated, after some scaling down due to low rates of community-acquired infections in late 2020 and early 2021. The impact on our patients, staff and community was profound, particularly regarding restrictions on visitors to our hospitals. The arrival of the Omicron variant in December 2021, just as restrictions were easing, resulted in soaring COVID-19 case numbers, massively increased demand for testing and great pressure on our health service staff. The COVID Community Support Team (CCST) was established to care for COVID-positive patients in their own home using a standardised model of care. Remote monitoring and virtual care modalities are used to monitor for signs of clinical deterioration. Care is supported by General Practitioners and escalated via multiple referral channels.

The CCST team has:

- provided 8,428 occasions of service to over 5,000 Central Coast residents who tested positive to COVID-19 and were assessed as clinically suitable to receive care in the community;
- ensured there were no deaths in the community among patients cared for by the CCST;
- provided over 300 Sotrovimab Infusions and anti-viral therapies for at risk patients;
- provided supported accommodation for over 200 patients;
- attended over 2,000 COVID swabs in the community for vulnerable patients;
- operated extended hours (between 8.00am and 10.30pm) to allow for out of hours support;
- provided an acute care response/point of escalation for patients concerned about symptoms or assessed to be deteriorating;
- avoided Emergency Department presentations and hospital admissions by providing urgent assessment and care at home;
- case managed patients with a high risk of hospitalisation score to support the District's Planned Care for Better Health program;
- provided a direct referral pathway from NSW Ambulance to CCST for potentially preventable hospital transport of COVID-positive patients in the community; and
- · received positive feedback from patients and staff.

COVID-19 continued to have a significant impact on many aspects of our lives and on our community. Our Emergency Departments and acute care wards are experiencing high demand for services, driven by high COVID-19 case numbers plus the emergence of other acute respiratory illnesses such as influenza. Health service staffing is impacted by high numbers of our staff isolating at home due to COVID-19 illness or exposure. The mental health impact of lockdowns, social isolation and financial uncertainty is emerging in the community, placing increased pressure on mental health services. We thank the Central Coast community for their patience and support of the District through a complex and challenging year, and acknowledge the ongoing efforts of our staff to deliver safe, high quality care under difficult circumstances.

Safety and Quality Governance



A strong safety and quality governance structure is in place in the District to review key performance indicators, incidents and patient feedback, plus escalate issues as required.

Health Care Quality Committee (HCQC)

The HCQC is our District Board subcommittee, responsible for ensuring strong clinical governance is maintained, and for monitoring the safety and quality of the health care services within our District. The HCQC reports to our District Board any issues of concern related to the governance, safety or quality of the services we deliver.

Clinical Safety, Quality and Governance Committee (CSQGC)

This committee oversees the operationalisation of the safety and quality systems within a clinical risk management framework. Key responsibilities include identification of clinical improvement and innovation opportunities and monitoring compliance with the requirements of the National Safety and Quality Health Service (NSQHS) Standards.

Directorate Patient Safety & Quality Committees

These directorate and operational safety and quality committees are aligned to the National Standards and are overseen by the CSQGC. Key performance indicators and quality and safety priorities relevant to each directorate are presented and discussed with recommendations made for challenges experienced.

Safety and Quality Governance Structure



Safety and Quality Planning

Caring for our Patients

The following frameworks and plans are in place to direct safety and quality initiatives throughout the District.

CCLHD Clinical Governance Framework (2020-2023)



CLINICAL GOVERNANCE

the system by which the

governing body, managers, clinicians and staff share accountability for the quality of care provided, with a focus on minimising risks, continuously improving and fostering an environment of excellence in care

CCLHD Strategic Plan 2019-2024

 Our overarching goal is to provide safe, consistently high quality health services that reflect the health needs and preferences of the individual patient and consumer. Over this fiveyear period we continue to collaborate with our partners, including General Practitioners,



Ambulance, aged care providers and other health, research, education, community and business entities to deliver well-coordinated and integrated services across both health and social care. Through these partnerships we are challenging current practice and driving innovation and positive change. We will continue to build a culture where innovation is encouraged and supported, and where we continually seek to improve quality and outcomes. This extends beyond clinical services and patient care to nonclinical services including effective use of all our resources.

Clinical Services Plan 2017-2022

Consultation for the **District's Clinical Services** Plan (CSP) 2023-2028 has commenced with the Health Planner scoping and reviewing progress against the existing CSP, reviewing role delineations and service descriptions. and undertaking literature searches on contemporary models of care. Presentations



outlining the Plan's scope and development phases have commenced with key committees. Development phases include:

- 1. Review and background
- 2. Service activity analysis
- 3. Service activity projections
- 4. Establishment of service priorities
- 5. Final plan delivered in June 2023

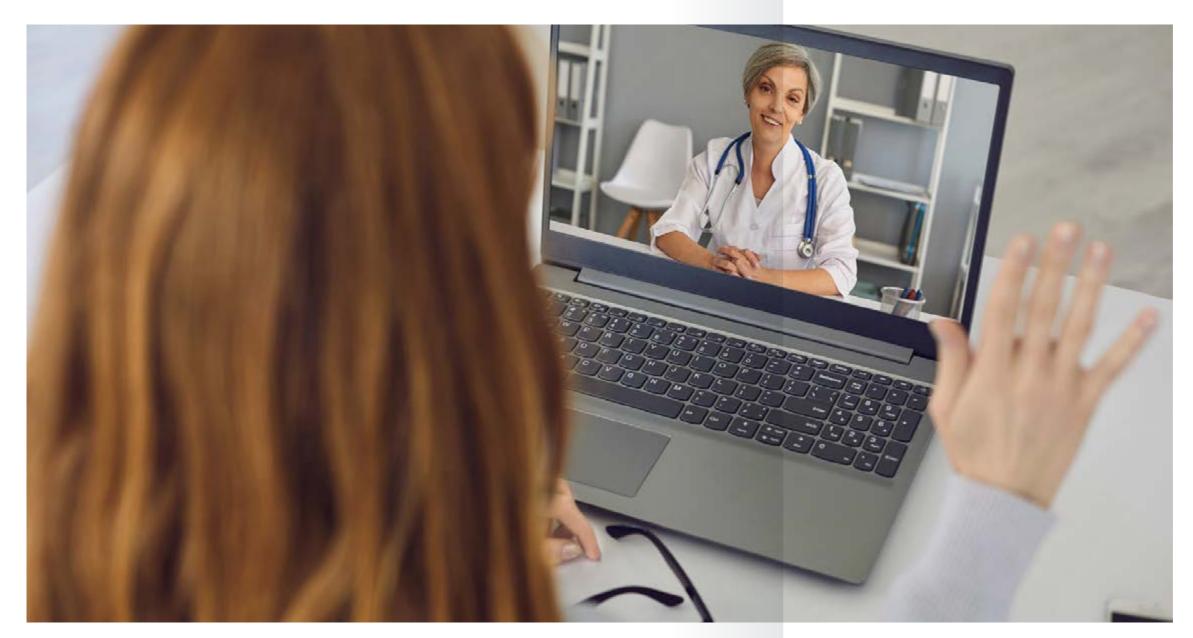
Caring for our Community 2021-2031

The Caring for our Community Plan 2021-2031, launched in September 2021, sets out the blueprint for Community Health Services across the Central Coast for the next ten years, and provides a roadmap for how the blueprint may be achieved.









The delivery of high quality and safe health care to our patients ensures successful patient outcomes and positive experiences for patients and staff. Listening to our patients and their carers; involving them in their health care and learning from the outcomes of the care we provide, ensures that our District continues to deliver high quality and safe health care to meet the needs of our consumers and carers.

Outlined below are some of the key achievements for 2021-2022.

Excellence in Stroke Care

CCLHD partnered with other local health districts and NSW Health for the NSW Telestroke Service, a virtual care initiative providing access to ground-breaking, time-critical treatments previously limited or unavailable due to geographical barriers. Telestroke connects local Emergency Department doctors to stroke specialists, available 24/7 via video consultation. Patients receive treatment closer to home and are only transferred if they need more complex treatment. This project was a finalist in the 2021 NSW Premier's Awards.

World Stroke Organisation Angels Gold Stroke Award:

Our Stroke Team also received a World Stroke Organisation Angels Gold Stroke Award at the Stroke Society of Australasia's Stroke conference in October 2021. This was a great honour, accorded to less than 10 services across the country. The award recognises achievement of benchmarks against key metrics of quality care in acute stroke and stroke unit care. It is based on the results of the biennial National Stroke Foundation audit completed earlier in 2021.

Virtual Care

The COVID-19 pandemic has been a major catalyst for the implementation of in-home monitoring across NSW. In collaboration with strategic partners including Telstra Health, Primary Health Networks, NSW Ambulance Services, social providers, non-government organisations and other internal and external key stakeholders, the COVID Community Support Team has been using new and innovative ways to engage consumers via a variety of modalities and virtual care. These include:

- successful implementation of a collaborative care model supported by GPs and Visiting Medical Officers;
- an enhanced and integrated care model in collaboration with GPs, Aboriginal Health, Paediatrics, Child and Family Health, and other services;
- a trial of virtual care via the Telstra My Care Manager app which allows patients to input health information and record observations;
- use of a new evidence-based risk of hospitalisation score to identify at-risk patients to link with the service;
- high level problem solving by senior nurses on a caseby-case basis including-
- o attending the Birthing Suite to give Sotrovimab infusions when required;
- remote monitoring with equipment, medications, supplies and prescriptions delivered to patients' homes;
- o virtual patient assessments via iPad;

- o overcoming barriers to virtual assessment such as deafness by using video chat including a sign language interpreter, and patients reporting symptoms and observations via text message; and
- o utilisation of the infusion clinic to provide wound care, pathology, and administration of medication in collaboration with specialties including Paediatrics, Infectious Disease, Haematology, Pharmacy, and GPs.

This innovative model has become the foundation of the Central Coast Health @ Home care model that aims to provide streamlined, integrated, and value-based care.

Central Coast Health @ Home – Hospital in the Home and Community Priority Response

Central Coast Health @ Home (CCH@Home) was developed and set up in 2021-2022 to provide access, triage and linkage to community based health services for people in need of urgent care at home or in residential aged care facilities. The model includes provision of care to people who are admitted to Hospital in The Home (HITH) under a CCLHD Admitting Medical Officer.

The service is part of the District's pivot to deliver more services in the home, community and virtual settings and connect with our partners to ensure integrated care services. It also supports the 2021-2022 District priority of reducing patient re-presentations and re-admissions to hospital. The program leverages partnerships with key external stakeholders including GPs, the Primary Health Network and NSW Ambulance Services by providing an integrated health care pathway, centralised clinical intake for clinicians and priority response to the community.

CCH@Home will commence operation in July 2022.

Cultural Birth Plan for Birthing off Country

The District's Ngiyang Aboriginal Pregnancy, Child and Family Health Service developed a Cultural Birth Plan for Aboriginal mothers birthing off Country. First Nations people believe a child should be born on the lands of their ancestors to ensure the child has a spiritual connection to their land. Birthing on Country has been shown to significantly improve health outcomes for Aboriginal mothers and babies. The Ngiyang team, Maternity Services and community leaders collaborated to develop a program to empower First Nations women and their families to identify their birthing off Country needs. The Cultural Birth Plan was named as a finalist in the NSW Health Awards for 2022.

Improving the Patient Experience



In 2021-2022 the Consumer and Community Engagement Committee underwent an extensive review of its Terms of Reference and agenda with the aim of increasing consumer participation and strengthening the community voice to the Board regarding consumer and carer experience of health care. The Committee has now been renamed the Consumer and Community Advisory Committee and is co-chaired by a consumer representative and a member of the Board. A Consumer Engagement Strategy is being developed to broaden consumer engagement to targeted community groups to ensure our services are developed and improved utilising the feedback of people with lived experiences.

The Consumer and Carer Engagement Team within the Clinical Safety, Quality and Governance directorate is responsible for liaising with consumers and carers to receive feedback on the services we deliver. The Team also supports our staff to implement Patient Reported Experience Measures (PREMS) and Patient Reported Outcome Measures (PROMS), to ensure that the services we deliver are continuously enhanced in line with consumer feedback. Throughout 2021-2022 the Consumer and Carer Engagement team has supported the District through:

- promoting the NSW Ministry of Health initiative, Elevating the Human Experience Guide to Action, as well as strong local staff and consumer participation in Ministry of Health enabler working groups;
- coordination and support to the Board Consumer, Community Advisory Committee;
- partnering with the Agency for Clinical Innovation (ACI) to continue implementing Patient Reported Measures within the Leading Better Value Care Program using a purpose-built IT platform-Health Outcomes Patient Experience (HOPE);
- supported and implemented the staged rollout of PREMS in the inpatient units at Wyong Hospital;
- used patient feedback data from the Bureau of Health Information, Ministry of Health and consumers via surveys, patient comment cards, how was your experience brochures, patient-reported measures, and consumer feedback, to inform quality improvement initiatives and improve patient experience and outcomes;
- reviewed current consumer feedback reporting capability and developed user-friendly reports for all key stakeholders at all levels;



- partnered with staff and the community to promote the identification, acknowledgement and support of carers;
- provided support to carers and referral to appropriate services; support included 418 carer occasions of service for the period January 2022 – June 2022, and distribution of 244 sensory blankets to people living with dementia;
- provided district-wide consumer feedback training for staff; and
- continued to support telehealth and virtual visiting across the District.



We have partnered with our consumers to gain their feedback in health care decision making and the codesign of services including:

- further development of the Carer Readiness Tool, a checklist designed to help carers and healthcare staff gauge the readiness of a carer to provide care at home after discharge of a patient from hospital;
- creation of the consumer-friendly Carer Readiness Information Form;
- advice and feedback on a research project examining the experience of patients who present to the Emergency Department in the last year of life, and their carers;
- a wayfinding review with consumers to improve access to our facilities for patients, carers and visitors;
- involvement of consumers on Quality and Safety committees, clinical redesign and other quality improvement initiatives, recruitment panels and in workforce education; and
- · coordinating recruitment of a consumer network.



Improving Patient Experience through Analysis of Consumer Feedback

Key focuses for 2021-2022 included:

- refining ways to use consumer feedback (complaints, compliments and suggestions) to identify trends;
- determining areas within our District that would benefit from learning from patient experience.

This was aimed at improving the safety and quality of the services and reducing the number of complaints received. In addition, consumer feedback is shared in our District staff newsletter, CCLHD Facebook page, at Safety and Quality Meetings, at the Health Care Quality Committee and at Board meetings.

In 2021-2022 our Consumer Feedback team:

- continued to co-ordinate and document open disclosure and resolution meetings with consumers. Actions identified from these meetings were shared with key clinicians and tracked to completion. Feedback was provided to consumers and the Health Care Complaints Commission to identify how the District has made changes to prevent future harm;
- continued the Dedicated Family Contact role to provide support and continuity for patients and families through the Serious Adverse Event Review (SAER) process. The patient/family experience is a key aspect of our District's incident investigation framework as part of our commitment to improving the safety and quality of the services we deliver;
- continued using patient stories as a result of adverse events and complaints as part of staff education;
- actively encouraged the use of the consumer feedback dashboard which tracks numbers and themes of complaints per ward/service to enable managers and executives to identify trends and improvement opportunities. Education has been provided to services to increase the utilisation of the dashboard;
- provided ongoing support to the District for ims+, the online platform for reporting incidents and near misses; and
- shared compliments to recognise staff and teams who have provided a valued patient experience.

Complaints

The District has consistently met the target for complaints acknowledged within 5 calendar days during 2021-2022. The exception was April 2022 when, due to unplanned staff leave and an increase in Ministerial complaints requiring prioritisation leading up to the election.

In addition, the District met the target of 80% of complaints closed within 35 calendar days for every month during 2021-2022.

Complaint numbers have been stable for the period of 2021-2022 compared to the previous year, with occasional spikes due to changes to visiting restrictions in response to COVID-19 waves.

Key complaint themes experienced were: coordination of patient care, service availability/delays, inadequate examination/treatment and attitude/conduct of clinicians.

Key priorities for 2022-2023

Key priorities for the District in 2022-2023 in relation to consumer feedback will be:

- to continue providing education to staff on addressing complaints at the point of care;
- to commence regular consumer feedback education days at Woy Woy Hospital. This was planned for 2021-2022 but was delayed due to ongoing restrictions on face-to-face meetings; and
- to continue implementation of Patient Reported Measures within the Leading Better Value Care program using the HOPE platform.



Partnering with Patients, Consumers and Carers

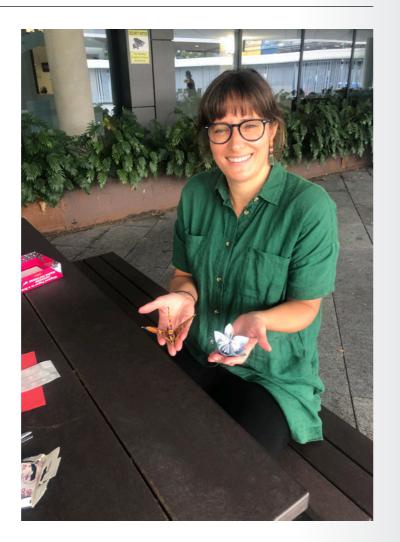
Carer Recognition and Engagement

In 2018 the District successfully tendered for Carer Investment Program funds from the Department of Communities and Justice to employ co-design principles to improve carer recognition and engagement in the transition from hospital to care at home. The Carer Readiness Tool (CRT) was created through a rigorous co-design process with carers (see White, S., Hart, M. N., & Lewis, S. (2021). Engaging carers in co-design: development of the Carer Readiness Tool. International Journal of Integrated Care, 21(1).)

In 2021 the Carer Support Unit partnered with the Transitional Aged Care Program (Transpac) to trial the Carer Readiness Tool in the community. Feedback from both staff and carers resulted in significant changes to the tool and Transpac processes. The Carer Readiness Tool has evolved into a consumer friendly "Community Carer Readiness Information" (CRI) form and there is now a standardised process for the identification and documentation of carers in the medical record.

The Transpac clinician directs the carer to the CRI with an explanation and invitation to respond. The CRI is collected and the outcome discussed at the case conference with referrals made to relevant allied health disciplines to address concerns. All carers are contacted by the social worker for follow up and linked into the Carer Support Unit and Carer Gateway for ongoing support.

The main themes raised by carers during this process are managing stress and strong emotions, accessing future services and how to take a break. Understanding carer needs helps to ensure carers are prepared for when the person they care for is discharged from the Transpac program. This reduces the risk of patient readmission and improves carer experience.



"The introduction of the CRI and the resulting focus on responding to issues and concerns raised by the carers has made the Transpac team more intentional about engaging with carers. While the team previously included carers in conversations about client goal setting and service delivery, clinicians may have made some assumptions about what the carer was most concerned about. The CRI now gives carers their own voice, separate to the client, enabling the team to respond to concerns that carers may have previously suppressed not wanting to upset their loved one. The team's care provision is now more collaborative and empowering to the carer." Manager, Transpac

"I was very overwhelmed at the time but it felt good to be able to express my concerns and know that the staff were listening to me and were there to help. They were all very wonderful and understanding". Carer

The CRI is now also being trialled in Community Rehabilitation Programs such as Cardiac/Heart Failure, Respiratory, Integrated Chronic Care, the Parkinson's Disease Group and the Motor Neuron Disease Multi-Disciplinary Team Clinic.



Patient Experience Week 2022

Patient Experience Week is an annual event held to celebrate how healthcare staff impact patient and carer experience every day. Inspired by members of the Beryl Institute community, Patient Experience Week provides a focused time for organisations to celebrate accomplishments, reenergise efforts and honour the people who impact patient experience every day.

Patient Experience Week was held in April 2022 with the theme "The Power of Story Telling". CCLHD chose to explore this theme by offering patients, carers, visitors, and staff an opportunity to tell their story and express their feelings through journaling and art. As a result, 15 people attended the Zoom journaling sessions with all reporting they enjoyed it and learned new skills; 56 people actively participated in the art activities held on site at our hospitals. Positive feedback on the inperson activities was received, with 93% of respondents reporting that they felt more relaxed and happier after participating, and 57% reporting that they felt calmer and more connected to others. The art pieces will be displayed in an exhibition later in the year.

Success in the Australian Pride in Health + Wellbeing Awards

Two CCLHD staff members received awards at the inaugural Australian Pride in Health + Wellbeing Awards in April 2022. Erin Heine (they/them), CCLHD Diversity and Inclusion Manager, won the LGBTQ+ Out Role Model Award recognising their contribution to LGBTQ+ inclusion in the Australian health and wellbeing sector. CCLHD Health Promotion Officer Jason van Ritten (he/ him) received the LGBTQ+ Ally Award as someone who does not identify as LGBTQ+ but has made a significant contribution to inclusion and diversity in healthcare.

Volunteer Services

On 26 June 2021, our volunteers were stood down for a second time since the beginning of the COVID-19 pandemic, when restrictions were reintroduced in NSW. A phased resumption began in November 2021, however increasing prevalence of COVID-19 in the community following easing of restrictions, together with the vulnerability of many of our volunteers, resulted in several resignations. Despite these challenges, between 1 July 2021 and 30 June 2022 a total of 9,839 hours were contributed to the District by 136 active volunteers. Thirteen new volunteers were welcomed to the team in March 2022.

Throughout the stand down a Help from Home program was established with a COVID-safe "click and collect" service. Volunteers helped from home with collating supplies, mail outs, knitting and other requests as needed. Volunteers also collaborated with a local community choir to participate in a Virtual Choir which was shared throughout NSW Health.

On 17 May 2022, the first volunteer function was held since 2019 and attended by over 70 volunteers in National Volunteer Week. It was a great opportunity to thank the volunteers for their patience, their care and assistance to the District and community as partners in care.

In 2022 new volunteer support roles commenced in the Neurology (C4) Inpatient Unit at Gosford Hospital and increased support has been provided to the Health Promotion Unit. The Volunteer Taster Research Project, has resumed and been expanded to include 20 nursing and medical students from the University of Newcastle. The Project is an opportunity for students to gain experience in a volunteer role in clinical areas. Volunteer Services has also trialled a school holiday Duke of Edinburgh volunteering program with two students completing the trial with another two confirmed for July 2022.



Safety and Quality Account



Compliments

Hello, I needed to attend Wyong ED todayThe nurse that attended at the desk for check in was the kindest, sweetest person. I've never come across someone like that before, she's so special in her ability to make people feel cared for regardless of their ailment. She's a credit to your team.

AB

I would like to express my appreciation for the professional and attentive care I received throughout my six day admission at Gosford Public Hospital. I arrived by ambulance with a fractured ankle at approximately 10am on Saturday morningThe ED staff: nurses, doctors, radiographers, physios and orderlies along with the ambulance officers who cared for me until handover were compassionate, reassuring and informative. They assessed and treated my injury with calm, efficient professionalism. And with the perfect degree of humour to relax me.

Unfortunately I do not remember their names to be able to give more personal thanks. I would particularly like to acknowledge the team of Ward H3: nurses, doctors, Physio, OT and orderlies. Again: reassuring, professional, competent and compassionate care shown towards myself and the four other patients I shared the ward with during the days of my stay....

I am particularly grateful for the breadth and depth of the nurse's skills, knowledge and experience.

With sincere thanks,

DL

I attended Wyong ED last night ...with chest pains and I was so grateful I felt compelled to send you an email. I would like to thank all the staff on duty last night for their compassion, efficiency and dedication to providing excellent care. I was seen by Dr. {M] and want to say thank you for her attention to detail and making me feel like a person not a number!

My hat is off to the incredibly tolerant and patient nurse running defence on the waiting room floor, what an incredibly difficult job, executed with such care it was amazing to watch.

My heartfelt thanks to all the staff I came in contact with, and those behind the scenes. I will certainly be contacting my local member encouraging you all receive more support, assistance and recognition for the incredible job you all do.

With warmest regards,

LB

I'm writing this email to extend my gratitude for the great experience I had giving birth to my baby girl at Gosford hospital

Firstly, I was so happy with how friendly and helpful all the midwives in the blue team were throughout my pregnancy. In particular, [K] was there with me by my side delivering my baby and I could not be more happy with how supportive she was, the whole time I felt so comfortable and could not have asked for a better midwife. She is definitely in the right industry and should be applauded for her great work!

KC

Last Wednesday afternoon my daughter had her COVID vaccine at Gosford Hospital and I just wanted to extend my thanks and appreciation to all the wonderful staff who assisted us in the process of getting her vaccinated. The staff and volunteers were wonderful caring people who went above and beyond to make her feel comfortable. I would like to thank every single staff member at Gosford Hospital. It's very obvious you are all feeling the strain of the last couple of years however your dedication and attentiveness shone brightly yesterday when I attended for a cancer operation. You should all be commended for the work you do. From the bottom of my heart I thank you all for making a scary and difficult time for me a lot easier and I hope you can get the very well deserved rest you need very soon.

DA

I would like to pass on my thanks and appreciation for the staff working in the Emergency Department at Wyong Hospital. I was very worried about my three-month-old daughter after being referred to the ED by a community nurse. We were looked after with great care and kindness. The Dr from ED, along with the Dr from Paediatrics and an array of nurses all worked hard to assess my daughter quickly and carefully. I am so thankful that everything was fine and it was a false alarm, but it was really comforting to have such a kind and caring team supporting my daughter and I through a scary time.

Thank you for helping make a difficult time much easier.

AM



I wanted to give some feedback on the service I've had having a newborn baby. Firstly I went through the midwifery practice group and I had a midwife, [S] the whole way through, she was amazing! Her care, thoughtfulness and education provided with the sessions leading up to labour, during labour and also the home visit follow-up sessions, really made me feel like I wasn't alone. I cannot express enough how amazing the services are and how people like [S] are giving young mums like me hope and the support we need. I then also had the community nurse come out.... She worked with me on some breastfeeding techniques, explained the blue book and highlighted the local breastfeeding drop in clinics and support service drop in clinics available in the area. These two women have had a huge impact on our new family's lives and yet they are just two women in a part of an amazing system.

Absolute warmest of wishes,

Thank you

KD

Caring for our Community

A healthy, engaged and empowered community



Caring for our Community Plan 2021-2031



In 2021, the District launched its Caring for our Community Plan 2021-2031. The plan identifies the following four key areas as the focus for actions to improve the health and wellbeing of the Central Coast community over the next ten years:

- our community, patients, families and carers;
- · our services;
- our staff; and
- our facilities.

Outcomes to 2031 are articulated for each focus area along with the actions that CCLHD will take towards these. Five key enablers support these focus areas and are essential in achieving the vision outlined in the Plan: governance and leadership; safety, quality and continuous improvement; partnerships, collaboration and integration; innovation and technology; and research.

Integrated Care

To provide seamless, efficient and effective care that reflects the whole of a person's health needs, CCLHD is adopting two state-wide Ministry of Health Initiatives, Planned Care for Better Health and ED to Community. Both initiatives aim to connect patients with the right services in the community and use a range of tools, including virtual care, to help inform conversations, deliver value and improve the health outcomes and experiences for the community. The Integrated Chronic Care Team implemented Planned Care for Better Health in April 2021. The team has successfully used an algorithm in the Patient Flow Portal to identify and proactively reach out to people who are discharged from an acute setting and have complex or chronic health needs. The Planned Care for Better Health initiative works with patients to establish person-centred goals and provide Care Coordination and Care Navigation services, link people with appropriate community-based and primary health services, and improve a person's ability to maintain good health and wellbeing in the community.

Ongoing monitoring and evaluation of the of Integrated Care initiatives has involved engagement and collaboration with CCLHD staff, as well as representatives from the Central Coast Hunter New England Primary Health Network. Engagement across CCLHD has led to a collaboration between the Integrated Chronic Care and Aboriginal Chronic Care teams to deliver Planned Care for Better Health together to increase the care delivered to First Nations people, increase collaboration between Nunyara Aboriginal Health and Chronic, Complex and Community Services, and increase the engagement of First Nations people with community-based health care providers.

In the next 12 months, ED to Community is planned for implementation and will use a central source of information to identify people who have high ED presentation rates. The program will bring together an interprofessional team to provide intensive case management and treat people outside of the hospital setting with a whole-of-person approach.

Caring for our Staff

A valued, respected, engaged and high performing workforce

Staffing Profile

Our District is the largest employer in the region, currently employing 8,419 staff to provide care to the Central Coast community. Staffing includes a mixture of clinical, support, administrative and maintenance staff. Our District workforce is 76.25% female and 24.88% of our staff are aged over 55 years. We are a leading employer of choice for Aboriginal people on the Central Coast and proudly employ approximately 2.8% of the total workforce that identify as Aboriginal or Torres Strait Islander people. Our District currently employs 1.53% of staff who identify as having a disability and are supported by 131 volunteers across our District.



Our workforce

8,419 staff provide care to our community

Safety and Quality Account

Workforce Strategy

Work on the five-year workforce strategy continues with the current focus on

- talent attraction;
- · leadership development;
- building workforce capacity;
- · staff engagement and development; and
- keeping staff well and in the workplace.

This 2018-2023 strategy aligns with the District's strategic and operational priorities. A ten-year workforce plan is also being developed in 2022. This will align with the District's Clinical Services Plan.

The District is also continuing to develop the Aboriginal Workforce Plan for 2022-2023. This is a key workforce initiative, given the importance of improving Aboriginal recruitment and retention practices and professional development pathways for Aboriginal employees. It is anticipated that the Aboriginal Workforce Plan together with the Aboriginal Health Priorities Plan will be finalised by 30 September 2022. In parallel, NSW Health is working to launch an updated Aboriginal Workforce Good Health Great Jobs Strategic Framework by early July 2022 which aims to increase employment outcomes for Aboriginal people across NSW Health.



24.88% aged over 55 years





1.53% have a disability



2.8% Aboriginal and/or Torres Strait Islander



Over 131

volunteers support our patients, visitors and staff

Caring for the Coast Awards 2021

The aim of the Caring for the Coast Awards is to recognise and reward our staff and volunteers for their outstanding contribution and achievements in improving the quality and safety of the health care we deliver to the Central Coast community.

The winners of the 2021 Caring for the Coast Awards were announced in November 2021 and due to COVID-19 restrictions, the award ceremony was replaced by short videos of each award winner. The winners of each category in the 2021 Awards were:

Team of the Year

Patient Experience Officers Gosford

Staff Member of the Year

Kate Oliver, Senior Social Worker, Gosford Hospital

Emerging Leader

 Erin Perrot, Clinical Nurse Educator, Wyong Medicine Services

Outstanding Leadership

• Jenny Martin, Director, Allied Health and Oral Health

Volunteer of the Year

Sandra Frazer

The Belinda Collier Award

(in memory of our former Executive Director of Workforce and Culture)

· Gauri Godbole, Team Leader Pharmacist, Aged Care and Mental Health, Gosford and Woy Woy Hospitals

Excellence in Improvement and Innovation

Paediatric Behavioural Triage Clinic, Wyong Hospital

Excellence in Patient Experience and Safety

• Pets are Family Too: Integrating the Human-Animal Bond into Patient Centred Care

Excellence in Inclusion and Diversity

 Creating an Integrated and Inclusive Maternity Experience for Deaf Mums

Excellence in Research

 Thriving or Surviving? The experience of new graduate nurses at an Australian regional hospital

Caring for the Coast Awards 2022

The District was fortunate to have Central Real, University of Newcastle and SalaryPackagingPLUS as our sponsors for the 2022 Awards; their ongoing support is greatly appreciated. The finalists for the 2022 Caring for the Coast Awards have been decided, and the announcement of the winner in each category will take place later in 2022.

The finalists for each category in the 2022 Awards are listed below, in no particular order.

Team of the Year

- CCLHD Pharmacy Department
- COVID Community Support Team
- COVID Vaccination Program

Staff Member of the Year

- Berna Gurisik, Speech Pathologist
- Kami Dibden, Volunteer Services Manager
- · Lenore Sutherland, Fire Officer Wyong Hospital

Volunteer of the Year

- Christine Glazebrook
- Judy Rumsey
- Suzanne Baillie

People and Culture Award

- Dr Jasmine Fyfe, Gosford Hospital Resident Medical Officer
- Leanne Hamilton, NUM, Wallama OTP Clinic
- William McClean, Team leader ACAT (Inpatients)

Excellence in Patient Experience and Safetv

- Improving Gosford Discharge Lounge Utilisation
- · Improving Patient Safety: A state-first eMR solution for dysphagia fluid modifiers and medications
- Subcutaneous Immunoglobulin (SCIg) Home-based Therapy Program - Community Pharmacy Collaboration

Central Coast Local Health District **CARING FOR THE COAST AWARDS** 2022

Central Coast Local Health District **CARING FOR THE COAST AWARDS** 2021



Excellence in Aboriginal Healthcare

- Aboriginal Lunchbox Connection (Health Promotion)
- Healthy Jarjums (Nunyara/Allied Health)
- Wyong Redevelopment Art Strategy (Wyong Redevelopment Team/Nunvara)

Keeping People Healthy

- Heal-Thy-Self (CoastCanCare/Carer Support Unit)
- Move Like a Mariner (Health Promotion)
- Youth Booth (Youth Health)

Excellence in Research and Innovation

- Large Scale Solar Panel project and Electric fleet car establishment-Gosford Hospital
- SLAM-B: Self-administration of Bortezomib for patients with myeloma: A pilot study
- The Specialist Wound Centre: A new model of integrated wound management



CENTRAL REAL CAPITAL

Improving Staff Safety in the Workplace



Influenza Vaccination Program 2022

The annual staff flu vaccination program ran from 26 April to early June 2022. During this time 5,240 staff were vaccinated under the program. The District also supported NSW Health Pathology and NSW Ambulance in staff vaccination campaigns. Promotion efforts continue to encourage staff to attend the Staff Health clinic for their vaccination requirements.

Staff COVID-19 Vaccination Program

The COVID-19 vaccination program for staff continued throughout 2021-2022. By the end of June 2022 8,061 staff had been double vaccinated or had received a recommended third vaccination, with 3,814 of these staff having received a booster vaccination as well.

Improving Staff Wellbeing in the Workplace

The stress of responding to COVID-19 has been prolonged and although many staff were anticipating rest over Christmas 2021, they have continued to respond to surging COVID-19 cases. Workforce support and wellbeing throughout the COVID-19 pandemic are critical to ensuring we continue to have a willing, reliable and capable workforce going forward.

During November and December over 40 wellbeing care packages were delivered to wards and departments at Gosford and Wyong hospitals and community health centres. The care packages contained items such as biscuits, tea, coffee, fruit, muesli bars and contained a personal thank you card from the Chief Executive.

During March 2022, the District engaged AccessEAP to run wellbeing support sessions for our managers. This was in response to many managers reporting they were seeking guidance in how to recognise and best support the mental health and wellbeing of their staff. The program provided an opportunity for managers to debrief, ask questions and gain meaningful tips on how to manage the ongoing challenges of the current work environment. Thirty-nine managers (approximately 10% of all managers) attended the sessions.

In April 2022, the Ministry of Health notified Local Health Districts of funding for initiatives to support staff wellbeing, comprising \$1.1M for workforce capacity initiatives such as backfilling furloughed staff, and \$1.6M for workforce wellbeing and recovery programs.

Examples of wellbeing initiatives being undertaken by the District during June 2022 have included:

- wellbeing and training programs for staff;
- implementation of Health Round Table (HRT) wellbeing module;
- a CE-facilitated leadership forum day;
- staff appreciation month;
- recruitment initiatives including talent attraction, recruitment process redesign, and development of an international nursing recruitment campaign;
- clinical supervision training for Allied Health staff;
- $\boldsymbol{\cdot}$ junior medical officer wellbeing support; and
- equipment purchases that support staff safety such as sit stand desks, bariatric training suits, bariatric hoists and virtual reality goggles.



Staff Appreciation Month – June 2022

The District took time in June 2022 to celebrate and thank all our staff who provide care and support for our patients and community every day. Our staff have faced major challenges over the last two years in maintaining care plus responding to the demands placed on them by the COVID-19 pandemic response.

To say thank you, a mass delivery of cupcakes and fruit boxes from several local businesses was organised for staff across all our locations. The commitment and effort of every staff member is truly appreciated.

Staff Safety and Quality Capability Development Strategies



Safety and Quality Capability Development

Our District is committed to implementing education and training programs that support staff to improve the safety and quality of care we deliver. Our District adopted the Safety and Quality Essentials Pathway (the Pathway) as a framework to build the safety and quality capability of our staff, and enable them to deploy those capabilities into everyday practice.

The District signed an agreement with the Clinical Excellence Commission (CEC) in May 2021 to implement the Pathway over the following two years. It is the expectation that over time all staff will have a foundational level of knowledge, focusing on an awareness of the six dimensions of healthcare safety and quality. The six dimensions include safety, timeliness and accessibility, effectiveness and appropriateness, patientcentred care, efficiency, and equity.

Over 2021-2022, foundational level training options were promoted including the 6-minute video "The Six Dimensions of Healthcare Quality", e-Learning modules in My Health Learning and a two-hour facilitated training session. As a result:

• 109 staff completed, and 95 staff partially completed, the five Foundational training modules;

- 133 staff watched the "The Six Dimensions of Healthcare Quality" video;
- 93% of managers and senior clinicians across Allied Health and Oral Health, Community, Chronic and
- Complex Care, Women, Children and Families, Drug & Alcohol HARPs, and Aged, Subacute and Complex
- Care completed the facilitated Safety and Quality Capability Pathways foundational level training;
- presentations about the CEC Quality & Safety Pathways were completed in all Directorates;
- four CCLHD staff have attended the CEC Accelerated Adept level training. This is an 8-day intensive

CEC training program which trains staff locally to deliver the 12-month program. Staff attending this training become part of the "CCLHD Improvement Faculty".

An improvement capability framework development plan is currently being devised to support the spread and embedding of improvement capability activities into all facets of the organisation. This will be delivered in 2022-23.

Safety and Quality Capability Focus Areas

Delivery of safe, high quality healthcare requires strong leadership and governance to build accountability at all levels of the organisation. Therefore, in 2021-2022 the District continued to focus on education initiatives with the aim of building leadership skills among clinical staff. Two main improvement methodologies are in place at the District, namely the Agency for Clinical Innovation (ACI) Clinical Redesign process and Lean Six Sigma. A number of District staff attended training in both methodologies.

Three CCHD clinical staff attended the ACI Clinical Redesign school in 2021-2022, resulting in development of the following three projects focusing on improving delivery of clinical services:

- improving ED to inpatient unit access for paediatric patients;
- improving the on-call after-hours social work model of care; and
- reviewing birthing options at Wyong Hospital.

All three initiatives will continue in 2022/23.

During 2021-2022, eight participants undertook the Lean Six Sigma Green Belt training, developing projects including:

- identifying ways to reduce delays in discharge for surgery patients;
- reducing waiting lists for mental health services; and
- improving care for patients with back pain in the Emergency Department.



Twenty-four participants will undertake Lean Six Sigma Green Belt training in 2022-23. Their projects include improving access to community respiratory services, streamlining audit processes, and increasing weekend patient discharges.

Nursing and Midwifery Preceptorship Program

Preceptoring is providing support, skill development and supervision for undergraduates, new graduate staff and staff transitioning to practice, to promote patient safety. It works by pairing an experienced nurse (preceptor) with a student or new nurse to facilitate a smooth transition into the clinical environment.

The District's Nursing and Midwifery preceptor team, formed in March 2021, have supported 11 units to develop preceptoring skills by delivering a structured learning program. Since the program began 261 preceptors have learnt about communication, critical questioning, providing verbal feedback and maintaining wellbeing. The program has recently expanded to the Mental Health Inpatient Unit at Gosford Hospital, with 12 preceptors trained to date.

Caring for our Resources

Financially responsible and sustainable



Ensuring that our resources are delivered effectively and efficiently is a key priority for our District. Our District is committed to proactively managing our resources, and regularly seeking opportunities to disinvest and invest in aspects of health care that will improve the outcomes for our patients and the community. Outlined below are some of the key achievements for 2021-22.

Information and Communication Technology (ICT) Plan

Enhancing the eMR Program

CCLHD and Northern Sydney Local Health District (NSLHD) were selected to pilot a new Comprehensive Care Project. This product will align eMR functionality with work currently underway at the Agency for Clinical Innovation (ACI), Clinical Excellence Commission (CEC) and Australian Commission on Safety and Quality in Health Care (ACSQHC). Two components of this project have been developed and will be piloted in the District commencing June 2021. These are:

- Risk Screening and Assessment adult and paediatric risk screening pathways for inpatient settings with resulting recommendations, strategies and actions. This also includes the Smoking Cessation pathway; and
- Diagnosis and Documentation Workflow-optimised searching for diagnosis terminology and a new style of clinical documentations for doctors, nurse practitioners and allied health clinicians

New modules on Intravenous Fluid Management and Patient Friendly Medication List have also been developed and will be implemented from July 2022.



CCLHD Digital Strategy 2021-2026

The CCLHD Digital Strategy 2021-2026, developed in conjunction with NSLHD, sets the technology vision and focus areas for our LHD over the next five years and articulates a roadmap to achieve this vision. Significant improvements in technology have helped CCLHD provide better health outcomes for our population. By more effectively leveraging technology, we can deliver affordable and accessible patient-centred care, improve the overall health of our communities, engage and develop our workforce and ensure that decision-making is supported by real-time access to data. The Digital Strategy recognises seven focus areas that will guide digital investments, enable the strategic plan priorities and deliver benefits to the District through a set of 27 defined initiatives.

Efficiency and Improvement Initiatives



The solar panel program involves installation of a large scale PV solar system (1.36MW) at Gosford Hospital which includes fast charge electric charging ports to support the roll out of an electric vehicle fleet. The project was funded via an Energy Efficient Government Program loan of \$1.879M and is one of the three largest solar projects proposed for NSW Health. Over 2800 solar panels were installed on available roof space during 2021-2022 and commissioned in June 2022. The project provides up to 13% of Gosford Hospital's electricity needs and is expected to save over \$285,000 per year in electricity charges. Expected payback on the \$1.8M investment is around 7 years whilst the panels and system are expected to last for 20+ years.

Fast car charging outlets are being established not only at the Gosford campus, but also at Wyong Hospital and at Community Health sites to support wider distribution of battery powered electric vehicles across the District. CCLHD will be the first NSW Health local health district or network to run full battery powered electric fleet cars. Purchase of electric vehicles is the first step toward the District meeting NSW Government objectives on Net Zero carbon emissions and green fleet procurement by 2030.

Solar panels are now being installed in the car park of Wyong Hospital that will see the green energy generated meet, on average, 100% of the new Block H electricity needs.

The originality of CCLHD's efforts was picked up by NBN TV News and reported through the Central Coast and Hunter regions.

Organisational Sustainability Program



The Organisational Sustainability Program provides the District with a strong framework and governance approach to achieving efficiencies and reducing wastage. The program brings together over 100 initiatives driven by staff from across the District. Delivering these efficiencies allows the district to meet its on-budget objective and to reinvest in new services.

For 2021-2022 the District realised \$25.204M in savings from a target of \$29.042M.

Caring for our Future

High quality, integrated, innovative services





Wyong Hospital Redevelopment



In 2021-2022 our District continued the \$200million redevelopment of Wyong Hospital which will significantly enhance health care on the Central Coast and meet the growing needs of our community. We look forward to the completion and installation of the Magnetic Resonance Imaging unit in November 2022. Completion of the solar car park installation before the end of 2022 will provide solar power for the entire Block H.

The following milestones were achieved:

- the new building, Block H, opened in the week of 11 October 2021 with a successful move and go live of all departments and services;
- expansion of the operating theatre complex continued with a progressive go live of the new operating theatre, offices, staff room and storerooms over the first half of 2022;
- the Sterilising Services Department was delivered with a successful go live in January 2022;
- refurbishment of decanted spaces commenced in late 2021 for an expanded Transit Lounge (11 bays), an expanded Medical Day Unit (12 bays), the General Manager's Unit, the Nursing Administration Unit and offices for Emergency Department and Medical Imaging staff specialists. Refurbishments were completed in a staggered program from May to July 2022.

Safety and Quality Account

Stage 3 of the redevelopment is now in the planning phase and includes the following: Cancer Day Unit expansion, Women's Health Clinics, NSW Health Pathology expansion, an Aboriginal Health Unit, a Carer Support Unit and medical office accommodation.

The Wyong Hospital Redevelopment team have overcome significant obstacles due to the ongoing COVID-19 pandemic to deliver important milestones in the redevelopment.

Research

Growth in Research

It has been a significant year for Research at our District with the Research Office relocating to the new Central Coast Clinical School and Research Institute in June to July 2021, and the official opening of the building on 14 March 2022 in the presence of the Prime Minister of Australia and other dignitaries.

The CCLHD Strategic Research Plan 2022-2026 has been completed and published on the District's intranet and internet pages. An Annual Implementation Plan for the Strategic Plan has been endorsed and is progressing.

Consultation for the CCLHD Aboriginal Strategic Research Plan is underway.

Research Enrichment and Collaboration

The number of Honorary Conjoint Scholars appointed at the District is continuing to grow with five endorsed and one pending. These Scholars provide expertise, mentoring opportunities and research collaboration for local staff in areas including nursing and midwifery, palliative care, podiatry and integrated care.

A proposal for a \$6 million Northern Cluster Rural, Regional and Remote Clinical Trial Support Unit was submitted on 17 March 2022 to the NSW Ministry of Health in collaboration with Hunter New England LHD, Mid North Coast LHD and Northern NSW LHD. The purpose of the Clinical Trial Support Unit is to increase clinical trial capacity and capabilities across the cluster, focused directly on rural, regional and remote populations. The outcome for this funding is pending.

Planning for use of the \$7 million Translational Cancer Research Capacity Building Grant awarded to NSW Regional Health Partners (NSWRHP) by the NSW Government through the Cancer Institute NSW is progressing. A revised governance structure is under development which includes Professor Nick Goodwin, Director of Research, to represent the CCLHD on an Implementation Advisory Group together with lead representatives from the other NSWRHP partners. The CCLHD will also nominate clinical and academic leads to work on its Cancer Expert Group, and will be developing its own cancer research support group to ensure that CCLHD priorities and interests are supported.

Safety and Quality Account







Research Activity

Three Palliative and End of Life Care research projects, funded via a \$300,000 grant from the Medical Research Future Fund (MRFF) to the NSW Regional Health Partners (NSWRHP) have progressed during the year. These projects have received ethics approval, though some delays in data audit have been experienced, partly as a result of COVID-19. The projects have been formally extended by 3 months, until 30 September 2022 by NSWRHP.

The total number of active applications being managed by the Research Office as at 30 June 2022 was 766, consisting of 415 research projects, 321 quality improvement projects and 30 non-research activity case reports.



Central Coast Research Institute

The Central Coast Research Institute for Integrated Care (CCRI; the joint venture between the District and the University of Newcastle) saw its research portfolio increase by twelve projects (national and international) with an overall funding value to the CCRI of just over \$550,000 (total grant value of over \$16 million). This includes involvement in a NHMRC Centre for Research Excellence on Integrated Health and Social Care led by the University of Sydney. The CCRI has convened two core advisory groups for our region: Priority-Driven Research Committee (with CCLHD, UON, the PHN, and other key stakeholders), and the Health Professional and Researcher Network Group. The CCRI also seeks to align with the Aboriginal and Torres Strait Islander Health Research Strategy for the Hunter and Central Coast region, and its value framework and governance structure, which are being developed and facilitated with the University of Newcastle.

The CCRI website (www.ccri.asn.au) was developed and launched in 2021-2022. The website lists current and completed research projects that fall within the Institute's four key research priority areas of Aboriginal and Torres Strait Islander Health, Active and Healthy Ageing, Complex and Chronic Illness, and Mental Health and Wellbeing. It also outlines services offered by the Institute including education and training activities, an Integrated Care Evidence Service, and support for design, implementation and evaluation activities. There are multiple access points for other organisations, potential donors and community members to make contact and become involved in the work of the Institute.

Nursing and Midwifery Research

In July 2021, the Nursing and Midwifery Research Advisory Group was established to advise on the promotion, development and support of nursing and midwifery research. The Advisory Group make recommendations to the Nursing and Midwifery Leadership Committee that support nurses and midwives across the District to lead and be actively involved in research.

Nurse-Led Research Projects

Four nurse-led research projects were finalists in the 2021 Caring for the Coast Awards, three in the Excellence in Research category and one in the Excellence in Improvement and Innovation Category. The winner of the Excellence in Research category was *Thriving or Surviving? The experience of new graduate nurses at an Australian regional hospital*.

Eight local nurse-led research projects have progressed during the year, including four projects that received seed funding totalling \$90,000 through the Caring for our Future research grants and/or the NSW Health Nursing and Midwifery Innovation Scholarship program. The projects are:

- Self-administration of Bortezomib for patients with myeloma: A new model of care.
- The Dino Op Program: An integrated approach to reducing anxiety and improving perioperative outcomes in paediatric patients.
- The Specialist Wound Centre: A new model of integrated wound management.
- The effects of hospital volunteering on empathy levels in nursing and medical students.
- Analysis of five years of wound management in an Australian community setting.
- Development and evaluation of clinical procedure videos.
- Measurement properties of the Steroid Symptom Questionnaire Multiple Myeloma (SSQ-MM) in a multicentre study with concurrent health related quality of life (HRQoL) measurement.
- Culturally Appropriate Anxiety and Depression Health Screening Tool for First Nations Women



Clinical Research Capacity Building (RCB) Project

The District has partnered with The School of Nursing and Midwifery, University of Newcastle and the Mid North Coast and Hunter New England Local Health Districts to conduct a two-year program aimed at research capacity building of Clinical Nurse and Midwifery Consultants (CNC/CMCs). The research project, funded by the NSW Regional Health Partners, is titled Identifying how an Academic Health Services Partnership can Support Effective, Sustainable and Impactful Research by Clinical Nurse and Midwife Consultants. In 2021, focus groups with CNCs, CMCs and key stakeholders identified facilitators of engagement, resource requirements and local research priorities. The findings led to the development and launch of the ClinicalRCB digital platform; and the two-day Clinical RCB Conference of presentations, workshops, and networking opportunities held in June 2022.

Professor Brett Mitchell Award Winner

Professor Brett Mitchell, CCLHD Honorary Conjoint Scholar and UoN School of Nursing and Midwifery, won the Health Services award at the 18th Research Australia Health and Medical Research Awards, December 2021. Professor Mitchell received the Health Services Award for his leading work in infection control, including research helping to drive greater use of antiseptics to prevent infection in hospital settings. In September 2021, Professor Mitchell was the recipient of an NMHRC Investigator grant of over \$1.5 million to fund his research program of three inter-related projects over five years. The work will provide evidence for practical measures to reduce common infections as well as improving cleaning in healthcare. Professor Mitchell is liaising with the District to partner on various research projects.

Performance against 2021-2022 NSW Health KPI

Safety and Quality Domain	Measure	Period	Target	2021-22 Result
	Outcome 1: Keeping people healthy through preve	ntion and healt	h promotion	
Effectiveness	Childhood Obesity – Children with height and weight recorded (%)	Jan 2022 - March 2022	>= 70.0%	57.3%
Equity	Smoking During Pregnancy – At any time (%): • Aboriginal Women	July 2021- June 2022	<=34.3%	33.0%
Equity	Smoking During Pregnancy – At any time (%): • Non-Aboriginal Women	July 2021- June 2022	<= 11.1%	13.0%
Efficiency	Hospital Drug and Alcohol Consultation Liaison - Number of consultations (% increase)	July 2021 - March 2022	801.0	772.0
Effectiveness	Hepatitis C Antiviral Treatment Initiation – Direct acting -by LHD residents (% variance)	July 2021 - March 2022	195.0	39
Effectiveness	Children fully immunised at one year of age (%)	June 2022	>= 95.0%	95.1%
Effectiveness	Pregnant Women Quitting Smoking - By second half of pregnancy (%)	July 2021 - June 2022	≥ 19.5%	32.5%
Effectiveness	Get Healthy Information and Coaching Service - Get Healthy in Pregnancy Referrals (% increase)	July 2021 - March 2022	≥ 365.0	332.0
Effectiveness	BreastScreen participation rates (%)Women aged 50-69 years	July 2020 - June 2022	>= 55.0%	40.0%
Effectiveness	BreastScreen participation rates (%) • Women aged 70-74 years	July 2020 - June 2022	>= 55.0%	44.9%
Effectiveness	NSW Health First 2000 Days Implementation Strategy – Delivery of the 1-4 week health check %	January 2022 -March 2022	>= 85.0%	82.7%
Equity	* Aboriginal paediatric patients undergoing Otitis Media procedures (Number)		>= 3.0	

Safety and Quality Domain	Measure	Period	Target	2021-22 Result
	Outcome 2: People can access care in and out of h wellbeing	ospital setting	s to manage t	heir health and
Appropriateness	Potentially Preventable Hospital Services (%)	July 2021 - June 2022	<= 22.5%	22.4%
Effectiveness	Mental Health Acute Post-Discharge Community Care - Follow up within seven days (%)	July 2021 - June 2022	>= 75.0%	75.0%
Effectiveness	Mental Health: Acute Readmission - Within 28 days (%)	July 2021 - June 2022	<= 10.0%	8.0%
Patient-Centred Culture	Electronic Discharge Summaries – Sent electronically and accepted by General Practitioners (%)	July 2021 - June 2022	>= 51.0%	78.0%
Effectiveness	Domestic Violence Routine Screening – Routine Screens conducted (%)	July 2021 - March 2022	>= 70.0%	66.9%
Effectiveness	 Sustaining NSW Families Programs - Applicable LHDs only - see Data Supplement: Families completing the program when the child reached two years of age (%) 	January 2022 -March 2022	>= 50.0%	83.3%
Patient-Centred Culture	Mental Health Peer Workforce Employment – Full Time Equivalents (FTEs) (Number)	July 2021 - March 2022	>= 4.0	9.8
Timeliness and Accessibility	Telehealth Service Access - Non-admitted services provided through telehealth (%)	July 2021 - June 2022	>= 10.0%	0.4%
	Outcome 3: people receive timely emergency care	•		
Timeliness and Accessibility	 Emergency Department Presentations - Treated within benchmark times (%): Triage 1: seen within 2 minutes 	July 2021 - June 2022	100.0%	100.0%
	 Emergency Department Presentations - Treated within benchmark times (%): Triage 2: seen within 10 minutes 	July 2021 - June 2022	>= 95.0%	79.1%
	Emergency Department Presentations - Treated within benchmark times (%): • Triage 3: seen within 30 minutes	July 2021 - June 2022	>= 85.0%	54.7%
	Transfer of care – Patients transferred from ambulance to ED <= 30 minutes (%)	July 2021 - June 2022	>= 90.0%	71.1%
	Emergency Department Extended Stays: Mental Health presentations staying in ED > 24 hours (Number)	July 2021 - June 2022	0	7.0
	Emergency Treatment Performance – Admitted (% of patients treated in <= 4 hrs)	July 2021 - June 2022	>= 50.0%	20.6%

Safety and Quality Domain	Measure	Period	Target	2021-22 Result
	Outcome 4: People receive high quality, safe care	in our hospita	ls	
Safety	Hospital Acquired Pressure Injuries (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 6.6	5.6
	Healthcare Associated Infections (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 117.6	150.1
	Hospital Acquired Respiratory Complications (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 27.8	35.8
	Hospital Acquired Venous Thromboembolism (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 8.7	5.8
	Hospital Acquired Renal Failure (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 2.4	0.8
	Hospital Acquired Gastrointestinal Bleeding (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 11.9	7.3
	Hospital Acquired Medication Complications (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 13.9	13.1
	Hospital Acquired Delirium (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 50.0	61.1
	Hospital Acquired Incontinence (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 5.0	1.5
	Hospital Acquired Endocrine Complications (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 29.1	25
	Hospital Acquired Cardiac complications (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 41.7	35.1
	3rd or 4th Degree Perineal Lacerations During Delivery (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 391.6	305.2
	Hospital Acquired Neonatal Birth Trauma (Rate per 10,000 episodes of care)	July 2021 - June 2022	<= 104.3	44.8
	Fall-related Injuries in Hospital –Resulting in fracture or intracranial injury (Rate per 10,000 episodes of care)	July 2021- June 2022	<= 6.7	10.3
Efficiency	Elective Surgery Overdue – Patients (Number): • Category 1	Jun-22	0	3
	Elective Surgery Overdue – Patients (Number): • Category 2	Jun-22	0	402
	Elective Surgery Overdue – Patients (Number): • Category 3	Jun-22	0	1215
	Elective Surgery Access Performance – Patients treated on time (%): • Category 1	July 2021- June 2022	100.0%	99.9%
	Elective Surgery Access Performance – Patients treated on time (%): • Category 2	July 2021- June 2022	>= 97.0%	75.8%
	Elective Surgery Access Performance – Patients treated on time (%): • Category 3	July 2021- June 2022	>= 97.0%	43.1%
Equity	Discharge against medical advice for Aboriginal inpatients (%)	July 2021 - June 2022	<=1.6%	2.4%

Safety and Quality Domain	Measure	Period	Target	2021-22 Result
Patient-Centred Culture	Patient Engagement Index (Number) ED Patients not admitted to hospital	July 2021 - September 2021	>= 8.5	7.8
	Patient Engagement Index (Number) Adult admitted patients	July 2021 - September 2021	>= 8.5	8.4
	Overall Patient Experience Index (Number)Adult admitted patients	July 2021 - September 2021	>= 8.5	8.8
	Overall Patient Experience Index (Number)Emergency department	July 2021 - September 2021	>= 8.5	8.5
Timeliness and Accessibility	Paediatric Admissions from Elective Surgery Waiting List -% variance from target (Number)	July 2021 - June 2022	760.0	376.0
Effectiveness	Unplanned Hospital Readmissions – All admissions within 28 days of separation (%): • All persons	July 2021 - June 2022	<= 7.9%	6.2%
	Unplanned Hospital Readmissions – All admissions within 28 days of separation (%): • Aboriginal persons	July 2021- June 2022	<= 8.6%	6.3%
Appropriateness	Mental Health: Acute Seclusion • Occurrence (Episodes per 1,000 bed days)	July 2021 - April 2022	<= 5.1	5.0
	Mental Health: Acute Seclusion Duration (Average Hours) 	July 2021 - June 2022	<= 4.0	2.3
	Mental Health: Acute Seclusion • Frequency (%)	July 2021 - April 2022	< 4.1	4.6%
Safety	Mental Health: Involuntary patients absconded from an inpatient mental health unit – Incident Types 1 and 2 (rate per 1,000 bed days)	July 2021 - April 2022	<= 0.8	0.5
Patient-Centred Culture	Mental Health Consumer Experience: Mental Health consumers with a score of Very Good or Excellent (%)	January 2022 - March 2022	>= 80.0%	68.0%

Safety and Quality Domain	Measure	Period	Target	2021-22 Result
	Outcome 5: Our people and systems are continuou outcomes and experiences	usly improving	to deliver the	best health
Patient-Centred Culture	Workplace Culture – People Matter Survey Culture Index – Variation from previous year (%)	2020/2021	>= -1.0%	-4.0%
	Take Action - People Matter Survey - Take action as a result of the survey - Variation from previous year (%)	2020/2021	>=-1.0%	-4.5%
	Staff Performance Reviews – Within the last 12 months (%)	Jun-22	>= 90.0%	40.8%
	*Recruitment – Average time taken from request to recruit to decision to approve/decline/defer recruitment (business days)		<= 10 days	
Equity	Employment of Aboriginal Health Practitioners - (Number)	July 2021 - December 2021	>= 1.0	0
	Aboriginal Workforce Participation – Aboriginal Workforce as a proportion of total workforce at all salary levels (bands) and occupations (%)	2020/2021	>= 1.8	3.0%
Patient-Centred Culture	Compensable Workplace Injury – Claims (% change)	July 2021 - June 2022	<= 290.0	326.0
	Staff Engagement and Experience - People Matter Survey - Racism experienced by staff - Variation from the previous year (%)	2020/2021	>= 5.0%	2.0%
	Staff Engagement - People Matter Survey Engagement Index - Variation from the previous year (%)	2020/2021	>=-1.0%	-4.0%
Effectiveness	Research Governance Application Authorisations –Site specific within 60 calendar days – Involving greater than low risk to participants (%)	January 2022 - March 2022	>= 75.0%	87.5%

*No local data available.

Future Safety and Quality Priorities for 2022-2023

District Performance on All Hospital Acquired Complications (HACs)

Towards Zero Suicide

3

2

Ensuring safe and timely access to care

Ensuring patients and carers have positive experience and outcomes that matter as measured by the service agreement targets for the adult admitted and emergency patient experience and engagement index.



Board attestation statement



This attestation statement is made by	Professor Donald MacLellan				
	Name of office holder/member of Governing Body				
Holding the position/office on the Governing Body	Central Coast Local Health District Board Chair				
	Title of officeholder/member of Governing Body				
For and on behalf of the governing body titled	Central Coast Local Health District Board				
	Governing body's title (the Governing Body)				
	Central Coast Local Health District				
	Health service organisation name (the Organisation)				
Safety and Quality Healt responsibilities of govern In particular I attest that	s fully complied with, and acquitted, any Actions in the National th Service (NSQHS) Standards, or parts thereof, relating to the ning bodies generally for Governance, Leadership and Culture. during the past 12 months the Governing Body: ship to develop a culture of safety and quality improvement within				
	d has satisfied itself that such a culture exists within the				
b. has provided leaders carers and consume	ship to ensure partnering by the Organisation with patients, rs				
	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 Or	ganisation's current clinical governance framework				
provided for and on t	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				
	ction taken as a result of analyses of clinical incidents occurring on's facilities and/or services				
	gularly reviewed reports relating to, and monitored the ess on, safety and quality performance in health care.				

- 2. The Governing Body has, ensured that the Organisation's safety and quality priorities address the specific health needs of Aboriginal and Torres Strait Islander people.
- 3. I have the full authority of the Governing Body to make this statement.
- 4. All other members of the Governing Body support the making of this attestation statement on its behalf.

I understand and acknowledge, for and on behalf of the Governing Body, that:

- submission of this attestation statement is a pre-requisite to accreditation of the Organisation using NSQHS Standards under the Scheme
- specific Actions in the NSQHS Standards concerning Governance, Leadership and -Culture will be further reviewed at any onsite accreditation visit/s.

Governing body's title (the Governing Body)		Doveld & Mac Jallon
Central Coast Local Health District	Signed	Norold g. Mac Jalla
Health service organisation name (the Organisation)	Position	Board Chair, Central Coast Loca
y has fully complied with, and acquitted, any Actions in the National Health Service (NSQHS) Standards, or parts thereof, relating to the overning bodies generally for Governance, Leadership and Culture.	Date	7 July 2022
that during the past 12 months the Governing Body: adership to develop a culture of safety and quality improvement within a, and has satisfied itself that such a culture exists within the	Counter signed by t	he Health Service Organisation's Chief Ex
dership to ensure partnering by the Organisation with patients, umers	Signed	Balla
and strategic directions for safe and high-quality clinical care, and se are communicated effectively to the Organisation's workforce and	Position	Chief Executive, Central Coast L
e Organisation's current clinical governance framework	Name	Scott McLachlan
t roles and responsibilities for safety and quality in health care on behalf of the Organisation, or within its facilities and/or services, ed for the Governing Body and workforce, including management	Date	13 July 2022
ne action taken as a result of analyses of clinical incidents occurring isation's facilities and/or services		
d regularly reviewed reports relating to, and monitored the rogress on safety and quality performance in health care		



al Health District

ecutive Officer (however titled)

Local Health District



Schedule of health service organisations covered by this attestation statement

Central Coast Local Health District	Address: PO Box 361 GOSFORD NSW
Gosford Hospital	
Wyong Hospital	
Woy Woy Hospital	
Long Jetty Healthcare Facility	
Wyong Mental Health Unit	
Gosford Mental Health Unit	
Central Coast - Community Mental Health	headspace Gosford
	Community Mental Health teams
Central Coast LHD -Dental/Oral Health	Gosford Dental Clinic - Gosford Hospital
	Woy Woy Dental Clinic - Woy Woy Hospital
	Wyong Dental Clinic - Wyong Hospital
Central Coast LHD - Community Health	Citigate Wyoming
	Erina Community Health Centre
	Gateway Community Health Services Gosford
	Kanwal Community Health Centre - Wyong Hospital
	Kincumber Community Health Centre
	Lake Haven Community Health Centre
	Long Jetty Community Health Centre
	Mangrove Mountain Community Health Centre
	Ngiyang Aboriginal Pregnancy, Child & Family Health Service
	Public Health Unit
	Toukley Community Health Centre
	Woy Woy Community Health Centre
	Wyong Central Community Health Centre

Page 3 of 3

OUľ Values

COLLABORATION

We work together to achieve our shared goal of providing the highest level of care

OPENNESS

We communicate in an open and honest way to build trust

RESPECT

We listen to the needs and choices of others to ensure everyone has a voice

EMPOWERMENT

We encourage participation in decision making to foster continual improvement

at the **CORE** of everything we do

Caring for the Coast

Safety and Quality Accourt