

Section 2: Our Health System

A snapshot

Our Health System

The Australian and NSW health systems have undergone significant reform in recent years.

SESLHD is taking the opportunities available with these reforms to address some of the challenges and opportunities we face now and into the future.

SESLHD is uniquely placed among NSW Local Health Districts in that it **hosts a high concentration of super-specialised services**, along with a **full complement of local hospital and community-based and population health programs and services**. However, our services make up only part of the system – we work in partnership with carers, General Practitioners, private health and hospital providers, Non-Government Organisations, and aged care and disability providers. Working effectively with these partners will help maximise experiences and outcomes for our patients.

There are emerging opportunities to **extend our collaboration with our teaching and research partners**. This sort of collaboration holds strategic value in that it advances the profile and contribution of our specialised services within their fields, and also fulfils our obligation as specialised providers to develop the next generation of clinicians.

Our District

National Health Reform

The vision for the future...

In 2008 the Australian government established the **National Health and Hospitals Reform Commission** to develop a long term health reform plan for the nation's health system. Its final report in 2009 outlined three major goals:

- 1. Tackling major access and equity issues that affect health outcomes for people now**
 - Refreshing our paradigm of universality.
 - Acting now to improve equity of access and outcomes (including universal dental coverage, timely access to public hospital care, crisis mental health services, closing the gap, better services for rural and regional areas).
 - National Access Targets.
- 2. Redesigning our health system so that it is better positioned to respond to emerging challenges**
 - Embedding prevention and early intervention.
 - Integrating health and aged care services (primary health care, community-based services, sub-acute).
 - Evolving Medicare (bringing together MBS and state-funded services, reviewing the scope of services).
- 3. Creating an agile and self-improving health system for long-term sustainability**
 - Strengthening consumer engagement and voice.

Further information:

<http://www.yourhealth.gov.au/internet/yourhealth/publishing.nsf/Content/nhra-justreleased>

National Accord

In August 2011, all Australian states and territories signed the **National Health Reform Agreement**, via the Council of Australian Governments process. The agreement:

- Increases the funding contribution of the Australian government to public hospital services to 45% by 2014 and 50% by 2017.
- Stipulates that public hospital services will be funded based on the number and type of services they deliver, priced at the efficient price of delivering those services.
- Mandates a new National Emergency Access Target of 90% of patients discharged from Emergency Departments within 4hrs (target to be achieved by 2015).
- Mandates a new National Elective Surgery Target of 100% of patients treated within clinically recommended times (to be achieved by 2015).
- Increases funding for sub-acute care.
- Mandates full Commonwealth responsibility for aged care in order to provide a more integrated system, with central points of entry into the system created to provide easier access.

Three important bodies have been established to support the effective implementation of the National Agreement:

- **Independent Hospitals Pricing Authority**
To establish a national activity-based funding system.
- **National Health Performance Authority**
To improve access to locally relevant information to improve accountability and transparency and promote quality improvement among healthcare workers.
- **Australian Commission on Safety and Quality in Health Care**
To lead and coordinate improvements in safety and quality in health care.

New Funding Model

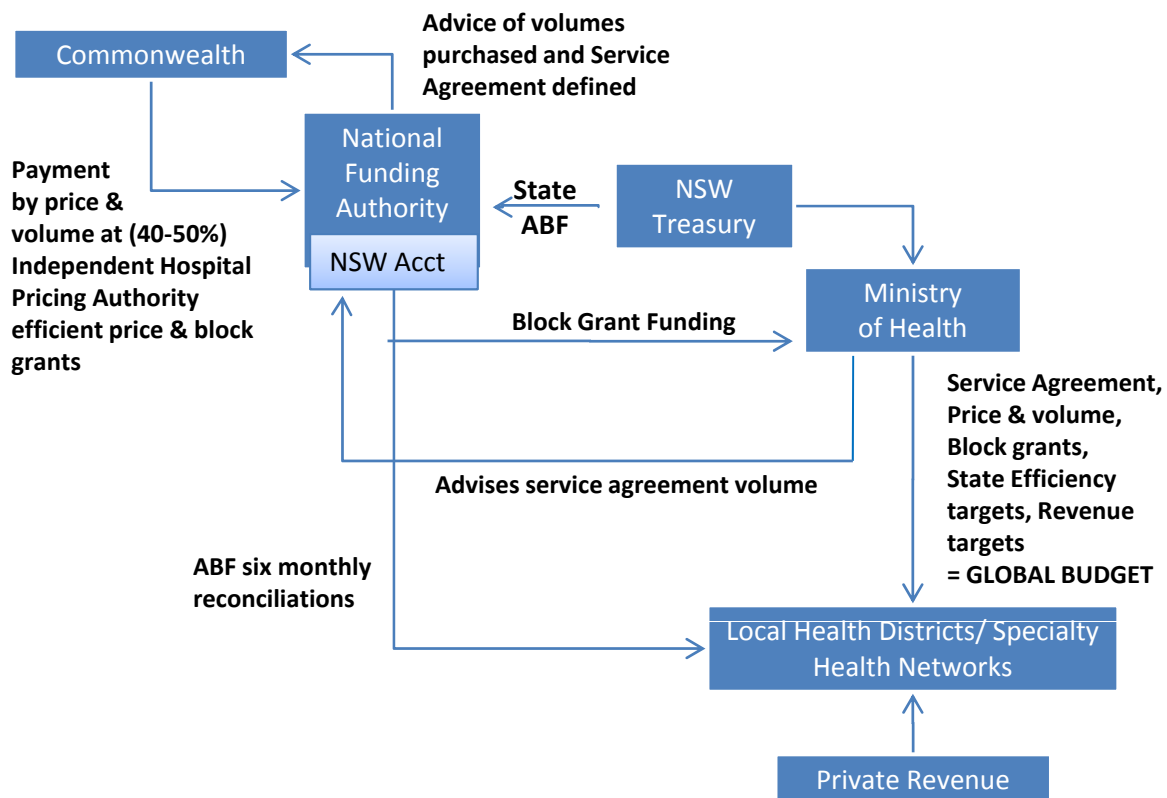
The new Commonwealth-State financing arrangements are a key platform of the National Health Reforms. Funding for public health services and growth of these services will continue to be a joint Commonwealth and State responsibility. A central feature of the new funding model is an 'efficient price' for hospital services which has been introduced as an incentive to drive the delivery of cost-effective care while ensuring quality and safety of care is not compromised.

The Commonwealth has also established a reward payment system to each state and territory for reaching performance targets.

Purchaser-Provider relationship

Under the Activity Based Funding (ABF) model, SESLHD will enter into a price-volume contract through an annual Service Agreement negotiated with the NSW Ministry of Health.

COAG Funding Model



Efficient use of resources

Data source: NSW Ministry of Health

Health Reform in NSW

The National Health Reform Agreement and a state political party change have driven reform in the NSW public health system.

Key Goals of the NSW Health System :

- Keeping people healthy and out of hospital
- Providing world class clinical services with timely access and effective infrastructure
- Returning quality services to Mental Health, Dental Health and Indigenous Health
- Managing health services well and promote local decision making.

Key changes for the newly formed Local Health Districts include:

1. Local Health Districts and Specialty Networks have key responsibility and accountability for health service delivery under a Service Agreement with the NSW Ministry of Health
2. Greater investment in workforce training
3. Greater transparency in health information
4. Maximising the potential of statewide services (Health Support, Health Infrastructure and NSW Health Pathology)
5. Information & Communication Technology statewide strategy and operations

This devolution of responsibility and accountability to LHDs is intended to promote:

- Flexibility and responsiveness
- Clinician engagement
- Evidence based policy and information
- Capable and adaptive workforce

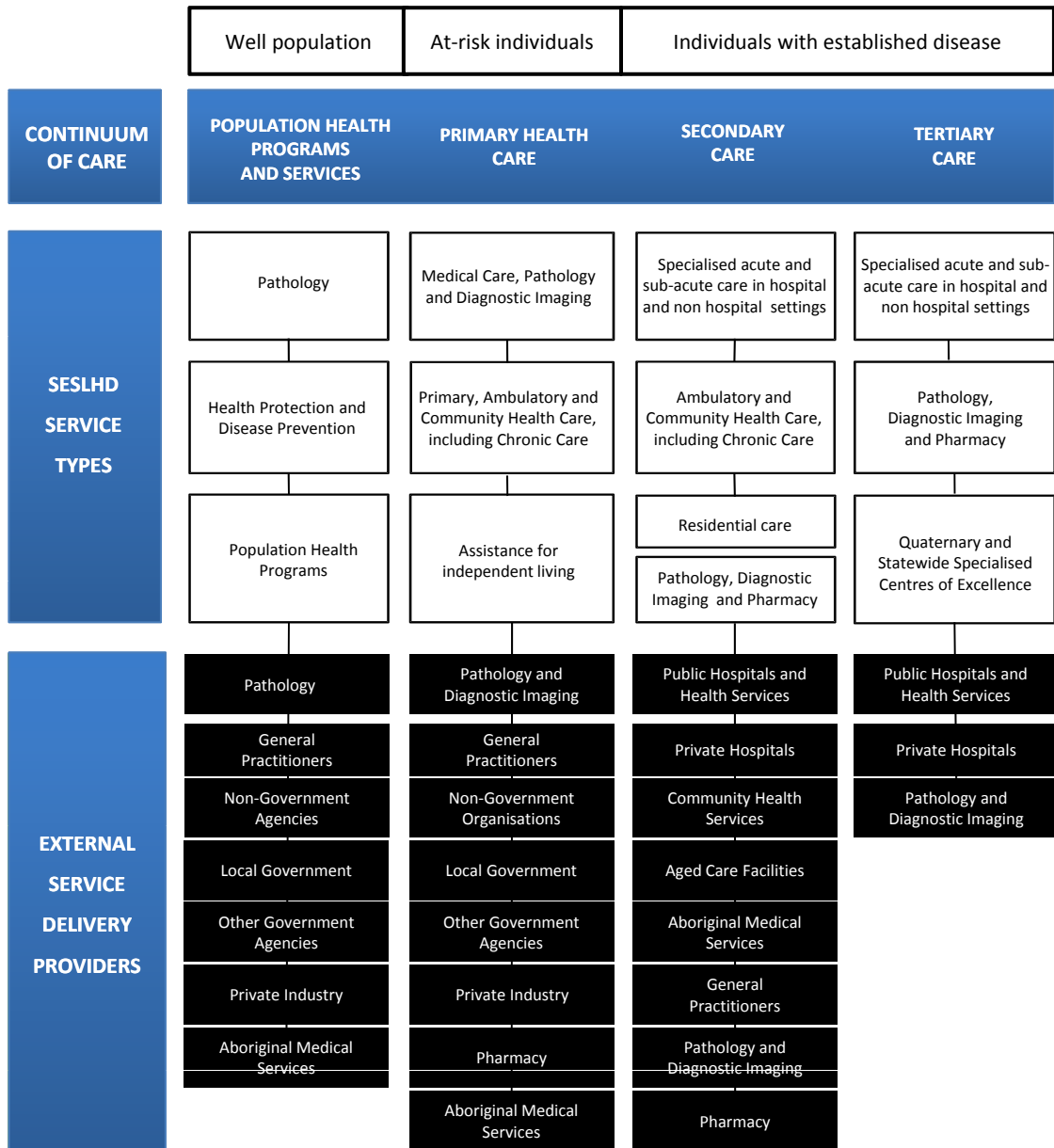
Localising and centralising services where necessary aims to help :

- Build local service linkages to meet the individual needs of patients
- Achieve the best outcomes for our patients and communities
- Establish a clear and shared vision to develop cooperative and respectful relationships between the component parts of NSW Health to lift performance together
- Foster a set of shared **C.O.R.E values** in everything we do: Collaboration, Openness, Respect, Empowerment.

Further information:
<http://www.health.nsw.gov.au/govreview/>

Our Health System

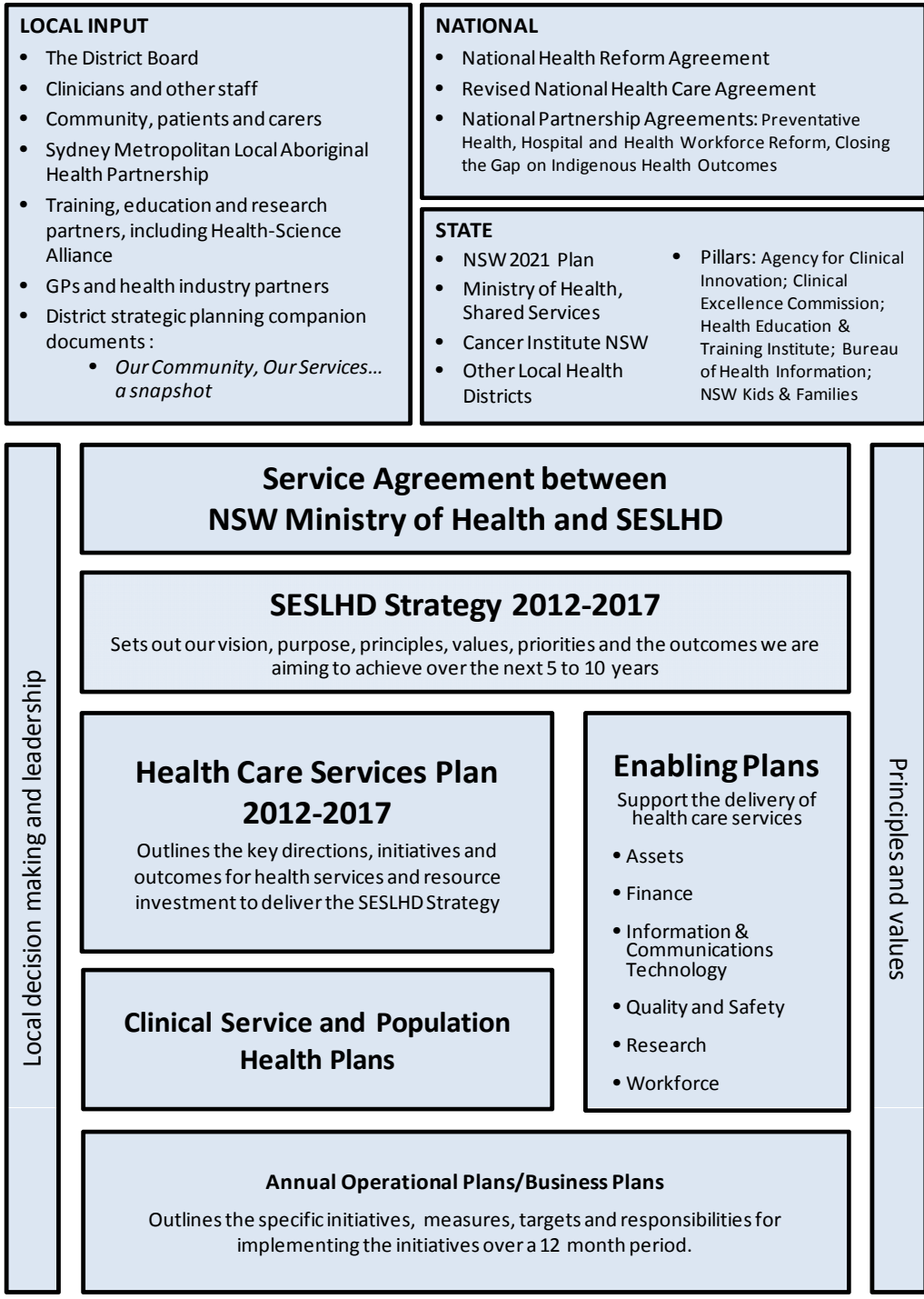
Our health system



Data source: Adapted from Victorian Health Priorities Framework 2012 - 2022

Our Planning Framework

Our health system



Our Hospitals and Health Services

The Local Health District manages five major teaching and referral hospitals.

The Local Health District also provides services to Norfolk Island and manages Gower Wilson Memorial Hospital which is located on Lord Howe Island.

In addition to the public hospitals, the Local Health District provides a comprehensive range of health care delivered through facilities located in more than 30 suburbs. Services to the community include community health, child and family health, mental health, oral health, HIV/Sexual health, Aboriginal health, Breast screen, disability, health promotion, public health, palliative care, drug and alcohol, carer support and women's health, youth health.

Public Hospitals managed by SESLHD

- Prince of Wales Hospital
- Sydney/Sydney Eye Hospital
- Royal Hospital for Women
- St George Hospital
- Sutherland Hospital

Third Schedule Facilities affiliated with SESLHD

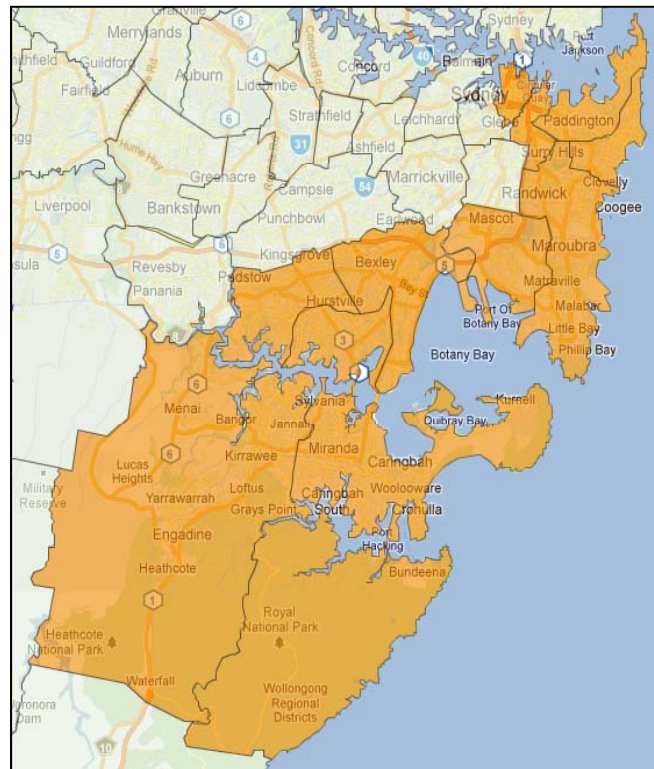
- Calvary Health Care Sydney
- War Memorial Hospital

Residential Aged Care managed by SESLHD

- Garrawarra Centre

Other Public Hospitals located in geographic area of SESLHD

- Sydney Children's Hospital
- St Vincent's Hospital
- Sacred Heart Hospice



A map of the geographic area of SESLHD by Statistical Local Area

Our health systems

SESLHD Services provided to other Districts and Services

The SESLHD provides the following services to other Districts, Services and locations, including:

SESLHD Service	Provided to:
Cardiothoracic Surgery	Illawarra Shoalhaven LHD
Radiology	Illawarra Shoalhaven LHD
Gynaecology Oncology	Illawarra Shoalhaven LHD; Australian Capital Territory
MotherSafe	NSW-wide
Electrophysiology	Southern NSW LHD
Clinical Support Services e.g. theatres, recovery, radiology and radiotherapy	Sydney Children's Specialty Network
Clinical Tertiary Services	Justice Health & Forensic Mental Health (JH&FMH) Network
Multiple Sclerosis Clinic	Illawarra Shoalhaven LHD
Disaster and Events Response	Airport, Darling Harbour, CBD
Rural Eye Service	Far Western LHD
Coordination and Delivery of Leadership Programs	NSW-wide
Health Education and Training Institute (HETI-funded medical positions with Specialist Clinical Training Network roles)	Southern NSW, Illawarra Shoalhaven, Northern NSW & Mid North Coast LHDs; St Vincent's and Mater Health Network JH&FMH Network
Emergency, hospital inpatient and outpatient clinic services. (Correctional Services General Acute Inpatients ward maintained at POWH)	JH&FMH Network
State Mental Health Telephone Access Line	St Vincent's and Mater Health Network; Southern NSW & Illawarra Shoalhaven LHDs
T2 clinics provided at Long Bay Infectious Diseases/ Immunology clinics; Sexual Health	JH&FMH Network
HIV and AIDS management; Aged Care Assessment Team and aged care services; Continuity of care for Chronic Disease patients	JH&FMH Network
Northern Sector Community Health Services provide services for geographic area near St Vincent's Hospital	St Vincent's and Mater Health Network

Our health system

Teaching and Research

South Eastern Sydney Local Health District hosts many highly specialised health services and embraces its teaching and research roles across numerous disciplines and in all of its facilities.

Our teaching and education partners

All of SESLHD's facilities have training programs for health professionals, including in the fields of Medicine, Nursing and Allied Health. The District's principal academic relationship is with the University of NSW (UNSW).

However, the District maintains relationships related to education with other training and service providers through its various services and staff, and provision of student placements. These include: Northern Sydney, Shoalhaven and Sydney Institutes of Technical and Further Education (TAFE NSW); Universities of Sydney, Wollongong, Technology, Western Sydney, Charles Sturt, Notre Dame, Tasmania, Griffith, Macquarie, Newcastle, Canberra, New England, as well as the Australian Catholic University and Australian National University; Ambulance Service of NSW; Australian College of Applied Psychology; and Family Planning NSW.

Our research partners

Research plays a vital role in maintaining and building upon the District's leadership role in the many specialised health fields it hosts. Numerous research alliances have been built across the District, including:

- Health Science Alliance
- St George and Sutherland Academic Health Centre
- St George and Sutherland Research Foundation
- Neurosciences Research Institute Australia
- Centre for Vascular Research
- Lowy Institute
- Women's Health Research Institute of Australia
- Randwick Medical Research Hub
- Black Dog Institute
- Nursing Education and Research Unit (POWH)
- Midwifery and Women's Health Nursing Research Unit
- Save the Sight Institute

The **Health Science Alliance** is the clinical and research hub created across the three hospitals of the Randwick campus (POWH, RHW and SCH) and the adjacent University of New South Wales (UNSW).

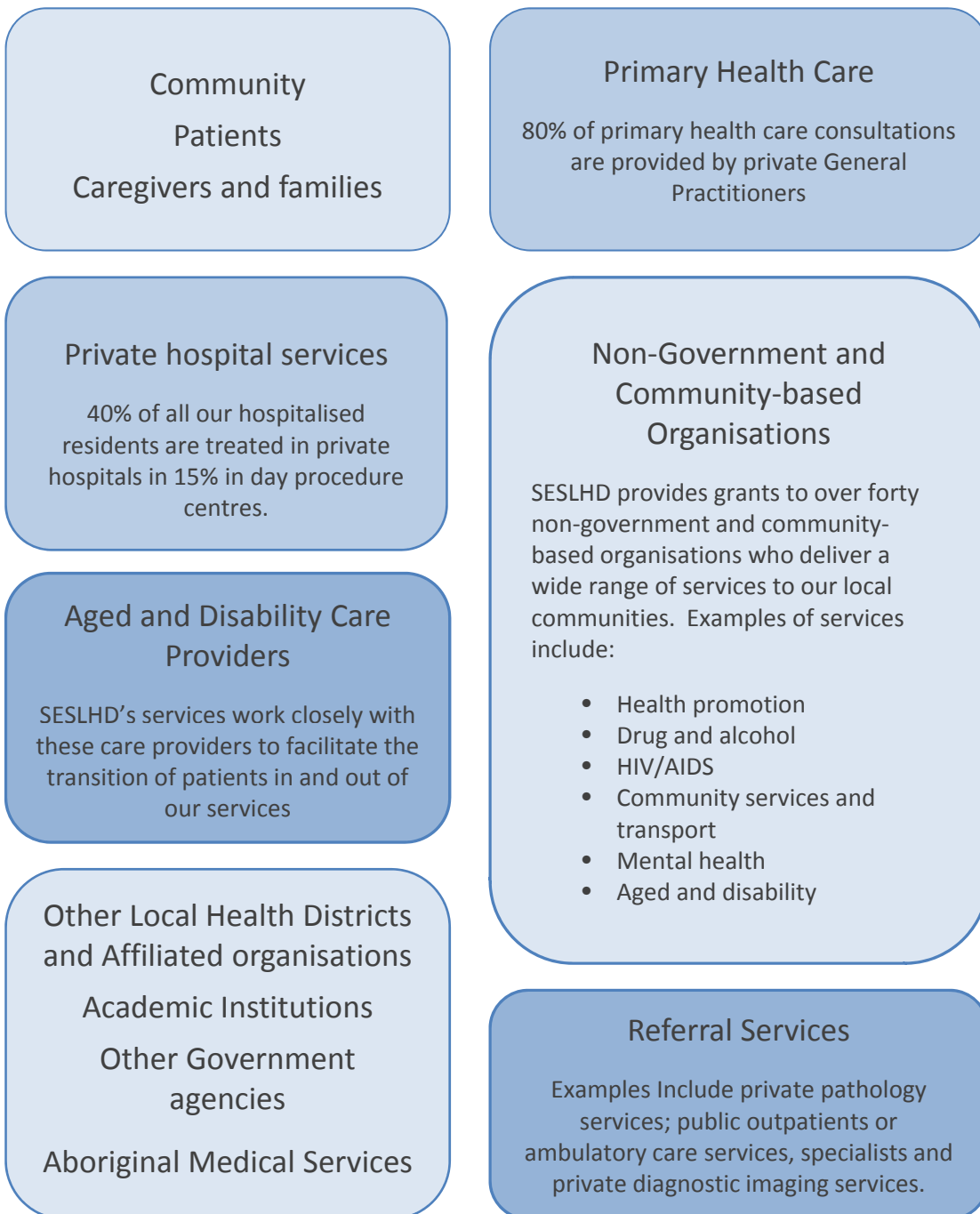
The UNSW hopes to develop the Health Science Alliance into a campus of the stature of Johns Hopkins Medical Center or the Harvard-affiliated Hospitals and Research Institute. The central idea of this Alliance is that the synergy created by their co-location will exceed the individual contributions of each research institute and clinical service located on the campus.

Similarly, the recently established **St George and Sutherland Academic Health Centre** aims to foster a culture where education and research are seen to be complementary activities to the delivery of health care. The Centre also aims to increase research productivity and the reputations and relationships of the parties; attract high quality researchers and clinical staff in all health disciplines; attract research funding; and enhance medical training in all health disciplines.

Our health system

Our Partners

SESLHD works in partnership with a broad range of care providers and other stakeholders to fulfil its obligation to maximise the health of its population. Our most important partners and their roles include the following:



Our Centres of Excellence

Prince of Wales Hospital and Health Services

- The Health Science Alliance
- Albion Centre (Albion Institute)
- Cancer and Blood Disorders Service
- Cardiac Services (Eastern Heart Clinic)
- Acute and Rehabilitation Spinal Services
- Institute of Neurosciences
- Gastroenterology
- Aged Care and Community Health Service
- Renal Medicine, including transplantation
- Outreach Engagement and Care to the Aboriginal community
- Urology
- Respiratory and Sleep

Sydney/Sydney Eye Hospital and Health Services

- Eye Care services
- Hand trauma services
- Kirketon Road Centre
- Sydney Sexual Health Centre

St George Hospital and Health Services

- Clinical and Academic medical and surgical oncology services, including: Prostate Cancer Institute, Brachytherapy treatment and theatre suite in PCI to extend to breast Brachytherapy service, and Peritonectomy service.
- Comprehensive renal services provided across St George and Sutherland Hospital campuses, incorporating the prize winning HOPE (Helping Older People with End stage kidney disease) renal palliative care program.
- Coordinated research and clinical program into bleeding and thrombosis.
- Engagement with clinicians and the local community, including integrated models of care in collaboration with Medicare Locals and allied health services ensuring a continuum of care.

- Foundation Centre for Detecting Deterioration, Evaluation, Treatment, Escalation and Communicating the Teams (DETECT) Program: primary site for development.
- Major Trauma Service, including acute and sub-acute/ rehabilitation care, regional trauma hotline, integrated senior clinical support, dedicated admitting trauma team and Trauma Case Management program.
- Major Cardiac and Cardiothoracic Regional Surgery with benchmarked clinical outcome excellence and regional Paramedic Assessment for Primary Angioplasty.
- Antibiotic Stewardship Program.

Sutherland Hospital and Health Services

- Sutherland Heart Clinic provides all Interventional Cardiac services in the Sutherland Shire, now with a 24 hours, 7 days per week emergency angioplasty service.
- Southcare (Division of Aged and Extended Care) fully integrated aged and rehabilitation service offering community and hospital care. Utilised by the NSW Ministry of Health as a model of Aged Care and Rehabilitation excellence.
- Gastroenterology provides complex endoscopic interventions, now including Endoscopic Ultrasound and Endoscopic Retrograde Cholangioancreatography.
- Respiratory Coordinated Care Program: specialised program designed to assist people with advanced Chronic Obstructive Pulmonary Disease to live optimally in their homes.
- Joint Replacement Unit: now performs all elective orthopaedic surgery for St George Hospital and Sutherland Hospital apart from some orthopaedic spinal work and some shoulder work.
- Bariatric (weight management) Program which offers multidisciplinary support and surgery to patients severely affected by morbid obesity.

Our District