



**Additional information from Peter Carter NSW.  
(EPISO monthly network meeting Topic 2 and Topic 3)**

**Northern New South Wales Local Health District (NNSWLHD), NSW Australia**

*Covid Response, Reflections and Insights*

*February 2021*

*The NNSW LHD is responsible to the NSW Ministry of Health to deliver health services across northern NSW through eight hospitals, four Multi Purpose Centres, one detoxification unit, twenty Community Health Centres and two Health One services.*

*The LHD offers numerous healthcare programs to a population of approximately 400,000 through 6,000 staff across a wide geographical area. It has a recurrent budget of AUD 1 billion.*

**“The rapid changes we have put in place (in response to Covid) provide insights into what we can accomplish when given a licence to do so. Our challenge now is to maintain this momentum, reimagine our future health service and embrace the opportunities and unexpected benefits the pandemic has brought about”**

**Wayne Jones, CE, NNSWLHD**

Post Covid the LHD will:

seek to build on our position as leaders in the prevention of disease and the protection and enhancement of health; and

embed rapid decision making and devolved corporate and clinical decision making.

### *Community Engagement*

Build on strengthened community relationships.

Engagement with communities will include planning and delivery of health services.

### *Workforce*

Strengthen our efforts to provide opportunities for our workforce to assist in areas of need (not necessarily in their particular field).

Capitalise on the benefits of enhanced two way communication and engagement with workforce.

Develop innovative ways of seeking input from our clinicians that are not seen by them as unproductive and time wasting.

Increase opportunities for enhancing and entrenching a positive workforce culture and continue wellbeing programs.

Introduce more flexible work practices to enable a more agile and adaptive workforce.

### *Infrastructure*

Greater flexibility in the allocation and use of infrastructure.

### *Virtual*

Evaluate and, where appropriate, expand virtual care.

Upskill workforce in evaluation and delivery of virtual care.

Focus on the use of virtual care to keep the community and the health services connected.

### *Out of Hospital Care*

Expand hospital avoidance programs, especially for vulnerable populations.

Expand Hospital in the Home and other hospital substitution programs.

Expand at home palliative care and support services underpinned by telemonitoring.

Increase mobile and outreach clinics for vulnerable populations, eg Indigenous communities, and expand chronic care programs in the community.

Peter Carter

February 2021

*Critical Intelligence Unit New South Wales Australia Ministry of Health*

NEJM Catalyst extract from Covid Response

November 2020

1. Establish rapid evidence support for key decision-makers - a unit that delivers responsive, timely and 'good enough' information to support clinical, managerial and policy decision-making

2. Engender reflective practice with transparent information for frontline clinicians - provision of granular information about clinicians' practice and patient outcomes

3. Institutionalize a considered, clinically-led approach to low and high value care -form a clinical intelligence group to deliberate on appropriateness of procedures and treatments and deliberate on value

4. Redefining place - commit to care at home, virtual care and hospital avoidance - leverage shifts in care delivery and technology to strengthen consultation, linkages, knowledge sharing within hospitals, across geographies and between patients, their families and clinicians.

5. Establish whole-of-system management program to deal with surges - provide reliable information about consumable supply chains, and the ability to

meet surges in demand; develop capacity for resilience and sustainability

6. Rebalance resources- across sectors and focusing on under-served and the vulnerable - make choices post-COVID that move care away from hospitals; and move resources towards those who could most benefit

7. Support patients to manage their health - strengthen remote monitoring and telehealth and support health literacy to build capacity and confidence of patients to know when and where to seek care.