# Statement of Service 2022-23

An agreement between the Secretary, NSW Health and NSW Health Pathology for the period 1 July 2022 - 30 June 2023





## NSW Health Statement of Service - 2022-23

### Principal purpose

The principal purpose of the Statement of Service is to set out the service and performance expectations for funding and other support provided to NSW Health Pathology (the Organisation), to ensure the provision of equitable, safe, high quality and human-centred healthcare services.

The agreement articulates direction, responsibility and accountability across the NSW Health system for the delivery of NSW Government and NSW Health priorities. Additionally, it specifies the service delivery and performance requirements expected of the Organisation that will be monitored in line with the NSW Health Performance Framework.

Through execution of the statement of service, the Secretary agrees to provide the funding and other support to the Organisation as outlined in this Statement of Service.

Parties to the agreement
The Organisation
Mr Peter Loxton Chair On behalf of the NSW Health Pathology Board
Date 21 July 2022 Signed Signed
Ms Tracey McCosker Chief Executive NSW Health Pathology
Date 20 July 2022 Signed Jacy Meroler
NSW Health
Ms Susan Pearce Secretary NSW Health
Date 22/7/20 Signed WWW

# Contents

1.	Leg	islation, governance and performance framework	3
	1.1	Legislation	3
	1.2	Ministerial Determination of Functions	3
	1.3	Variation of the statement	5
	1.4	Governance	5
2.	Str	ategic priorities	6
	2.1	Future Health: Strategic Framework	6
	2.2	NSW Premier's Priorities	7
	2.3	NSW Health Outcome and Business Plan	7
3.	Bud	dget	8
	3.1	State Outcome Budget Schedule: Part 1	8
	3.2	State Outcome Budget Schedule: Part 2	9
	3.3	State Outcome Budget Schedule: Capital program	10
	3.4	Outcome and performance payment schedule	11
4.	Per	formance against strategies and objectives	12
	4.1	Key performance indicators	12
	4.2	Performance deliverables	14

### 1. Legislation, governance and performance framework

#### 1.1 Legislation

The *Health Services Act 1997* (the Act) provides a legislative framework for the public health system, including the provision of health support services (s.126B).

NSW Health Pathology is an Administrative Division of the Health Administration Corporation, established on 31 May 2012, vested with certain of the Secretary's service provider functions under section 126B of the Act.

The Secretary established the NSW Health Pathology Board as an appointed body under section 126C of the Act in November 2012.

NSW Health Pathology ensures it meets the requirements of the regulatory framework for Medicare Australia under the *Health Insurances Act (1973)*. All NSW public pathology services are accredited to standards defined by the National Pathology Accreditation Advisory Council (NPAAC).

#### 1.2 Ministerial Determination of Functions

The Statement of Service recognises the functions established for NSW Health Pathology pursuant to Section 126B of the *Health Services Act 1997*, signed by the Secretary, NSW Health on 06 June 2019.

NSW Health Pathology is established to provide specialist pathology and forensic services, including clinically integrated diagnostic, disease monitoring and forensic and scientific analysis expertise.

NSW Health Pathology shall comprise of the following two Units:

- (i) NSW Health Pathology Operations
- (ii) NSW Forensic Analytical Science Service

The functions of NSW Health Pathology are to:

- 1. Operate on behalf of the Health Secretary as the preferred provider and commissioner of pathology, forensic and analytical science services for the NSW Health system, with the responsibility to:
  - A. Deliver better health and justice systems through an integrated whole of state model of service
  - B. Develop and implement rigorous clinical and corporate governance frameworks that provide sustainable, responsive, efficient, high quality pathology, forensic and analytical science services
  - C. Operate services with transparency and clear accountabilities, ensuring that organisational performance and financial management meet the requirements of the Health Secretary
  - D. Provide teaching and training and undertake research and development relevant to the provision of pathology, forensic and analytical science services
  - E. Build strong relationships with NSW Health agencies, the Department of Family and Community Services and Justice, NSW Police and other key stakeholders and contribute to the achievement of NSW Government priorities.
- 2. Undertake pathology, forensic and analytical science services for such other persons or entities outside the NSW Health system as approved by the Minister for Health under s126B(2) of the *Health Services Act 1997* (NSW).
- 3. Undertake other functions as the Health Secretary may request from time to time.

Functions of NSW Health Pathology Board as delegated under Section 126B(4) of the *Health Services Act* 1997:

- 1. To provide effective and ethical governance of NSW Health Pathology in relation to the provision of sustainable, responsive, efficient and high quality pathology, forensic and analytical science services.
- 2. To endorse the strategic direction and plan for NSW Health Pathology and make decisions regarding pathology, forensic and analytical science services that are for the collective benefit of the NSW health and justice systems, and approve and monitor compliance with the Strategic Plans of NSW Health Pathology.
- 3. To ensure effective and comprehensive corporate and clinical governance frameworks are established and approved by the Board to support the maintenance and improvement of standards and quality of services provided by NSW Health Pathology.
- 4. To provide strategic oversight of and monitor NSW Health Pathology's performance (clinical, operational and financial) in accordance with the objectives and measures set by the Health Secretary.
- 5. To ensure appropriate internal controls and robust systems are in place including:
  - a. Financial and other internal reporting mechanisms which provide adequate, accurate and timely information about the performance of NSW Health Pathology to the Board, the NSW Ministry of Health and the Health Secretary.
  - b. Risk management framework, including ongoing monitoring of the effectiveness of risk management systems for NSW Health Pathology.
  - c. Clinical governance and quality frameworks to monitor quality of care and service delivered across NSW Health Pathology.
  - d. Effective compliance frameworks and quality standards for accreditation of pathology laboratories and forensic facilities.
- 6. To ensure effective clinical and capital planning by NSW Health Pathology which also aligns with the NSW Health system's strategic goals.
- 7. To champion a strong values-driven culture with a focus on staff engagement within NSW Health Pathology.
- 8. To champion innovation to achieve best practice across NSW Health Pathology services.
- 9. To review and evaluate present and future opportunities, threats and risks in the external environment and identify appropriate responses to maximise the position of NSW Health Pathology and the NSW Health system.
- 10. To ensure that the needs of all stakeholders (internal and external) are appropriately considered, and to confer with the Chief Executive about how best to support, encourage and facilitate stakeholder and clinician involvement, in the planning of NSW Health Pathology services.
- 11. To establish and oversee the work of Board sub-committees and consider any recommendations of those sub-committees including endorse and oversee the implementation of annual audit plans via the Audit and Risk Management Committee.
- 12. To provide such advice to the Health Secretary on the provision and integration of pathology, forensic and analytical science services within the NSW health and justice systems as requested from time to time.

#### 1.3 Variation of the statement

The Statement may be amended at any time by agreement in writing between the Organisation and the NSW Ministry of Health.

The Statement may also be varied by the Secretary or the Minister in the exercise of their general powers under the Act, including determination of the role, functions and activities of support organisations.

Any updates to finance or activity information further to the original contents of the Agreement will be provided through separate documents that may be issued by the Ministry of Health in the course of the year.

#### 1.4 Governance

The Organisation must ensure that all applicable duties, obligations and accountabilities are understood and complied with, and that services are provided in a manner consistent with all NSW Health policies, procedures, plans, circulars, inter-agency agreements, Ministerial directives and other instruments and statutory obligations.

#### 1.4.1 Clinical governance

NSW public health services are accredited against the <u>National Safety and Quality Health Service Standards</u>.

The <u>Australian Safety and Quality Framework for Health Care</u> provides a set of guiding principles that can assist health services with their clinical governance obligations.

The NSW Health <u>Patient Safety and Clinical Quality Program (PD2005\_608)</u> provides an important framework for improvements to clinical quality.

### 1.4.2 Corporate governance

The Organisation must ensure services are delivered in a manner consistent with the <u>NSW Health and</u> Corporate Governance and Accountability Compendium.

#### 1.4.3 Procurement governance

The Organisation must ensure procurement of goods and services complies with <u>NSW Health Goods and Services Procurement Policy (PD2019 028)</u>.

#### 1.4.4 Aboriginal Procurement Policy

The NSW Government support employment opportunities for Aboriginal people, and the sustainable growth of Aboriginal businesses by driving demand via Government procurement of goods, services and construction. NSW Government agencies must apply the <u>Aboriginal Procurement Policy</u> to all relevant procurement activities.

#### 1.4.5 Performance Framework

Statements of Service are a central component of the <u>NSW Health Performance Framework</u> which documents how the Ministry of Health monitors and assesses the performance of public sector health services and support organisations to achieve expected service levels, financial performance, governance and other requirements.

## 2. Strategic priorities

The delivery of NSW Health strategies and priorities is the responsibility of the Ministry of Health, health services and support organisations. These are to be reflected in the strategic, operational and business plans of these entities.

### 2.1 Future Health: Strategic Framework

The Future Health Strategic Framework is the roadmap for the health system to achieve NSW Health's vision. It will guide the next decade of care in NSW 2022-32, while adapting to and addressing the demands and challenges facing our system. The framework is also a reflection of the aspirations of the community, our patients, workforce and partners in care for how they envisage our health system by 2031.

Strategic outcomes			Key objectives				
Patients and carers have positive			Partner with patients and communities to make decisions about their own care				
	experiences and outcomes that matter:	1.2	Bring kindness and compassion into the delivery of personalised and culturally safe care				
	People have more control over their own	1.3	Drive greater health literacy and access to information				
114	health, enabling them to make decisions about their care that will achieve the outcomes that matter most to them.		Partner with consumers in co-design and implementation of models of care				
	Safe care is delivered across all settings:	2.1	Deliver safe, high quality reliable care for patients in hospital and other settings				
$\sim$	Safe, high quality reliable care is delivered by	2.2	Deliver more services in the home, community and virtual settings				
	us and our partners in a sustainable and	2.3	Connect with partners to deliver integrated care services				
	personalised way, within our hospitals, in	2.4	Strengthen equitable outcomes and access for rural, regional and priority populations				
	communities, at home and virtually.	2.5	Align infrastructure and service planning around the future care needs				
	People are healthy and well: Investment is made in keeping people healthy	3.1	Prevent, prepare for, respond to and recover from pandemic and other threats to population health				
_	to prevent ill health and tackle health	3.2	Get the best start in life from conception through to age five				
	inequality in our communities.	3.3	Make progress towards zero suicides recognising the devastating impact on society				
(む)			Support healthy ageing ensuring people can live more years in full health and independently at home				
		3.5	Close the gap by prioritising care and programs for Aboriginal people				
		3.6	Support mental health and wellbeing for our whole community				
		3.7	Partner to address the social determinants of ill health in our communities				
	Our staff are engaged and well	4.1	Build positive work environments that bring out the best in everyone				
QQ	supported:	4.2	Strengthen diversity in our workforce and decision-making				
ĠÖÖ	Staff are supported to deliver safe, reliable	4.3	Empower staff to work to their full potential around the future care needs				
	person-centred care driving the best	4.4	Equip our people with the skills and capabilities to be an agile, responsive workforce				
	outcomes and experiences.	4.5	Attract and retain skilled people who put patients first				
		4.6	Unlock the ingenuity of our staff to build work practices for the future				
`	Research and innovation, and digital advances inform service delivery:	5.1	Advance and translate research and innovation with institutions, industry partners and patients				
(5003)	Clinical service delivery continues to	5.2	Ensure health data and information is high quality, integrated, accessible and utilised				
((())	transform through health and medical	5.3	Enable targeted evidence-based healthcare through precision medicine				
( <b>₩</b> )	research, digital technologies, and data analytics.	5.4	Accelerate digital investments in systems, infrastructure, security and intelligence				
	The health system is managed	6.1	Drive value based healthcare that prioritises outcomes and collaboration				
	sustainably:	6.2	Commit to an environmentally sustainable footprint for future healthcare				
(([lul/])) <u> </u>	The health system is managed with an	6.3	Adapt performance measurement and funding models to targeted outcomes				
CIZ	outcomes-focused lens to deliver a financially and environmentally sustainable future.		Align our governance and leaders to support the system and deliver the outcomes of Future Health				

#### 2.2 NSW Premier's Priorities

In June 2019, the NSW Premier set new social priorities to tackle tough community challenges, lift the quality of life for everyone in NSW and put people at the heart of everything the Government does.

NSW Health is leading three priorities for improving the health system:

#### Improving outpatient and community care

Reduce preventable hospital visits by 5% through to 2023 by caring for people in the community.

#### Improving service levels in hospitals

100% of all triage category 1, 95% of triage category 2, and 85% of triage category 3 patients commencing treatment on time by 2023

#### **Towards zero suicides**

Reduce the rate of suicide deaths in NSW by 20% by 2023.

NSW Health staff will continue to work together to deliver a sustainable health system that delivers outcomes that matter to patients and the community, is personalised, invests in wellness and is digitally enabled.

#### 2.3 NSW Health Outcome and Business Plan

The NSW Health Outcome and Business Plan is an agreement between the Minister for Health, the Secretary, NSW Health and the NSW Government setting out the outcomes and objectives that will be the focus for the current period.

NSW Health has identified five state outcomes that it will achieve for the people of NSW:

- 1. Keeping people healthy through prevention and health promotion
- 2. People can access care in out of hospital settings to manage their health and wellbeing
- 3. People receive timely emergency care
- 4. People receive high-quality, safe care in our hospitals
- 5. Our people and systems are continuously improving to deliver the best health outcomes and experiences

To achieve these outcomes, NSW Health has set a series of ambitious targets and has a comprehensive program of change initiatives in place. These targets have been built into key performance indicators in the Statement of Service, the NSW Health Performance Framework, the NSW Health Purchasing Framework and the funding model.

# 3. Budget

# 3.1 State Outcome Budget Schedule: Part 1

	NSW Health Pathology (NSWHP) - Budget 2022-23	3
		2022-23 Initial Budget (\$'000)
	Expenditure Budget by Account Group (General Fund)	
	Employee Related	\$464,550
	VMO Payments	\$32
	Goods & Services	\$194,765
	Repairs, Maintenance & Renewals	\$26,410
Α	Depreciation	\$24,885
	Grants	\$466
	Borrowing Costs	\$39
	Sub-total	\$711,147
	Other items not included above	
	Additional Escalation to be allocated	\$17,771
	Allocated Savings Programs	-\$1,834
В	TMF Adjustments	\$1,296
В	IntraHealth - eHealth 22/23 Adjustment	\$292
	Pathology 22/23 IntraHealth Adjustment	\$15
	Sub-total	\$17,540
С	RFA Expenses	\$17,519
D	Total Expenses (D=A+B+C)	\$746,206
E	Other - Gain/Loss on disposal of assets etc	\$602
F	Revenue	-\$732,423
G	Net Result (G=D+E+F)	\$14,385

### 3.2 State Outcome Budget Schedule: Part 2

		2022/23
	NSW Health Pathology	(\$'000)
	Government Grants	
А	Recurrent Subsidy	-\$38,831
В	Capital Subsidy	-\$3,168
С	Crown Acceptance (Super, LSL)	-\$17,494
D	Total Government Contribution (D=A+B+C)	-\$59,492
	Own Source revenue	
Е	GF Revenue	-\$649,020
F	Restricted Financial Asset Revenue	-\$23,911
G	Total Own Source Revenue (G=E+F)	-\$672,931
Н	Total Revenue (H=D+G)	-\$732,423
I	Total Expense Budget - General Funds	\$728,688
J	Restricted Financial Asset Expense Budget	\$17,519
K	Other Expense Budget	\$602
L	Total Expense Budget as per Schedule A Part 1 (L=I+J+K)	\$746,808
		\$
M	Net Result (M=H+L)	\$14,385
	Net Result Represented by:	
N	Asset Movements	-\$14,901
0	Liability Movements	\$516
Р	Entity Transfers	\$
Q	Total (Q=N+O+P)	-\$14,385

#### Note:

The minimum cash buffer for unrestricted cash is now zero. All payments-out from local bank accounts are now ceased, and payments are to be managed via the Shared Services accounts payable or payroll teams. All General Fund bank accounts will be swept to zero in line with the published schedule.

### 3.3 State Outcome Budget Schedule: Capital program

NSW Health Pathology										
							2022/23 Capital Budget Allocation by Source of Funds			
PROJECTS MANAGED BY HEALTH SERVICE 2022/23 Capital Projects	Project Code	Reporting Silo	Estimated Total Cost 2022/23	Estimated Expenditure to 30 June 2022	Cost to Complete at 30 June 2022	Capital Budget Allocation 2022/23	MOH Funded 2022/23	Local Funds 2022/23	Revenue 2022/23	Lease Liabilities 2022/23
			\$	\$	\$	\$	\$	\$	\$	\$
WORKS IN PROGRESS										
Asset Refurbishment / Replacement Strategy (State-wide)	P55345	ARRP	4,669,645	3,787,167	882,478	743,884	743,884	-	-	-
Automated DNA Analytical System FASS	P56923	LFI	3,809,566	1,897,103	1,912,463	1,912,463	-	1,912,463	-	-
Chemistry and Immunoassay Testing Solution	P56845	LFI	33,922,500	5,000,000	28,922,500	28,922,500	_	28,922,500	-	-
Cloud Based Genomics Infrastructure	P56623	LFI	1,200,000	838,016	361,984	361,984	_	361,984	-	-
Genomics E-Ordering	P56627	LFI	405,980	356,248	49,732	49,732	-	49,732	-	-
Macquarie Hospital new LIMS at FASS Drug Toxicology Unit	P56742	LFI	253,192	105,918	147,274	147,274	-	147,274	-	-
NSWHP Dubbo Laboratory Redevelopment at Dubbo Hospital	P56802	LFI	6,442,014	264,000	6,178,014	5,077,620	-	5,077,620	-	-
NSWHP Pathology Refurbishment at Coffs Harbour Base Hospital	P56803	LFI	4,200,000	130,168	4,069,832	4,069,832	-	4,069,832	-	-
Pathology Result App	P56475	LFI	1,300,000	1,144,214	155,786	155,786	-	155,786	-	-
State-Wide Billing	P56621	LFI	8,011,789	9,177,840	(1,166,051)	1,040,706	-	1,040,706	-	-
Statewide Rollout Program - Coagulation Equipment	P56555	LFI	2,013,155	1,998,155	15,000	15,000	-	15,000	-	-
State-wide specimen Tracking Program	P56624	LFI	1,576,079	1,990,897	(414,818)	60,000	-	60,000	-	-
State-wide Test Catalogue	P56625	LFI	1,030,956	919,407	111,549	111,548	-	111,548	-	-
Statewide Transfusion Testing Solution	P56744	LFI	7,391,373	3,975,596	3,415,777	3,049,179	-	3,049,179	-	-
Minor Works and Equipment>\$10k<\$250K	P51069	MWE	-	-	-	10,692,000	-	10,692,000	-	-
HIF2 - Geonomics Integrated and Automated ICT Workflows	P56835	Other	2,524,000	100,000	2,424,000	2,424,000	2,424,000	-	-	-
TOTAL WORKS IN PROGRESS			78,750,249	31,684,729	47,065,520	58,833,508	3,167,884	55,665,624		
TOTAL CAPITAL EXPENDITURE AUTHORISATION	ON LIMIT MA		78,750,249	31,684,729	47,065,520	58,833,508	3,167,884	55,665,624	-	-

#### Notes:

Expenditure needs to remain within the Capital Expenditure Authorisation Limits (CEAL) indicated above

### 3.4 Outcome and performance payment schedule

The schedule below lists indicative additional funding available to the Organisation for targeted strategic initiatives to deliver on key performance indicators and specified outcomes. This funding is not included in the *State Outcome Budget Schedule: Parts 1-3* and will be paid to the Organisation according to the outcome and performance metric described in this schedule.

FTE is the modelled full time equivalent staff required to deliver the targeted initiative.

Program	Strategic Outcome	\$ '000	FTE	Outcome and performance metric
Workforce - Building and sustaining the rural health workforce	4	3,793	-	Funding based on delivery of production of evidence of incentivised positions and improvement in key measures (monitored monthly):  Critical vacancy reduction Premium labour reduction Reduction in overtime
Workforce - COVID-19 Recovery and Workforce Resilience	4	-	49	Funding based on production of evidence of improvement in key measures (monitored monthly):  Excess leave  Reduction in excess leave  Reduction in overtime  Return premium labour to base year levels  Increase in labour costs above baseline levels  Evidence of recruitment to backfill leave

### 4. Performance against strategies and objectives

#### 4.1 Key performance indicators

The performance of the Organisation is assessed in terms of whether it is meeting key performance indicator targets for NSW Health Strategic Priorities.

Detailed specifications for the key performance indicators are provided in the Service Agreement Data Supplement. See: <a href="http://internal4.health.nsw.gov.au/hird/view\_data\_resource\_description.cfm?ItemID=47648">http://internal4.health.nsw.gov.au/hird/view\_data\_resource\_description.cfm?ItemID=47648</a>

**Outcome Indicators:** These key performance indicators are reported to NSW Treasury under the NSW Health Outcome and Business Plan.

#### 4 Our staff are engaged and well supported **Performance Thresholds** Not Under Measure **Target** Performing Performing **Performing** $\checkmark$ × Workplace Culture - People Matter Survey >-5 and Culture Index- Variation from previous survey ≥-1 ≤-5 ≥-1 <-1 Take action - People Matter Survey take action >-5 and ≤-5 as a result of the survey- Variation from ≥-1 ≥-1 <-1 previous survey (%) **Outcome 5 Indicator** Staff Engagement - People Matter Survey >-5 and ≤-5 ≥-1 ≥-1 Engagement Index - Variation from previous <-1 survey (%) ≥5% No change or >0 and <5% Staff Engagement and Experience – People ≥5% decrease decrease on increase from decrease on Matter Survey - Racism experienced by staff on previous previous previous previous Variation from previous survey (%) survey survey survey. survey Staff Performance Reviews - Within the last 12 ≥85 and <90 100 <85 ≥90 months (%) Recruitment: Average time taken from request No change to recruit to decision to approve/decline/defer >10 ≤10 from previous ≤10 recruitment (business days) year and >10 Aboriginal Workforce Participation - Aboriginal ≥1.8 Workforce as a proportion of total workforce at 3 <1.8 ≥3 and <3 all salary levels (bands) and occupations (%)

0

Increase

Compensable Workplace Injury Claims (% of

change over rolling 12 month period)

≥5%

decrease or

maintain at 0

≥0

and <5%

decrease

### 6 The health system is managed sustainably



		Performance Thresholds				
Measure	Target	Not Performing	Under Performing	Performing		
Expenditure Matched to Budget - General Fund - Variance (%)	On budget or favourable		>0 and ≤0.5% unfavourable			
Own Sourced Revenue Matched to Budget - General Fund - Variance (%)		>0.5% unfavourable		On budget or favourable		
Net Cost of Service (NCOS) Matched to Budget - General Fund - Variance (%)						
Annual Procurement Savings Target Achieved – (% of target achieved)	Individual – See Data Supplement	<90%	≥90% and <95%	≥95%		

### 4.2 Performance deliverables

Key deliverables will also be monitored, noting that process indicators and milestones are held in the detailed operational plans developed by the Organisation.

Deli	verable in 2022-23	Due by
1	Patients and carers have positive experiences and outcomes that matter	
1.1	Review and update policy, processes, data capture, referrals and other items across whole of service user lifecycle to be more LBTQIA+ inclusive (September 2022)     Deliver basic training across several sites to build capability and support LGBTQIA+ Strategy Implementation (June 2023)     Commence co-design of bespoke training and community information in partnership with ACON (June 2023)	June 2023
2 :	Safe care is delivered across all settings	
2.1	Commence Chemical Pathology Equipment replacement program  • Complete Phase 1 of the Chemical Pathology Equipment replacement program for West Rural and Regional  Commence implementation of state-wide Quality Management Information System (QMIS)	June 2023
	<ul> <li>Sign Contract with preferred supplier (July 2022)</li> <li>On board Implementation Resources (June 2022)</li> <li>Complete Design and Build Phase (March 2023)</li> <li>Complete testing of QMIS (June 2023)</li> <li>First go-live (June 2023)</li> </ul>	June 2023
3	People are healthy and well	
3.1	<ul> <li>Enhance Home Collections Service</li> <li>Finalise the criteria for the NSWHP Home Collections Service (September 2022)</li> <li>Pilot the use of scripts to support collection staff and coordinators to manage scheduling (December 2022)</li> <li>Complete design specifications for booking system (December 2022)</li> </ul>	January 2023
4	Our staff are engaged and well supported	
4.1	<ul> <li>Pilot enhanced Performance Development Tools &amp; Supports</li> <li>Discovery completed, framework and journey maps developed (July 2022)</li> <li>Performance development toolkit &amp; resources developed (October 2022)</li> <li>Pilot launched (January 2023)</li> <li>Pilot close and evaluation reports completed (July 2023)</li> </ul>	June 2023
4.2	<ul> <li>Develop NSWHP Disability Inclusion and Access Strategy</li> <li>Complete Access and Inclusion Index Assessment and review results (June 2022)</li> <li>Establish working group and draft strategy identifying key priority actions and success measures (October 2022)</li> <li>Partner with operational networks to implement the strategy and report on progress (April 2023)</li> </ul>	June 2023
4.3	<ul> <li>Implement Aboriginal Workforce retention and professional development initiatives</li> <li>Establish an Aboriginal and Torres Strait Islander employee network for NSWHP staff to create a safe channel for communication and engagement within NSWHP (July 2022)</li> <li>Facilitate a professional/personal development conference for Aboriginal &amp; Torres Strait Islander employees (September 2022)</li> <li>Host a managers' conference on the value of Indigenous Inclusion and contribution to service delivery and organisational performance (14/15 September 2022)</li> </ul>	December 2022

Deli	verable in 2022-23	Due by
5	Research and innovation, and digital advances inform service delivery	
5.1	Engage vendor and commence design of Statewide Laboratory information system (Fusion)  Complete Vendor assessment – Best and Final Offer (May 2022)  Nominate preferred supplier and commence contract finalisation (July 2022)  Complete Implementation Planning Study to finalise scope (October 2022)	June 2023
5.2	<ul> <li>Progress Design and Build Phase Commencement (November 2022)</li> <li>Commence Rollout of NSWHP Pathworks Mobile App</li> <li>Enhance PathWorks Mobile Application functionality (September 2022)</li> <li>Complete rollout to LHDs supported by Auslab (May 2023)</li> <li>Draft business case for further development and rollout (June 2023)</li> </ul>	June 2023
5.3	<ul> <li>Complete Haematology Digital Morphology Pilot</li> <li>Finalise and complete pilot (November 2022)</li> <li>Evaluate pilot outcomes (February 2023)</li> <li>Draft business case for Statewide application and implementation (March 2023)</li> </ul>	March 2023
6	The health system is managed sustainably	
6.1	Statewide non-coronial autopsy service  • Develop a new model of service to deliver a statewide non-coronial autopsy service (October 2022)	October 2022
6.2	<ul> <li>Launch Health Prototyping Centre (HPC)</li> <li>Soft launch Health Prototyping Centre (HPC) in collaboration with Health partners (July 2022)</li> </ul>	June 2023
6.3	<ul> <li>Learn by doing, through several rounds of prototyping (December 2022)</li> <li>Review efficacy of HPC, prototyping approach and steering committee (April 2023)</li> <li>Develop the master plan and the investment decision document (IDD) for the NSW</li> <li>Forensics Precinct (Lidcombe) in collaboration with the consortium (Police, FASS,</li> <li>Pathology and Universities)</li> <li>Submit IDD and masterplan to MoH and Treasury (September 2022)</li> <li>Respond to MoH and Treasury review of IDD and Masterplan (December 2022)</li> <li>Commence drafting business case in collaboration with consortium partners and HI (June 2023)</li> </ul>	June 2023
Sec	etary's flagship reforms	
	Data Governance Reform:	Sept 2022
	<ul> <li>Implement NSWHP Contract Management Service</li> <li>Deliver a range of education and awareness activities to increase understanding of and compliance with procurement policy</li> </ul>	Oct 2022 June 2023
NSV	V Premier's Priorities	
	Improving service levels in hospitals  100% of all triage category 1, 95% of triage category 2, and 85% of triage category 3 patients commencing treatment on time by 2023  • Provide LHDs with NSW Health Pathology Atlas of Variation Program patient arrival to Pathology order times analysis to help improve ETP. Engage with ACI Emergency Care Institute to inform and assist with programs such as EPIC that may benefit from Pathology order and time of order data	June 2023
Wo	kplace culture	
Outo	ome 3 The results of the People Matter Employee Survey will be used to identify areas of best practice and improvement opportunities.	30 June 2023