

# Value of clinical engagement in the NSW Health response to COVID-19

*Nigel Lyons*<sup>1</sup> BMed(Hons), MHA, Deputy Secretary of Health System Strategy and Planning

*Cathryn Cox*<sup>1</sup> PSM, Executive Director, Strategic Reform and Planning Branch

*Vanessa Clements*<sup>1,2</sup> MMed(Hons), Director, Specialty Services and Technology Evaluation

<sup>1</sup>NSW Health, Locked Mail Bag 2030, St Leonards, NSW 1590, Australia.

Email: Nigel.Lyons@health.nsw.gov.au; Cathryn.Cox@health.nsw.gov.au

<sup>2</sup>Corresponding author. Email: Vanessa.Clements@health.nsw.gov.au

**Abstract.** Clinical engagement has been critical to the NSW Health response to COVID-19, with clinicians across the state working together at a scale and pace not seen before. Since mid-March 2020, 30 COVID-19 Communities of Practice (COPs) have been established, bringing together over 3500 clinicians and other members across 30 different clinical specialties to inform and support a consistent statewide response to the pandemic. COPs share issues, escalate priorities and develop evidence-based guidance on a range of topics. This article provides practical insights into the value of clinical leadership and engagement in a time of crisis. It describes the role of COVID-19 COPs, what they have achieved and their importance in supporting the ongoing pandemic response in New South Wales.

Received 3 July 2020, accepted 2 October 2020, published online 23 October 2020

COVID-19 has challenged health systems worldwide to adapt at pace to a rapidly evolving situation. Healthcare leaders are reflecting on the health system response. Technology, clinical leadership and communication have all been highlighted as important enablers.<sup>1–3</sup> The need for compassionate leadership has been noted, ensuring the well-being and motivation of healthcare staff during a time of change and uncertainty.<sup>4</sup> In New South Wales (NSW), Australia, clinical leadership and engagement are central to health system transformation.<sup>5</sup> However, the breadth, scale and pace of engagement has increased in response to the pandemic. The NSW experience is a model for system-wide crisis management and provides practical strategies for clinical engagement.

The NSW Health operational response to COVID-19 is coordinated via the State Health Emergency Operations Centre (SHEOC), Public Health Emergency Operations Centre (PHEOC) and other operational arms of NSW Health. Early in the pandemic, NSW Health recognised the need to support the operational response with an expert clinical advisory group and convened a series of speciality-specific COVID-19 Communities of Practice (COPs). COPs are defined as ‘groups of people informally bound together by shared expertise and passion for a joint enterprise’.<sup>6</sup> COVID-19 is a shared motivator for action, needing engagement to address system-wide issues and specific needs of different clinical and service delivery areas.

The first COP met in mid-March to discuss COVID-19-related adult and paediatric intensive care priorities. Within 2 weeks, 30 COPs had been established.<sup>7</sup> COPs represent

services at the frontline of the COVID-19 response (e.g. infection prevention and control, primary and aged care) and those with associated roles (e.g. mental health and rehabilitation). Others focus on adapting ongoing health care during the pandemic (e.g. cardiac, cancer, surgery, maternity and newborn). COPs have built on existing formal and informal networks, with new networks created in specific areas of need (e.g. virtual care).

The COPs: (1) support clinicians to network and share COVID-19-related issues, strategies and local solutions; (2) identify, prioritise and escalate issues requiring a statewide or system response; (3) provide expert clinical review and advice on COVID-19-related guidance and resources; and (4) distribute approved advice and resources within all local health districts and speciality networks.

Each COP has a clinical lead and COP manager. Clinical leads also participate in the NSW COVID-19 Clinical Council, which escalates issues and provides expert advice to the Secretary NSW Health, SHEOC, PHEOC and other operational arms of NSW Health.

COPs are multidisciplinary and the >3500 members include representation from NSW Health’s 15 local health districts, three speciality networks and five pillar organisations. Members are primarily clinicians and service providers (public and private), but membership is open to anyone with a relevant interest. Some COPs include consumers and non-governmental organisations. This is a key difference from previous expert-led networks and allows a breadth of issues to be identified and resolved. Engagement within specific clinical and service

delivery areas is empowering clinicians to identify and address priorities directly related to their practice. Collaboration between COPs is encouraged where relevant. Interaction between the COPs and NSW Ministry of Health (the Ministry) supports quick decision making and alignment of clinical and operational responses.

COP activity is coordinated by the Ministry. Relevant pillar organisations and departments (e.g. Clinical Excellence Commission, Agency for Clinical Innovation, Cancer Institute NSW, NSW Health Pathology, NSW Therapeutic Advisory Group and Ministry branches) provide secretariat support and resources to address issues identified by the COPs.

To date, the COPs have raised over 1100 COVID-19-related issues for statewide review and action. Issues include access to and guidance on the use of personal protective equipment, workforce, the rollout of virtual care and the provision of infection control advice. The COPs support clinicians to address issues locally where possible. Approximately one-third of issues have highlighted a need for advice or clinical guidance. In response, over 80 guidance documents have been developed to inform COVID-19-related changes in clinical care or service delivery (see <https://www.health.nsw.gov.au/Infectious/covid-19/communities-of-practice/Pages/clinical-guidance-and-resources.aspx>, accessed 7 September 2020). These documents include new resources and COVID-19-specific updates to existing NSW Health guidance. In some instances, national and international resources have been endorsed for use following review for relevance for the NSW context.

Rapid and widespread dissemination of approved guidance has been essential. COP resources are published on a designated COVID-19 section of the NSW Health website and shared on the NSW Health COVID-19 MedApp (see <https://www.ciap.health.nsw.gov.au/specialty-guides/covid-19/resources.html>, accessed 10 September 2020). This app has been adapted to include real-time access to critical COVID-19 information at the point of care to over 12 000 frontline NSW Health staff. To date, over 100 000 pages of COVID-19 resources have been accessed. Resources are short and focused and include quick reference guides that can be accessed via the app, as well as resources, such as posters, that can be printed and used by services. A weekly newsletter highlights new resources and information, and a fortnightly webinar for COP managers provides a spotlight on key topics and allows lessons learned to be shared.

Clinician feedback via a COP member survey and NSW Health strategic planning consultation has highlighted the

confidence and reassurance that coordinated clinical engagement has brought to those working at the frontline of the crisis. Clinicians described the benefits of the COPs, including ‘confidence that the system can cope with the pandemic’ and a change from ‘panic and uncertainty...to more pragmatic, evidence based, rational management plans’ (NSW Health, unpubl. data). COVID-19 COP activity is poised to scale up and down as the pandemic evolves, and this structured clinical engagement process, born out of necessity in a time of crisis, will continue to drive innovation into the future.

### Competing interests

None declared.

### Acknowledgements

The authors acknowledge the ongoing contribution to the COVID-19 Communities of Practice of the COP members, clinical leads, the Agency for Clinical Innovation, Clinical Excellence Commission, Cancer Institute NSW, NSW Health Pathology and NSW Therapeutic Advisory Group.

### References

- 1 NEJM Catalyst. Lessons from CEOs: health care leaders nationwide respond to the COVID-19 crisis. *NEJM Catalyst*, 29 July 2020. Available at: [https://catalyst.nejm.org/doi/full/10.1056/CAT.20.0150?\\_ga=2.198731439.1249235981.1591156744-1313807786.1591156744](https://catalyst.nejm.org/doi/full/10.1056/CAT.20.0150?_ga=2.198731439.1249235981.1591156744-1313807786.1591156744) [verified 15 October 2020].
- 2 Mjåset C. On having a national strategy in a time of crisis: COVID-19 lessons from Norway. *NEJM Catalyst*, 6 May 2020. Available at: <https://catalyst.nejm.org/doi/full/10.1056/CAT.20.0120> [verified 12 June 2020].
- 3 Stoller JK. Reflections on leadership in the time of COVID-19. *BMJ Leader* 2020; 4: 77–79. doi:10.1136/leader-2020-000244
- 4 Bailey S, West M. COVID-19: why compassionate leadership matters in a crisis. The Kings Fund; 2020. Available at: <https://www.kingsfund.org.uk/blog/2020/03/covid-19-crisis-compassionate-leadership> [verified 12 June 2020].
- 5 Koff E, Lyons N. Implementing value-based health care at scale: the NSW experience. *Med J Aust* 2020; 212: 104–6.e1. doi:10.5694/mja2.50470
- 6 Wenger EC, Snyder WM. Communities of practice: the organizational frontier. *Harvard Business Review*, January–February 2000. Available at: <https://hbr.org/2000/01/communities-of-practice-the-organizational-frontier> [verified 12 August 2020].
- 7 NSW Health. COVID-19: communities of practice. 2020. Available at: <https://www.health.nsw.gov.au/Infectious/covid-19/communities-of-practice/Pages/default.aspx> [verified 12 June 2020].