# **3** Our performance

Metro South Health performed well against its targets and key performance indicators in 2013–2014.

## Performance highlights

In the 2013–2014 financial year:

- National Emergency Access Target (NEAT) performance—the percentage of emergency department patients discharged or admitted within four hours—increased from 67 per cent in 2012–2013 to 73 per cent in 2013–2014.
- National Elective Surgery Access Target (NEST) performance—the percentage of elective surgery patients who receive their treatment within the clinically recommended timeframe for their urgency category—improved across all three urgency categories:
  - Category 1: 8 per cent increase
  - Category 2: 15 per cent increase
  - Category 3: 22 per cent increase.

- Elective surgeries increased by 4.7 per cent in 2013– 2014 to 24,546; the second highest elective surgery performance in Queensland.
- Metro South Health provided 19,834 postnatal in-home visits to mothers in the region.
- Category 1 long waits for elective surgery have been reduced to zero—to achieve the zero long waits target set by the National Partnership Agreement on Improving Public Hospital Services.
- Oral health long waits were reduced from 6758 in June 2013 to zero in December 2013.
- Metro South Health exceeded its activity target, delivering 283,971 weighted activity units.
- Metro South Health achieved a financial surplus of \$25.79 million.

# Government's objectives for the community

In keeping with the Queensland Government's commitment to revitalise front-line services for the community, Metro South Health is committed to providing services that are efficient, diverse and flexible to changing community and government need.

The following are examples of how Metro South Health has contributed directly to the ethos of the government's statement of objectives in 2013–2014.

## Invest in better infrastructure and better planning

In 2013–2014, Metro South Health completed a number of infrastructure projects to better improve service delivery to the Metro South region.

The Logan Hospital expansion project continued to progress and will be completed in the latter half of 2014, providing state-of-the-art facilities to the growing Logan community. A redesign of Princess Alexandra Hospital's Transit Lounge is also underway to better streamline patient movement and to ensure beds are available for patients who need them most.

Metro South Health conducted planning activities to assess current and future health service demands and infrastructure needs. This included a major contribution to the South-West Growth Corridor Health Service Plan in conjunction with the West Moreton Hospital and Health Service to plan for the health care needs of the burgeoning population in the region between Logan, Brisbane's south and Ipswich.

Metro South Health has established several publicprivate partnerships in a contestability model to pursue efficiencies and improve health outcomes for the community.

#### **Revitalise front-line services**

Metro South Health is committed to delivering better access to emergency, specialist and maternal health care for Queenslanders. This is demonstrated through:

- ensuring statutory and standards obligations are realised including processes to monitor national targets such as the National Elective Surgery Target and the National Emergency Access Target
- implementing load-sharing strategies and continuing

to ban ambulance bypass as mechanisms to ensure care is available when and where it is required

- re-opening birthing and procedural services at Beaudesert Hospital
- delivery of the Mums and Bubs program which provides postnatal in-home visits to mothers in the region
- implementing a program to minimise avoidable emergency department presentations by patients from residential aged care facilities
- implementing reform of the health system in Metro South Health including detailed planning activities and a number of service improvement reviews.

#### Restore accountability in government

Metro South Health's *Consumer and Community Engagement Strategy* ensures that patients, consumers, and community members influence health service delivery in Metro South Health. Metro South Health has engaged the community on issues including: planning and redesign of services and facilites; evaluation and monitoring of services; development of new programs and projects; and matters affecting the quality and safety of the organisation. To ensure that our community has a voice Metro South Health has:

- established a Community of Interest to ensure two-way communication and information between Metro South Heath and the community
- conducted bi-monthly community workshops to build health literacy and understanding of the health system, and seek feedback from the community
- implemented an e-engagement program to reach all parts of the community including the socially and geographically isolated. This includes the Consultation Hub, Ideas Hub, Facebook, Twitter, Simply Health and the Metro South Health website.
- actively sought feedback from patients through annual patient satisfaction surveys. All Metro South Health Hospitals are now also using iPads to gather feedback while patients are still in hospital to ensure their concerns are addressed as soon as possible.
- involve patients, other consumers and community members on many internal committees. Currently, more than 20 consumer and community representatives are members of committees across Metro South Health
- established the Health Equity and Access Unit to ensure that people who are under-represented in the health system and who experience disadvantage have access to health services and have a voice in the planning and delivery of health services.

# Blueprint for better healthcare in Queensland

In 2013, the Queensland Government introduced its *Blueprint for better healthcare in Queensland*, an action plan for structural and cultural improvements to improve productivity, care, efficiency and access to services.

The Blueprint has four principal themes, which are:

- 1. Health services focused on patients and people
- 2. Empowering the community and our health workforce
- 3. Providing Queenslanders with value in health services
- 4. Investing, innovating and planning for the future.

Metro South Health is committed to helping the government deliver on the objectives outlined in the Blueprint. The following are examples of how Metro South Health has addressed these objectives.

## Health services focused on patients and people

- During 2013–2014, Metro South Health undertook a number of clinical service redesign processes to ensure they better meet the needs of the Metro South community.
- Some units and services underwent comprehensive reviews to examine opportunities for efficiencies and service improvements, including oral health services, radiology services, security services, operating theatres, and building and maintenance services.
- These reviews and redesigns were designed to assist Metro South Health to better streamline services and address the government's Public Sector Renewal Program and the Blueprint.
- Clinical redesign was undertaken for theatre utilisation at Logan and Redland Hospitals. The redesign lead to noticeable improvements in theatre scheduling, theatre practices, staffing models and service distribution.
- Princess Alexandra Hospital reviewed its Transit Lounge and identified the opportunity to improve the patient experience, as well as streamline the transition of patients for discharge out of ward beds, so that new patients can be allocated to a bed as soon as possible.
- Metro South Health's planning team routinely undertakes detailed analysis of each community's population and demographic profile to ensure any new services meet their needs.
- In response to community need, Metro South Health re-introduced birthing and procedural services at Beaudesert Hospital four months ahead of schedule.

## Empowering the community and our workforce

Metro South Health has a dedicated consumer and community engagement team whose role it is to ensure people have a voice in the planning, design, delivery and monitoring of health services and programs. In 2013-2014, the team continued to implement the *Consumer and Community Engagement Strategy 2012–2015*, which provides a framework to enable structured engagement to take place across the health service.

# Providing Queenslanders with value in health services

- Metro South Health has conducted comprehensive reviews of many units and services to examine opportunities for efficiencies.
- Metro South Health investigated options for partnerships with non-government and private organisations. For example, to improve service delivery to patients in our community Metro South Health partnered with Blue Care to deliver its Hospital in the Home program.

## Investing, innovating and planning for the future

- Metro South Health is committed to involving stakeholders in planning activities to ensure future health services have the capacity and capability to meet the changing needs of the community. This will ensure that value is achieved from every health dollar.
- Metro South Health has a strong record of collaboration in medical research and translation of research into improved outcomes for patients.
   Princess Alexandra Hospital is one of the primary partners of one of Australia's pinnacle research institutions, the Translational Research Institute.
- Metro South Health is investing in long-term service planning and infrastructure including the expansion of Logan Hospital and the building of stage 2 of the Southern Queensland Centre of Excellence for Aboriginal and Torres Strait Islander Primary Healthcare.

## Agency objectives and performance indicators

Metro South Health's Strategic Plan 2012-2016 (2013 revised version) describes how the health service will provide quality care for the community over the next four years, including our aspirations, strategies and measures of success. Metro South Health carefully monitors its achievements against these targets.

#### Strategic objectives

Metro South Health's strategic objectives are:

- 1. Stakeholders: Ensure the needs of our stakeholders influence all our efforts
- 2. Service delivery: Provide efficient, safe and timely health care service
- 3. Hospital avoidance and substitution: Increase hospital avoidance and substitution programs and services to reduce admissions to hospital
- 4. **People:** A sustainable, high quality workforce to meet future health needs
- 5. Image and reputation: Promote and market our world class health service-locally, nationally and internationally
- 6. Funding and resource management: Ensure the best use of allocated resources
- 7. Organisational excellence: Ensure that our governance and organisational structure are at the leading edge of industry norms
- 8. Teaching and research: Support education and research and their translation into improved health outcomes for patients
- 9. Technology: Optimise the use of technology

This section contains highlights of Metro South Health's achievements against its strategic objectives in 2013-2014.

Blueprint for better healthcare in Queensland themes

Metro South Health's strategic objectives 1 Stakeholders Ensure the needs of our stakeholders influence all our efforts focused on patients Health services **2** Service delivery and people Provide efficient, safe and timely health care services **3** Hospital avoidance and substitution Increase hospital avoidance and substitution programs and services to reduce admissions to hospital **4** People community and our Empowering the A sustainable, high quality workforce to meet future health workforce needs 5 Image and reputation Promote and market our world class health service – locally, nationally and internationally **Providing Queenslanders** 6 Funding and resource with value in health management Ensure the best use of services allocated resources 7 Organisational excellence Ensure that our governance and organisational structure are at the leading edge of industry norms nvesting, innovating and 8 Teaching and research planning for the future Support education and research and their translation into improved health outcomes for patients

Figure 3. How Metro South Health's strategic objectives align with

the Blueprint for Better Healthcare in Queensland themes

**9** Technology Optimise the use of technology

# Strategic objective 1 Stakeholders

## Ensure the needs of our stakeholders influence all our efforts

Metro South Health believes that healthcare should be organised around the needs of the community as best as possible. To achieve this, it is important that Metro South Health engages with its patients, carers, friends, stakeholders and the broader community.

The Metro South Health *Consumer and Community Engagement Strategy* provides a broad framework for engagement and outlines a number of key strategies required to establish the foundations of its engagement agenda. In 2013–2014, Metro South Health continued to roll out the strategy, establishing a strong foundation for engaging with the community and its patients. This allowed Metro South Health to advance a number of key initiatives which have improved, and will continue to improve, the way health care is delivered.

Consumer and community participation has allowed Metro South Health to design and implement initiatives and achieve significant improvements in 2013–2014.

#### Virtual Health Precinct

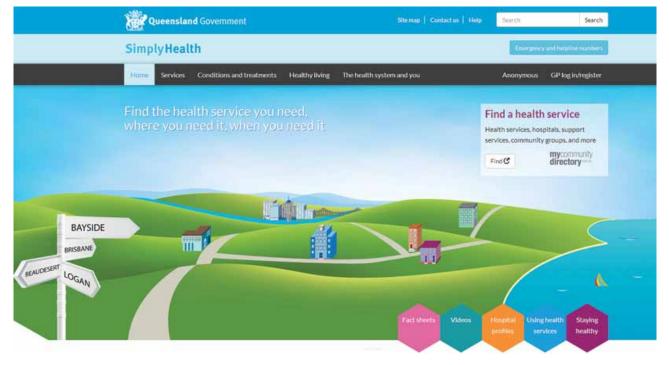
The Virtual Health Precinct project is one of Metro South Health's e-engagement solutions. The project will deliver Simply Health—an interactive online community where consumers, general practitioners and the community can find information to support their healthcare decisions and assist them to navigate the health system. As a result of the project it is expected that there will be:

- reduced pressure on public health services by providing information on all the care options available (public, private, non-government organisations) in one place
- improved access to health services through standardised care pathways
- improved relationships and communication by connecting general practitioners and specialists
- enhanced patient experience by ensuring the 'person' is at the centre of all decisions
- enhanced health literacy through the provision of quality information and education.

The project team works closely with:

- general practitioner advisors who review and contribute to care pathways
- a consumer working group to inform the design, functionality and content of the Simply Health site
- consumers, non-government organisations and general practitioners to inform content, design and functionality.

Simply Health will be launched in December 2014.



#### Figure 4. Progress on the Virtual Health Precinct website

#### **Patient satisfaction surveys**

Metro South Health engages Best Practice Australia (BPA) to implement patient satisfaction surveys on an annual basis. According to the last round of surveys, Metro South Health hospitals are exceeding national norms when it comes to patient care.

Patient satisfaction surveys serve as a barometer to ensure Metro South Health continues to deliver the quality of care patients expect and deserve.

Results are benchmarked against a group of 34 Australian public hospitals. In 2013, the average ratings for patient satisfaction measured against indicators of nursing care, clinical quality and safety, and hospital services were met or exceeded by all Metro South Health facilities.

## 2013–14 Highlight



The results of the latest BPA patient satisfaction survey (April 2014) showed

### 92 per cent of patients are satisfied with

#### the overall quality of care they received

during their most recent admission to a Metro South Health hospital.

Patient satisfaction survey highlights for each facility are:

#### Princess Alexandra Hospital

#### 93 per cent

of patients are satisfied with the overall quality of care received during most recent admission to Princess Alexandra Hospital.

#### 94 per cent

of patients feel our staff provide them with appropriate information about how to manage their condition after they are discharged from hospital. *BPA peer group average is 87 per cent.* 

#### 97 per cent

of patients agree that Princess Alexandra Hospital nursing staff provide a friendly, welcoming environment for patients and their visitors. *BPA peer group average is 92 per cent.* 

#### Queen Elizabeth II Jubilee Hospital

#### 91 per cent

of patients are satisfied with the overall quality of care received during most recent admission to QEII Hospital.

#### 95 per cent

of patients felt they received the medical treatment they expected at QEII Hospital. BPA peer group average is 91 per cent.

#### 93 per cent

of patients believe QEII Hospital nurses demonstrate honesty when caring for any issue of concern. *BPA peer group average is 91 per cent*.

#### Logan Hospital

#### 93 per cent

of patients believe Logan Hospital nurses understand their requirements/needs. BPA peer group average is 89 per cent.

#### 95 per cent

of patients are satisfied that Logan Hospital's nursing staff demonstrate competence and knowledge in their professional approach. BPA peer group average is 91 per cent.

#### **Redland Hospital**

#### 94 per cent

of patients are satisfied with the overall quality of their most recent admission at Redland Hospital.

#### 98 per cent

of patients are satisfied they received the medical treatment they had expected at Redland Hospital. *BPA peer group average is 91 per cent.* 

#### 95 per cent

of patients believe they received adequate information prior to being admitted to Redland Hospital. *BPA peer group average is 86 per cent*.

#### Wynnum Health Service

Patients who attended Wynnum Health Service expressed a high level of satisfaction that their expectations of the hospital and of the nursing staff were consistently met. They rated their satisfaction with the quality of their most recent admission at 100 per cent.

#### 100 per cent

of patients were satisfied with 24 out of 25 nursing care indicators at Wynnum Health Service.

#### **Beaudesert Hospital**

#### 92 per cent

of patients are satisfied with the quality of their most recent admission to Beaudesert Hospital.

#### 97 per cent

of patients believe the nurses at Beaudesert Hospital meet their most important expectations (expectations of care, attention, friendliness, and information).

#### 96 per cent

of patients believe Beaudesert Hospital meets their expectations (expectations of efficiency, information and helpfulness).

#### National Safety and Quality Health Service Standards

Metro South Health is working with consumers to ensure all patient information brochures are reviewed prior to publication.

More than 20 consumers are represented on committees across Metro South Health and are involved in the analysis of safety and quality data, and the development of action plans for health service improvement.

All facilities have governance structures that allow consumer engagement activities to be reported to the Board.

Metro South Health, collectively with consumers and the community, are ensuring Metro South Health meets and exceeds the National Safety and Quality Health Service Standards, with a particular emphasis on Standard 2: Partnering with Consumers.

#### **Collaboration with Medicare Local**

Building collaborative partnerships is key to delivering services that are accountable and responsive to the needs of the local community. Together, Metro South Health, the Greater Metro South Brisbane Medicare Local and West Moreton Oxley Medicare Local play an essential role in the planning, delivery and management of health services in the Metro South region.

To ensure planning and health service delivery is coordinated, Metro South Health formed 'working together agreements' (or partnership protocols) with both organisations. The agreements recognise the strategic linkages between Medicare Locals and Metro South Health, and a shared drive to improve the health system and to achieve better health outcomes for the community.

Key initiatives that Metro South Health has collaborated with the Medicare Locals on include:

- consumer and community engagement
- primary/secondary care integration
- chronic disease management.

Metro South Health and the Medicare Locals have actively engaged the community at a number of forums in Beenleigh, Beaudesert and Eight Mile Plains to seek community feedback on a number of issues. The feedback has been used to inform the Greater Metro South Brisbane Medicare Local needs assessment.

#### **GPLO Program**

In 2013–2014, the General Practice Liason Officer (GPLO) Program commenced to strengthen the partnership between primary, community and secondary care providers to improve health outcomes for the community.

The GPLO Program is focussed on:

- streamlining referral processes and forms for all specialties
- improving patient access by assessing patient's needs and providing information regarding alternate and more appropriate care options, where appropriate
- identifying and addressing service gaps between primary and specialist outpatient care
- improving equity of access to services for patients
- improving clinical handover following discharge
- promoting and providing up-to-date tools and resources.

The GPLO program has been integral in engaging general practitioners with respect to diabetes redesign and providing better access to endoscopy services for patients.

#### Integrated chronic disease clinics

Metro South Health's chronic disease service is working with general practitioners to improve access to specialty services in the community. General practitioners work alongside consultants in shared care beacon-style clinics located at Annerley, Inala and Meadowbrook. This also provides an opportunity for general practitioners and other primary care staff to develop their skills in managing people with complex, chronic diabetes and kidney disease.

#### **Government relations**

Metro South Health recognises the importance of working in partnership with government agencies at the local, state and federal levels and with elected representatives.

A key focus for 2013–2014 has been developing relationships with elected representatives by:

- disseminating information on key Metro South Health initiatives, including service developments and opportunities for community engagement
- providing timely responses to health-related matters concerning the community
- seeking input regarding issues impacting local communities.

Metro South Health will continue to work in partnership with other government agencies to ensure an integrated response to matters impacting our communities.

#### **Online engagement**

Parts of the Metro South community are geographically and socially isolated, which can make reaching them with information and engaging with them more challenging. Further, the number of people interacting online continues to increase.

In recognition of its growing importance, Metro South Health has expanded its online engagement platform to include:

- Facebook: It provides an ideal medium to receive feedback from the community, promote achievements and clarify information the community may receive through other forums
- Ideas Hub: The Ideas Hub is an extension of the Consultation Hub and provides community members with the opportunity to post an idea regarding a particular issue, and to rate or respond to an existing comment posted by someone else.
- iPads: iPads are being used to gain real-time feedback from patients while they are still in hospital. This feedback provides the opportunity to ensure the patients needs and concerns are addressed as soon as they arise.

#### **Consumer representatives**

Each Metro South Health facility has established either a Consumer Advisory Council or consumer reference groups. These groups plays an important role in decision-making at the service level. Functions include:

- receive and provide comment and advice on operational plans prior to finalisation
- participate in building design
- participate in health service design and redesign
- develop and monitor a action plans
- review projects and research proposals relating to patient experience
- analyse safety and quality data and patient satisfaction survey data.

In addition, each facility has a number of other committees which include consumer membership.

#### **Health Equity and Access Unit**

The Health Equity and Access Unit was established in 2013 to ensure the entire Metro South Health community is able to access the health services they need. The unit has a specific focus on individuals and groups who experience disadvantage and may be vulnerable to poorer health and wellbeing. The unit has been working with a range of population groups such as people with a disability to ensure better access to services. Other population groups include people from non-English speaking backgrounds, Aboriginal and Torres Strait Islander people and the homeless.

#### **Community of Interest**

The Metro South Health Community of Interest is a network of patients and community members who have expressed an interest in either receiving regular information directly from Metro South Health, or who choose to participate as formal consumer representatives. Its members support Metro South Health by providing consumer representation on committees, and participation in projects, focus groups and events. The network has also been invaluable in providing input into a number of key service plans.

Membership of the Community of Interest is currently more than 400 consumer and community members, and Metro South Health hopes to grow this network further over the next year.

#### **Bi-monthly workshops**

Metro South Health's Engagement Team offers bi-monthly workshops to improve health literacy and promote individual empowerment amongst consumers. Interactive guest speakers and participant-requested topics enable participants to learn more about Metro South Health and how to get the most out of health services. The workshops are also used to seek feedback from consumers about a range of issues.

In 2013–2014, five workshops were held with a total of 140 participants. The workshop topics were:

- Health Systems and Services
- Safety and Quality Systems in Health Care
- The Patient Journey
- Engagement in a Healthcare Setting
- Supportive Networks for Chronic Disease.

#### **Consultation Hub**

Metro South Health's Consultation Hub provides an online platform for consumers and community members to provide feedback on a range of topics. It has been invaluable in reaching both the socially and geographically isolated and provides an avenue for Metro South Health to reach a broader range of people to gather feedback regarding a number of key initiatives.

In 2013–2014, Metro South Health has conducted the following community consultations:

- Medicine and Chronic Disease Services—Inpatient service plan
- Healthy lifestyle facebook page survey
- Consumer Liaison Service—Compliments, suggestions and complaints brochure
- Barriers to accessing community rehabilitation
- Addiction and Mental Health Services—draft Strategic
   Plan and Clinical Service Plans
- Wynnum Health and Community Precinct survey
- 'How should we support the Community of Interest?' survey
- Surgical Services health service plan
- Aged Care and Rehabilitation health service plan.

#### Volunteers

Volunteers form a crucial part of the Metro South Health community and are highly valued by the health service. Their roles fall broadly into three categories:

- support to visitors and public
- support to patients and families
- support behind the scenes.

In addition to volunteers, Metro South Health also has a number of consumer advocates who work with consumers and staff in a supportive and educative role. Consumer advocates are vital to helping staff understand the consumer perspective.

## Strategic objective 2 Service delivery

# Provide efficient, safe and timely health care services

#### National Safety and Quality Health Service (NSQHS) Standards Compliance

Metro South Health's first priorities are the safe and comfortable care for patients and the continuous improvement of clinical outcomes. In order to ensure the highest standard of safety and quality, individual facilities are subject to an external peer assessment of their performance against the newly established National Safety and Quality Health Service (NSQHS) standards.

Princess Alexandra Hospital was assessed for accreditation against the 'EQuIP National' framework, which covers the ten NSQHS standards and five additional standards. The hospital achieved full accreditation, meeting each of the NSQHS standards with no recommendations. Further, 45 per cent of the standards received a rating of 'Met with Merit' from the surveyors, which is the highest possible score and demonstrates a culture of safety, evaluation and improvement.

All other Metro South Health facilities are currently accredited, and will be reassessed against the new NSQHS standards in the coming financial year according to their assessment cycle.

### 2013–14 Highlights



In 2013-2014:

260,869

people presented to our emergency departments

24,546

elective surgery procedures were peformed

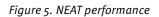
#### **Emergency departments**

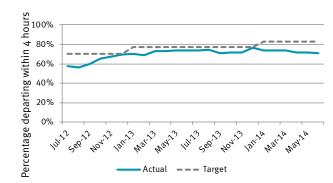
The National Emergency Access Target (NEAT), as set in the *National Partnership Agreement on Improving Public Hospital Services*, aims to improve access and shorter stays in emergency departments throughout Australia. By December 2015, the NEAT measure aims to achieve 90 per cent of patients presenting to a public hospital emergency department to be admitted to hospital, referred to another hospital for treatment, or discharged, within four hours.

Metro South Health has been working towards achieving this measure with an improvement in performance from 67 per cent in 2012–2013, to 73 per cent in 2013–2014.

Two of Metro South Health's four hospitals met the annual state target for NEAT in the 2013 calendar year. All of Metro South Health's hospitals were ranked in the top 35 per cent of their peer group across Australia, according to the recent National Health Performance Authority's report on time patients spent in emergency departments in 2012 and 2013. Queen Elizabeth II Jubilee Hospital was ranked second in its peer group out of 20 other large metropolitan hospitals.

	NEAT %	
Hospital	2013–14	Australian Ranking for Peer Group
Princess Alexandra	68%	18/52
Logan	69%	9/52
QEII Jubilee	81%	2/20
Redland	77%	7/20
HHS Total	73%	





#### **Elective surgery**

The National Elective Surgery Target (NEST), as set in the *National Partnership Agreement on Improving Public Hospital Services*, measures the percentage of elective surgery patients who receive their treatment within the clinically recommended timeframe for their urgency category.

Metro South Health performed 24,546 elective surgeries in 2013–2014. This is a 4.7 per cent increase on the previous year, with 54 per cent of 2013–2014 activity contributed solely by Princess Alexandra Hospital. Metro South Health has the second highest elective surgery performance for the state of Queensland, and Princess Alexandra Hospital is one of the largest in Australia.

In addition to increased performance in NEST and elective surgery volume, Metro South Health has significantly reduced its elective surgery waiting list, especially for Category 1 long waits (those waiting longer than the clinically recommended 30 days). Category 1 long waits for elective surgery reduced from 54 patients in June 2013 to zero, achieving the target set in the *National Partnership Agreement on Improving Public Hospital Services*.

## 2013–14 Highlights



Metro South Health made vast improvements in treating patients within the clinically recommended timeframe in 2013–2014. The percentage of elective surgery patients who received treatment within the clinically recommended timeframe improved across all three urgency categories from June 2013 to June 2014:

- Category 1 (within 30 days): increased from 89.4 per cent to 97.7 per cent
- Category 2 (within 90 days): increased from 66.2 per cent to 81.3 per cent
- Category 3 (within 365 days): increased from 64.5 per cent to 86.3 per cent.



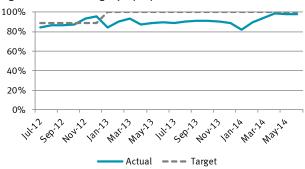


Figure 7. NEST Category 2 performance

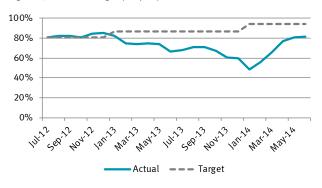
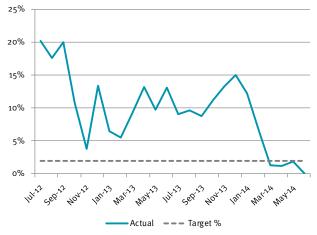


Figure 8. NEST Category 3 performance



*Figure 9. Elective surgery long waits performance by percentage* 



#### Outpatients waiting in time

Metro South Health is committed to improving community access to specialist hospital services. In 2013–2014, Metro South Health reduced the number of patients waiting longer than clinically recommended for an outpatient appointment (Waiting in Time). Logan Hospital had the most improvement; the number of Category 1 patients waiting in time increased from 8.5 per cent for the month of June 2013 to 46.5 per cent in June 2014.

	Outpatient Waiting in Time 2013–2014			
Hospital	Cat 1 %	Cat 2 %	Cat 3 %	
Princess Alexandra	32%	25%	59%	
Logan	49%	27%	38%	
QEII Jubilee	68%	42%	56%	
Redland	60%	39%	52%	
Beaudesert	58%	58%	51%	
HHS Total	38%	29%	51%	

Note: Princess Alexandra Hospital is reported separately and manually, and includes medical, nursing and allied health (excluding radiology and tuberculosis) outpatient waiting lists.

#### Factors affecting performance

- Metro South Health's population continues to increase—faster than most other HHSs.
- Life expectancy continues to increase, resulting in an ageing population.
- Death rates are declining for many of the major causes.
- People are dying at older ages due to early detection and successful treatment of disease.
- Hospitalisation rates (per head of population) are increasing for many of the major causes, resulting in a large increase in the number of hospitalisations per year.

This means that the burden on the hospital system is growing faster than the population is increasing, and faster than it is ageing.

#### Safety and quality

Metro South Health is dedicated to working towards reducing hospital acquired infection rates. The acceptable rate for healthcare-associated Staphylococcus aureus bacteraemia infections is no more than 2.0 per 10,000 occupied bed days. Metro South Health performed well below this rate at 0.83 for 2013–2014; this is an improvement on last year's performance, which was 1.0 per 10,000 bed days. Metro South Health hospital mortality rates for acute myocardial infarction, stroke, fractured neck of femur and pneumonia are all within controlled limits and all Metro South Health facilities have met the target for hand hygiene compliance.

#### Clinical streams and health service planning

Metro South Health has established eight clinical streams with the aim of improving integration of services across the region through innovation and clinical redesign. Each clinical stream is supported by a stream leader, who is a senior clinician with responsibility for providing leadership and planning in their specialty areas across all facilities.

A significant achievement for the clinical streams in 2013–2014 was the development and implementation of an outpatient reform strategy, focusing on the interface between primary care and specialist outpatient care across all specialties within the health service. Key outcomes of this strategy that have already been delivered include the establishment of a Central Referral Hub to provide a centralised referral pathway and more efficient waiting list management, and the introduction of a GP liaison program to improve communication between the hospitals and primary care providers.

A number of clinical streams and specialties developed health service plans in 2013–2014. Health service plans are key directional plans to support and enable the health service's strategic plan through specific service directions. They are essential to ensure Metro South Health continues to provide quality and cost-effective health care services to its vast population by effectively utilising its allocated resources and workforce.

Metro South Health has a health service planning team that undertakes demographic and epidemiological analysis and works with clinical streams to develop health service plans.

In 2013–2014, Metro South Health completed the following major health service plans:

- Medicine and Chronic Disease Inpatient Services health service plan
- Oral Health service plan
- Queensland Tissue Bank health service plan
- Clean sheet redesign for community-based aged care and rehabilitation services.

In 2014–2015, health service planning will be undertaken for:

- Cancer services
- Emergency services
- Hospital avoidance and substitution
- Women's and children's services.

Metro South Health was also a major contributor to the South-West Growth Corridor Health Service Plan in conjunction with the West Moreton Hospital and Health Service. This plan aimed to better understand the health care needs of the burgeoning population in the region between Logan, Brisbane's south and Ipswich, a population that is projected to grow from 768,540 people in 2011 to 1,160,682 people by 2026. In 2013–2014, the health service planning team in conjunction with the clinical streams sought support for the implementation of this plan.

#### Beaudesert birthing and procedural services

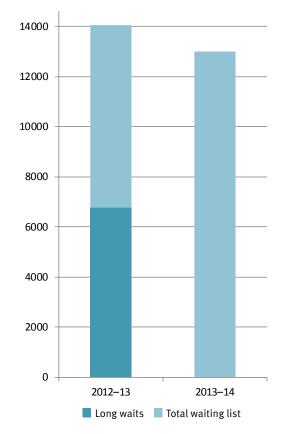
One of Metro South Health's key service delivery objectives for 2013–2014 was the reintroduction of birthing and procedural services at Beaudesert Hospital.

Following significant planning and development by members of the advisory committee and Beaudesert Hospital staff, Metro South Health commenced low-risk birthing services in March 2014, four months ahead of schedule. This followed the successful re-opening of procedural services including minor surgical procedures and some investigative procedures in May 2013.

The return of birthing services at Beaudesert means local women with low risk pregnancies can now choose to birth in their own community, close to their home, family and friends. The hospital now provides a range of obstetric services including postnatal care, meaning eligible women from the Beaudesert catchment no longer need to travel long distances to receive this type of care at other hospitals.

#### **Oral Health services**

The 2013–2014 year saw significant improvement in oral health waiting lists for the Metro South region. At the end of June 2013, 6758 people had been waiting for more than two years (long-waits list). This was reduced to zero in December 2013. The general waiting list was also reduced, from 14,059 in 2012–2013 down to 12,993 in 2013–2014.



*Figure 10. Metro South Oral Health Services waiting list June 2013 vs June 2014* 

Metro South Health achieved these significant improvements by improving efficiency and by partnering with the private sector via the dental voucher scheme. The dental voucher scheme saw the health service provide private dental treatment vouchers to people who had been on public dental waiting lists for long periods, or to those requiring urgent dental care.

Metro South Health is on track to further reduce the number of people waiting for dental treatment, and will continue its efforts to increase the number of patients seen and improve access to services.

#### 2013–14 Highlight

0

Metro South Health reduced the number of people waiting for more than two years for dental care from 6758 people to zero.

## Strategic objective 3 Hospital avoidance and substitution

# Provide efficient, safe and timely health care services

#### Postnatal in-home visits

Metro South Health provides maternity services at three of its hospitals—Logan, Redland and Beaudesert hospitals. The maternity services provided include comprehensive postnatal home visiting services.

Metro South Health implemented the Mums and Bubs program in 2013, which aims to enhance maternal and child health services. It provides additional access to home visits and community clinics in the first 12 months following birth for all women.

To enable effective and successful implementation of the Mums and Bubs program, Metro South Health partnered with Greater Metro South Brisbane Medicare Local to oversee the program. The program is available to women who give birth at Logan, Redland and Beaudesert hospitals and will soon be available to women who give birth at other private and public hospitals in the Metro South Health region.

### 2013–14 Highlight



In 2013–2014, Metro South Health provided 19,834 postnatal in-home visits\*— which is 586 visits above the target for the year.

\*Includes Mater Mothers' postnatal figures.

#### **Beacon clinic**

Diabetes clinics integrating hospital and health service specialists and general practice are established in the GP Super Clinics (UQ Health Care) at Annerley and Meadowbrook (Logan). The model has been partly extended to other chronic disease groups with the Keeping Kidneys project. Inala Primary Care is involved in developing a model of shared care for people with complex chronic kidney disease.

#### Metro South Health@Home

Metro South Health@Home has been established to coordinate and consolidate many of the hospital avoidance and substitution programs across Metro South Health. It aims to provide a single point of access for services, which will ensure patients receive the right service at the right time in the right location.

## MetroSouthHe@lth Home

An executive committee has been established to provide oversight of a hospital avoidance and substitution strategy for Metro South Health.

Working parties have been established to progress:

- amalgamation of the Hospital in the Home, Post Acute Care and Alternate Site Infusion services
- access to in-home allied health and pharmacy support for hospital substitution patients
- redesign of Community Hospital Interface Program services to facilitate coverage seven days per week, across all wards in all facilities
- standardisation of policies and procedures for hospital avoidance and substitution services
- development of a standardised reporting framework for hospital avoidance and substitution services.

The initiative will continue to be rolled out in 2014–2015.

#### Hospital in the Home

Hospital substitution care involves patients being cared for at home or another suitable environment, as if they are in a virtual hospital ward. Professionals including medical officers and nurses deliver treatment, providing a safe, quality and viable alternative to hospital.

In March 2014, a public-private partnership contract commenced with Blue Care. Blue Care was contracted to provide Hospital in the Home services to five diagnosis related groups of patients, including patients with:

- Cellulitis
- Deep vein thrombosis
- Pulmonary embolus
- Urinary tract infection
- Pneumonia.

#### **Central Referral Hub**

The Metro South Health Central Referral Hub was launched in May 2014 to provide a single point of entry for all specialist and allied health outpatients referrals to Metro South Health.

The benefits of the Central Referral Hub include:

- a simple, more efficient referral process
- improved referral tracking
- consistent and fair for patients
- one point of contact for Metro South Health referrals.

The hub had a very successful launch; receiving more than 600 referrals on its first day. In less than two months from launch, the hub processed more than 23,000 referrals, which is an average of 575 referrals each day.

The Central Referral Hub continues to improve its operations with plans to expand to other Metro South Health services in the future.

#### **Oral Health Hub**

In October 2013, Metro South Health launched the Oral Health Hub to improve the way people access urgent public dental treatment. The Oral Health Hub is a call centre for patients, meaning they no longer have to wait in line at a clinic for urgent and emergency treatment. The hub assesses the patient's dental need and allocates the most appropriate time and location for treatment. The benefits include:

- patients can choose the clinic most convenient to them
- patients no longer have to queue outside dental clinics
- reduced administration for staff at the clinics.

Following its successful introduction, the hub was expanded to handle general paediatric appointments in April 2014. Planning is underway to expand the hub to handle all public oral dental appointments for Metro South Health.

The Oral Health Hub is co-located with the Central Referral Hub.

#### **CARE-PACT**

When an elderly patient is transferred from a residential aged care facility to the emergency department, it can be a distressing experience and place them at risk of hospital acquired iatrogenic complications. Further, Metro South Health has seen an increase in avoidable emergency department presentations from aged care facility residents.

CARE-PACT is a unique program that was established in March 2014 to streamline and educate the care pathway for the frail elderly residents of aged care facilities. It aims to ensure the resident receives the best care for their needs in a timely manner and in the most appropriate environment, therefore minimising avoidable emergency department presentations and improving quality of care.

CARE-PACT is a partnership between aged care facilities, general practitioners, hospitals and community services, and will continue to be rolled out across the Metro South Health region over the coming year.

#### Home and Community Care

In 2012–2013, Home and Community Care (HACC) services were redesigned across Metro South Health. The 2013– 2014 year was HACC's first full year as the HACC Brokered Service and Rapid Response Service.

The HACC Brokered Service replaced the previous home care service (including domestic, social support, in home respite and personal care); these services are now contracted to three non-government agencies.

The HACC Rapid Response Service supports Metro South Health's hospital avoidance strategy, by providing timelimited, 28-day support and maintenance services to eligible patients referred from emergency departments or acute wards within Metro South Health's hospitals. Services include nursing assessment and onward referral, physiotherapy, occupational therapy, and support services such as meal preparation, personal care, domestic and social support.

#### **Alternate Site Infusion Service**

The Metro South Health Alternate Site Infusion Service (ASIS) offers patients who require intravenous therapy an alternative to hospitalisation. This can include home care or outpatient treatment. There are many different conditions, such as endocarditis, osteomyelitis, brain abscesses, wound infections, and kidney infections that can now be successfully managed at home or in an infusion centre, avoiding hospitalisation.

#### Post Acute Care Service

The Post Acute Care Service provides community nursing services for a time-limited, short-term period where an intervention is required following an acute admission or presentation to hospital. The service avoids hospitalisation because care is delivered from an appropriate community-based setting, for example home or clinic.

Post Acute Care services include:

- wound care
- medication management including subcutaneous/ intramuscular injections
- peripherally inserted central catheter line management
- stoma cares
- catheter and self-catheterisation management and education
- comprehensive assessments
- personal hygiene support (up to six visits) with an educational requirement.

The principal objective of the service is to facilitate timely discharge and reduce the risk of admission or readmission to hospital.

#### **Community Hospital Interface Program**

The Community Hospital Interface Program (CHIP) aims to enhance the transition between the hospital and community by ensuring continuity of care for the client is maintained on discharge. The underlying principal of CHIP is early identification and intervention of at-risk clients who present to or are admitted to the acute hospital setting to prevent re-admission. Early identification occurs through the use of a risk screening, assessment and referral tool.

#### **Community Adult Rehabilitation Service**

The Community Adult Rehabilitation Service delivers allied health rehabilitation services to patients who have a progressive neurological disorder or other neurological conditions, Parkinson's disease or stroke. The service also provides support for elderly people who have a history of falls.

In 2013–2014, the service has implemented a multidiscplinary assessment process for patients to improve the quality and efficiency of the patient experience. The service operates from Eight Mile Plains, Logan Central, Browns Plains and Beenleigh, and offers group and individual programs. It also offers home assessments to patients when appropriate.

As well as rehabilitation, the service offers specialist services including an occupational therapist driving assessment, speech programs and a dietitian.

# Strategic objective 4 People

## A sustainable, high quality workforce to meet future health needs

#### **Clinician Engagement Strategy**

The *Metro South Health Clinician Engagement Strategy* 2012–2015 was endorsed by the Metro South Hospital and Health Board in November 2012.

In accordance with the *Hospital and Health Boards Act* 2011, the strategy has been developed following broad consultation with health professionals across Metro South Health and the community, and has been posted to the internet and intranet. The strategy complies with the prescribed requirements as detailed in the *Hospital and Health Boards Regulation 2012*.

The strategy also forms a key component of the *Metro South Health Workforce Engagement Strategy* 2013–2015, and is linked with the *Metro South Health Workforce Plan* 2012–2017.

Key activities of the Clinician Engagement Strategy include:

- Integrated Motor Neuron Disease model of care: Clinical redesign clinicians have been actively engaged to develop a model of care for integrated Motor Neuron Disease. This will ensure the entire patient journey is planned and addressed from community care through to referral to the acute sector.
- Chronic disease redesign: Clinicians have been engaged in the redesign of community-based chronic disease services. This work will continue in 2014 to ensure the service is well integrated with primary care.
- Virtual Health Precinct: Clinicians have been engaged to inform the Simply Health online community website.

Clinicians have been actively involved in developing the following plans and initiatives in 2013–2014:

- Medicine and Chronic Disease Services Inpatient Service Plan
- Barriers to accessing community rehabilitation
- Addiction and Mental Health Services—Draft Strategic
   Plan and Clinical Service Plans

- Wynnum Health and Community Precinct Survey
- Surgical Services Plan
- Aged Care and Rehabilitation Service Plan
- General Practice Liaison Officer (GPLO) Program.

The Board has endorsed the implementation of a Metro South Health-wide Clinician Advisory Group who will interact directly with the Board. The group will provide a forum for the Board to engage directly with clinicians on matters of importance and to seek their feedback regarding key reform initiatives. It is anticipated the first Clinician Advisory Group meeting will occur in late 2014.

### 2013–14 Highlight



Since 2012–2013, Metro South Health has increased clinician numbers by 5.3 per cent or 428 doctors, nurses and allied health practitioners.

#### Best Practice Australia Culture Survey

Metro South Health participated in the Best Practice Australia (BPA) staff culture survey in 2013–2014, and received positive results. When compared against BPA's database of government public healthcare and health sector norms, out of a possible 125 quantitative attributes measured on the 2013 survey that could be benchmarked:

- 88 quantitative attributes benchmarked above average—which equates to 70 per cent
- 24 quantitative attributes benchmarked average
- 13 quantitative attributes benchmarked below average.

The survey results highlighted Metro South Health's key strengths; the following are some of the attributes which benchmarked above average:

- management skills and leadership styles
- freedom from workplace aggression (in particular freedom from offensive verbal abuse and violent behaviour)
- a fair day's pay for a fair day's work
- appropriate remuneration for responsibilities
- trust in middle management.

Princess Alexandra Hospital set new benchmarks for the following:

- the organisation provides a fair day's pay for a fair day's work (63 per cent agreement)
- the organisation provides appropriate remuneration for the responsibilities I have (58 per cent agreement)

- my manager has set the standards for building a great team—they will settle for nothing less (66 per cent agreement)
- regardless of how difficult the situation, my manager always exudes a sense of confidence that we will get through it (72 per cent agreement).

#### Workforce Engagement Strategy

Metro South Health's most valuable asset is its workforce. *PAVE the way* is Metro South Health's workforce engagement strategy, which is a critical tool to ensuring all employees are equipped with the skills, resources and knowledge to work with the organisation to achieve our goals.

To drive real change within Metro South Health, three PAVE action groups were established; each with a particular focus:

Action group 1: Business literacy and communication

Action group 2: Leadership, management and capability development

Action group 3: Workforce management systems, workforce planning and innovative workforce models

Since its establishment in April 2014, *PAVE the way* has already resulted in the following actions:

- new communication strategies that promote a Metro South Health identity, target the whole workforce and make use of both formal (branded e-bulletin, all staff emails) and informal media (consultation hub, facebook, ideas hub, staff stories)
- exploration of ways to talk and learn about values that will improve workforce culture including staff stories, person-centred care and values-based practice
- review of current management and leadership programs with a view to developing and making available a Metro South Health program
- exploration of ways to build trust within and between all levels of the organisation
- development of a clear set of capabilities for all categories and levels of staff
- review of current recruitment practices and development of innovative ways to ensure there is alignment between the worker, the role, the workforce plan and the workplace culture.

#### Prescribed employer status

In June 2012, amendments were made to the *Hospital and Health Boards Act 2011*, giving Metro South Health more autonomy by allowing it to become the direct employer of staff. Following a significant preparation and application process, Metro South Health will become one of eight hospital and health services to be a 'prescribed employer' from 1 July 2014, with employees transferred to the health service from the Department of Health.

The move to prescribed employer status will allow Metro South Health to hold all authorities and accountabilities for administering human resource functions. The Director-General, Department of Health remains responsible for statewide employment and industrial relations arrangements and will continue to establish conditions of employment for health service employees and negotiate certified agreements.

#### **Australia Day Awards**

Each year, Metro South Health presents Australia Day Achievement Awards to recognise staff who have made significant contributions to the improvement and delivery of health services for the benefit of our community and for all Queenslanders.

In 2014, the Australia Day Achievement Awards were awarded to:

- Kate Bell: an osteoporosis nurse from PA Hospital, who pioneered this role in Queensland and goes well beyond the call of duty to follow up her patients once they leave hospital.
- Margaret Broomfield: Director of Community Aged Care Services who, in 2013, skilfully and courageously led the most significant reform to residential aged care that the health service has ever seen.
- Emergency Department Team, Princess Alexandra Hospital: who, despite working in a highly complex environment, achieved the greatest improvement in performance of any emergency department in Australia in 2012–13.

#### Policies and procedures framework

As part of the transition to prescribed employer status, in 2013–2014 Metro South Health developed a new workforce services policy framework to commence on 1 July 2014. The policies:

- provide a strategic statement of Metro South Health's principle expectations of employees
- incorporate existing legislation, awards, agreements and directives
- reference Department of Health policy which will still apply to a prescribed health service as applied through health employment directives and health service directives
- provide a hierarchy of power for procedures and guidelines
- reference the Board Chair's human resources instrument of delegation and related delegations manual.

### Strategic objective 5 Image and reputation

## Promote and market our worldclass health service—locally, nationally and internationally

#### Magnet recognition program

In June 2014, Princess Alexandra Hospital was designated as a prestigious Magnet® facility for the third time. Magnet is an international nursing credentialing program that recognises quality patient care, nursing excellence, and innovations in professional nursing practice. It is the highest recognition for nursing excellence that can be attained internationally.

The hospital is one of only 400 organisations around the world to have received the designation, and the only facility outside the United States to achieve it for a third time. The designation followed months of preparation including a large written submission and a site visit by accreditors from the American Nurses Credentialing Centre.

The accreditors made special commendations about the collaboration and teamwork across the hospital's clinical professions along with a number of quality initiatives including pressure injury prevention, state-wide nurse sensitive indicators, dementia, and blood management.

#### Accreditation

The Princess Alexandra Hospital underwent its four-yearly Australian Council on Healthcare Standards accreditation survey in September 2013. This was the first time the hospital was surveyed against ten new standards under the new 'EQuIP National' framework.

Princess Alexandra Hospital achieved the best performance in Australia against the new standards since they were introduced in January 2013. The hospital achieved the highest 'Met with Merit' (MM) score on 45 per cent of its standards, which was 10 per cent greater than its closest peer group hospital at the time. Notably, the hospital achieved 15 per cent MM in workforce planning, 18 per cent MM in corporate systems and 42 per cent MM in information management. In addition, Princess Alexandra Hospital achieved full accreditation with no recommendations.

### 2013–14 Highlights



Princess Alexandra Hospital is the only facility outside the United States to have received the prestigious Magnet designation for the third time.

#### Accreditation

Princess Alexandra Hospital achieved the best performance in Australia against the new Australian Council on Healthcare Standards, since they were introduced in January 2013.

#### **International speakers**

A number of Metro South Health staff members presented at international conferences in 2013–2014, demonstrating the quality of clinical innovation and research undertaken at facilities across the health service.

International conference presentations included:

- Dr Steven McPhail, Senior Research Fellow—
   International Conference on Physical Activity and
   Public Health in Rio de Janeiro, Brazil
- Ms Megan Rossi, Dietitian—International Congress on Nutrition and Metabolism in Renal in Frankfurt, Germany
- Dr Peter Moore, Cardiologist—American Heart Rhythm Society Conference in San Francisco, USA
- Dr Viral Chikani, Endocrinologist—International Congress of Endocrinology in Chicago, USA
- Ms Christine Ossenberg, Clinical Nurse—International Nurse Education Conference in Amsterdam, Netherlands
- Ms Sarah Bowden, Social Worker—International Congress on Practice Research in New York, USA
- Professor Kenneth O'Byrne, Medical Oncology Consultant—Korea Oncology Advisory Board Meeting in Seoul, Korea.

#### Media and communications

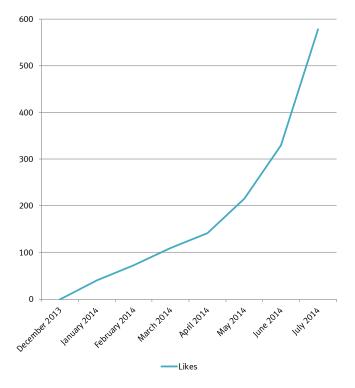
Metro South Health has a dedicated media and communications team that manages all aspects of media relations, web, marketing, and service-wide communication to both internal staff and the general public. A key focus for this team in 2013–2014 was the continued development of a strong media profile to:

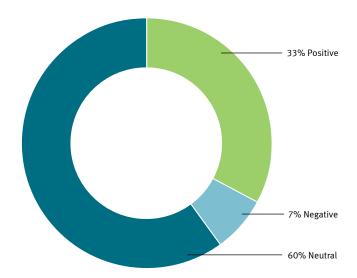
- build on Metro South Health's brand as an independent health service with a reputation for innovation and the highest standards of health care delivery
- continue to develop positive, open relationships with media outlets to ensure issues are presented accurately and with balance.

Metro South Health has maintained a strong media profile throughout the financial year. An analysis of the year's media coverage showed that 33 per cent of all media activity was classified as positive while only 7 per cent was negative. Negative media coverage reduced by 11 per cent from the previous year. There was also a large amount of neutral coverage (60 per cent) due to ongoing interest in high-profile patients.

The health service built on its communication platforms throughout the year to better engage with employees, consumers and community members. One key achievement was the establishment of a Metro South Health Facebook page, which showcases positive news stories, staff achievements, events, service updates, public health messages and healthy lifestyle tips. The page also provides an additional opportunity to directly engage with people in the community. The page has been well received with nearly 600 followers at the end of June 2014, and Metro South Health content now reaches, on average, more than 1300 individual people per day.

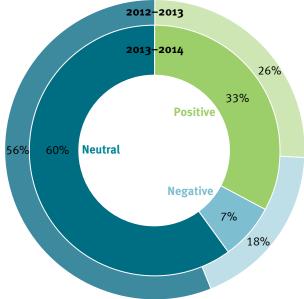






*Figure 12. Tone of media coverage in 2013–2014* 

Figure 13. Media coverage 2013-2014 vs 2012-2013



Strategic objective 6 Funding and resource management

# Ensure the best use of allocated resources

#### Value for money

Under the activity based funding model, weighted activity units (WAU) provide a common unit of comparison for all clinical activities so that hospital activity can be measured and costed consistently. The base cost for one WAU is the Queensland Efficient Price, which was set at \$4660 in 2013–2014.

Some examples of how WAU are applied to clinical activites are: an Orthopaedics outpatient appointment has a weighting of 0.05 WAU, which equates to \$233; whereas a cochlear implant has a weighting of 6.995, which equates to \$32,597.

Metro South Health provided 283,971 WAU of activity in 2013–2014, which is 4378 (1.6 per cent) above its targeted purchased (funded) activity. At the end of June 2014, the cost per WAU in Metro South Health was \$62.75 lower than the Queensland Efficient Price.

At the end of the 2013–2014 financial year, Metro South Health's year-to-date operating position was \$25.79 million in surplus.

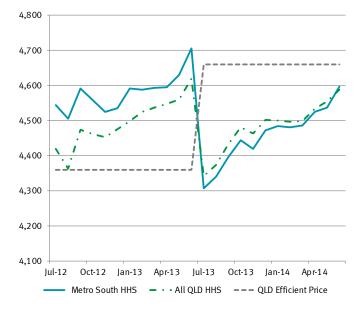


Figure 14. Value for money (cost per WAU) 2012-2014

#### Capital and asset management

Metro South Health successfully negotiated the transfer of ownership of Metro South Health land and buildings from the Department of Health. Assets with a net book value of more than \$800 million (estimated replacement value in excess of \$1.7 billion) were transferred to Metro South Health on 1 July 2014.

Development of the Metro South Health Asset Strategic Plan is continuing in line with the progressive development of service plans.

A number of significant asset acquisitions and disposals were finalised in 2013–2014 to better align Metro South Health's asset base with service delivery requirements. Acquisitions included medical equipment replacements in excess of \$14 million and new equipment and building works in excess of \$9 million. Disposals included the former Moreton Bay Nursing Care Unit facilities.

#### Infrastructure

In 2013–2014, Metro South Health completed and opened a number of infrastructure projects, including:

- Princess Alexandra Hospital
  - Day procedure unit
  - Oncology day care unit expansion
  - Vascular hybrid operating theatre
  - Queen Elizabeth II Jubilee Hospital
  - Endoscopy unit
  - Short stay ward
  - Emergency department expansion
- Logan Hospital
  - Sexual assault forensic examination (SAFE) room
  - Eighth surgical theatre
  - Addiction and Mental Health
  - Community care unit, Logan
- Other

 Southern Queensland Centre for Excellence in Aboriginal and Torres Strait Islander Primary Health Care, Inala

- Central Referral Hub building fit-out.

In addition, work continued on the following projects:

- Logan Hospital expansion including emergency department, children's inpatient ward and rehabilitation ward
- Clinical Research Facility, Princess Alexandra Hospital
- Transit lounge and foyer redevelopment, Princess Alexandra Hospital
- Redland Bay Community Care Unit.

#### Procurement

Metro South Health has undertaken detailed planning to identify key areas to improve value for money outcomes through effective procurement. In doing so, the health service has focused on developing procurement capability and effective risk management.

A feature of Metro South Health's activities during 2013– 2014 was the detailed assessment of the feasibility of selected public-private partnership options, partnerships with non-government organisations, and innovative service delivery opportunities. The Metro South Hospital and Health Board endorsed continued work on a range of these activities, which will be progressed with the support of private-sector contractors and the Department of Health's contestability unit.

#### Audit

In 2013–2014, Metro South Health strengthened its internal and external audit mechanisms to provide continued assurance to the Board on the effectiveness of financial and operating systems as well as risk management.

An internal audit plan was developed for the financial year with the following key focus areas:

- fraud prevention and control
- integrity and content of Board reporting
- health practitioner credentialing
- workforce planning
- compliance with legislative requirements
- asset management
- complaints management
- contract management
- establishment management
- financial management assurance program
- drugs handling
- backlog maintenance
- leave management
- palliative care acquittal.

In addition, Metro South Health's operations were subject to external scrutiny from a number of oversight bodies in the past financial year. Major reviews included an annual audit by the Queensland Audit Office as well as the accreditation of Princess Alexandra Hospital against the 10 National Safety and Quality Health Service Standards.

Further details about audit and risk management programs are available on page 43.

### Strategic objective 7 Organisational excellence

## Ensure that our governance and organisational structure are at the leading edge of industry norms

#### Contestability and public-private partnerships

One of Metro South Health's key strategic objectives for 2013–2014 was to consider contestability and publicprivate partnerships opportunities to ensure the best use of allocated resources.

Key initiatives included:

#### Oral health vouchers

In 2013, Metro South Health was awarded funding to increase the use of vouchers for private oral health treatment. The health service was subsequently able to eliminate its long-wait general care waiting list (patients waiting more than two years), as well as reduce the total number of people waiting for dental treatment by more than half.

#### Mums and Bubs Program

In 2013, Metro South Health partnered with the Greater Metro South Brisbane Medicare Local to deliver a new postnatal home visiting service at two and four weeks' following the birth. The service is an extension of midwifery care provided by Logan, Redland and Beaudesert hospitals. The visit provides new mothers with a postnatal check, general health and wellbeing advice, a physical assessment for the baby, breastfeeding support, parenting strategies, and advice on local community support services.

#### Hospital in the Home

In 2014, Metro South Health entered into a public-private partnership contract with Blue Care to deliver the Hospital in the Home service. Hospital in the Home provides hospital substitution care to patients at home or another suitable environment, as if they are in a virtual hospital ward. The service provides acute treatment in a safe, quality and viable alternative to hospital.

#### Security services

An independent review of security and protective services in Metro South Health facilities recommended a contestability process to compare the current in-house service with external providers. Following assessment and careful consideration, a contract was awarded to an accredited private security provider. This provider has demonstrated the necessary expertise to meet the health service's stringent requirements and standards, as well as generating significant cost savings.

## Building collaborative partnerships to deliver high quality health care

To ensure planning and health service delivery is coordinated, Metro South Health has formed 'Working Together Agreements' or 'Partnership Protocols' with both the Greater Metro South Brisbane Medicare Local and West Moreton Oxley Medicare Local.

This initiative recognises the strategic linkages between the Medicare Locals and Metro South Health, and a shared desire to work together for a common purpose to improve our health system and to achieve better health outcomes for our community.

Key initiatives Metro South Health has collaborated on with either Medicare Locals have been focused on the following priority areas:

- consumer and community engagement (e.g. community forums)
- primary/secondary integration (e.g. General Practice Liaison Officer Program)
- chronic disease (e.g. beacon clinics).

#### **Executive appointments**

Metro South Health appointed a number of highly qualified and experienced clinicians and administrators to senior positions during 2013–2014. These included:

- Dr Stephen Ayre—Executive Director, PAH-QEII Health Network
- Mr Brett Bricknell—Executive Director, Logan-Bayside Health Network
- Mr Michael Draheim—Chief Information Officer
- Ms Kay Toshach—Executive Director, Planning, Engagement and Reform
- Mr Peter Frew—Executive Director, Corporate Services.

## Strategic objective 8 Teaching and research

## Support education and research and their translation into improved health outcomes for patients

#### **Research partnerships**

Metro South Health has a strong record of collaboration in medical research and translation of research into improved outcomes for patients.

Princess Alexandra Hospital is home to one of Australia's pinnacle medical research institutions—the Translational Research Institute (TRI). TRI aims to combine clinical and translational research to advance progress from laboratory discovery to application in the community.

Princess Alexandra Hospital is also a founding partner of Diamantina Health Partners, Queensland's first academic health science centre. One of the key aims of Diamantina Health Partners is to foster collaboration between laboratory scientists and clinicians. In 2013– 2014, strategic plans were developed for seven areas of research and an annual forum was established to facilitate information-sharing.

## 2013–14 Highlights



Major research achievements involving Metro South Health staff during 2013–2014 included:

- a discovery on how to 'flick a biological switch' that allows the immune system of cancer patients to be better protected during chemotherapy.
- a new trauma care model in which researchers work side-by-side with paramedics, medical staff, allied health professionals and rehabilitation specialists to improve the care pathway of patients.
- new funding for the Medical Research
   Commercialisation Fund that is supporting a
   Princess Alexandra Hospital project to use snake
   venom in new blood-clotting technology.

Significant partnerships are also in place with major Queensland universities, which include 39 joint appointments in a variety of areas and disciplines, as well as a number of student placement agreements.

#### Princess Alexandra Hospital Health Symposium

Each year, Princess Alexandra Hospital convenes a weeklong symposium to showcase clinical innovation, teaching and research from across the facility, with all Metro South Health staff invited to attend. The 2013 symposium was held from 19–23 August under the theme "Making advances matter: research, education and treatment in partnership". The program highlighted how translational research and partnerships in health disciplines are leading to new technologies, improved and more costeffective treatments for chronic disease, immunology, inflammation and inflammation, cancer, trauma and rehabilitation, and neuroscience and mental health.

The event featured an international fellow, Professor Stephen Durham from Imperial College London, who is a world-renowned clinician-scientist. Professor Durham delivered a keynote address on how interdisciplinary and global partnerships have advanced the understanding of immunologic mechanisms that are translating to novel therapies for allergies and asthma.

The symposium also featured educational sessions covering the integrated electronic medical record, a debate on the use of social media in healthcare, and a celebratory presentation on the Princess Alexandra Hospital Centres for Health Research. In addition, the symposium awarded bursary prizes to junior researchers who delivered the best oral presentations as well as clinicians and researchers with the best research poster displays.

#### New nursing supervision model

In July 2013, a formal research project with Griffith University was developed to implement and evaluate a new nursing supervision model for undergraduate nursing students placed at Princess Alexandra and Logan hospitals.

The new nursing supervision model involved the establishment of a clinical associate role, whose primary focus was to support and up-skill the staff acting as a preceptor to individual students. This is a move away from the facilitation model's focus on a facilitator who supports a group of 6–8 students. Within a clinical associate model, there is a larger group of students per associate and the student is allocated one to two key preceptors.

The new model has received favourable feedback from students, preceptors and the clinical associate. It has the ability to increase the student to supervisor ratio whilst maintaining a safe, proactive learning environment for the undergraduate nursing student.

The clinical associate role has been sourced from facility staff in conjunction with the education provider which also provides professional development opportunities to other Metro South Health staff.

## Research Fellowship with the NHMRC Centre of Research Excellence in Nursing

Dr Rachel Walker is a registered nurse at the Princess Alexandra Hospital and a research fellow with the Centre of Research Excellence in Nursing (NCREN).

Following a period of consultation with nurse leaders in the divisions of surgery and medicine, Dr Walker has positioned her research within acute health settings with a focus on cochrane reviews, skin integrity (pressure injury), symptom management and knowledge translation.

Dr Walker's current research work includes:

 a randomised controlled trial in clinical areas in the divisions of surgery and medicine titled: Prophylactic dressing to minimise sacral pressure injuries in high risk hospitalised patients: A pilot study.

The study is registered with the Australian and New Zealand Clinical Trials - ACTRN12613001328763 www.ANZCTR.org.au/ACTRN12613001328763.aspx

 leading and collaborating author on a suite of Cochrane protocols and reviews:

 Foam dressing for treating pressure ulcers (Protocol)

 Alginate dressings for treating pressure ulcers (Protocol)

 Hydrogel dressings for treating pressure ulcers (Protocol)

 Hydrocolloid dressing for treating pressure ulcers (Review)

a pilot study commencing in 2015 will use a knowledge translation framework to partner with nurses to improve reporting of clinical deterioration in patients.

## Strategic objective 9 Technology

## Optimise the use of technology

## Innovate to deliver ICT services that are at the cutting edge of healthcare standards

## Implementation of Interactive Electronic Medical Record (iEMR) Program

The Department of Health has committed to an eHealth agenda that aims to create a single shared integrated electronic Medical Record (ieMR) which will enable improved quality, patient safety and care for patients into the future.

Metro South Health shares this committment, and is further building upon this platform by adding additional functionality. This will enable a fully digital integrated patient journey from the time the patient arrives in the emergency department, through surgery, to outpatients and eventually back into community care. Once the program of work has been completed, Metro South Health will be the leading 'Digital Hospital and Health Service' in Queensland.

Princess Alexandra Hospital successfully implemented Release 1 of the ieMR program in June 2014. During 2014– 2015, the hospital will undertake an ambitious program of work to deliver a truly integrated electronic medical record that will achieve an EMRAM level 6 across the facility (the level of electronic medical record adoption).

Once the program has been successfully implemented at Princess Alexandra Hospital, it will be implemented at Metro South Health's other facilities. It is planned that the program will expand to an additional facility by late 2015.

#### **Vocera Communication Badge**

The Vocera Communication Badge is a hands-free, mobile device that uses wireless technology to provide users with an immediate person-to-person communication. It is controlled using naturally spoken commands and allows clinicians to continue about their work without the need to leave the patient bed side. It reduces the need for overhead paging, searching for colleagues or receiving phone calls at the front desk or reception.

The technology was successfully implemented into the

emergency department, and general medical and mental health wards at Princess Alexandra Hospital, as well as the emergency department at QEII Jubilee Hospital. Planning is underway to implement the technology at Logan Hospital.

Emergency departments are highly complex work places with huge workforces. The system has been configured to ensure ease of communication between all nursing, allied health, administration and operational staff. Where previously staff had to recall specific phone extension numbers or search the department for the correct staff members, Vocera allows staff to push a button and connect straight away with the correct individual or group of people.

The Vocera Communication Badge has helped Princess Alexandra Hospital and Queen Elizabeth II Jubilee Hospital to support the key objectives related to their National Emergency Access Targets (NEAT) by:

- locating staff more efficiently
- saving time on daily work processes
- reducing interruptions to patient care
- creating a more efficient patient flow
- increasing staff and patient safety.

#### Patient Flow Manager Program

The Patient Flow Manager Program is the consolidation of segregated patient flow manager programs across the health service into a single, standardised communication platform. This enables a holistic view of ward occupancy across Metro South Health and the ability to standardise and increase efficiency in patient flow processes and outputs. It will also assist bed management and ward staff to view expected patients within their hospital and aid in bed planning well before the patient presents to a given ward.

The Patient Flow Manager Program was successfully implemented at Princess Alexandra and Queen Elizabeth II Jubilee hospitals in April 2014. Stage 2 of the program will see it rolled out to Logan, Beaudesert and Redland hospitals and Wynnum Health Service in August 2014.

#### **Electronic Medical AVAC Project**

During 2013–2014, Metro South Health successfully implemented an Electronic Medical AVAC tool at Redland Hospital. This follows the successful implementation at Princess Alexandra and Logan hospitals. The tool was developed to facilitate the overall capture and management of overtime and fatigue leave for junior medical officers. The tool allows users to electronically record their overtime or fatigue leave claim, submit to their director for review and approval, with subsequent electronic submission of the claim to the local payroll department.

The project has already resulted in improvements in the timely capture and submission of overtime and fatigue claims, and leave forms. It also provides customisable real-time and trending reports to inform strategic and operational planning.

#### **Recording all Facility Transportation Application**

Metro South Health developed the Recording all Facility Transportation (RaFT) application to facilitate the creation, management and reporting of patient transport requests within the health service.

RaFTs successful implementation resulted in clear benefits, including immediate availability of activity data, increased efficiencies, improved quality of business processes, and increased ability to align clinically correct transport for acuity of patients. The Queensland Ambulance Service has also reported clear benefits in both process and resource efficiencies as a result of RaFT.

The success of the implementation and benefits delivered directly to both Metro South Health and its patients, have been recognised not only within the health service, but also externally—with RaFT receiving a 'State Merit Award' in the 2014 Queensland iAwards Competition.

#### **Horizon Cardiology Virtualisation Project**

The Horizon Cardiology Virtualisation Project upgraded the existing information system responsible for storing and reporting Metro South Health's echocardiogram investigations. The project was implemented in July 2013 and has significantly improved connectivity of the integrated services, resulting in a significant decrease in the time between the scan being completed and the scan being available for reporting (from up to 48 hours to approximately 10 minutes).

#### **QEII Hospital Outpatient Kiosks**

The Queen Elizabeth II Jubilee Hospital Outpatient Department previously operated on a human-interaction system for patients arriving for appointments. The patient's appointment letter and Medicare Card were checked manually by administrative staff and they were then directed to the applicable outpatient waiting area.

In order to decrease patient waiting times, a proof of concept was initiated in May to trial an automated checkin system at the hospital.

An automated patient check-in system is already in place at other hospitals in Queensland and have resulted in increased data accuracy for reporting, increased revenue, reduced waiting times, improved patient satisfaction and improved operational efficiency. It is anticipated that a move to an automated check-in system will achieve similar outcomes for the QEII Outpatient Department.

The trial will continue through the 2014–2015 year.

## Service agreement—Tier 1 key performance indicators

The following table contains performance against the mandatory Tier 1 key performance indicators defined in Metro South Health's service agreement with the Department of Health.

KPI Description	Target	Actual
Effectiveness—Safety and quality		
National Safety and Quality Health Service Standards Compliance	All actions met	All actions met
Access—Equity and effectiveness		
Shorter stays in emergency departments		
National Emergency Access Target (NEAT): percentage of emergency department attendees who depart within 4 hours of their arrival in the emergency department.	2013: 77% 2014: 83%	2013: 73% 2014: 73%
Shorter waits for elective surgery		
National Elective Surgery Target (NEST): percentage of patients receiving elective surgery who were treated within the clinically recommended timeframe for their urgency category.		
Category 1 : within 30 days	2013: 100% 2014: 100%	2013: 90% 2014: 94%
Category 2 : within 90 days	2013: 87% 2014: 94%	2013: 70% 2014: 69%
Category 3 : within 365 days	2013: 94% 2014: 97%	2013: 71% 2014: 73%
Maintain surgical activity		
Elective surgery volume	≥5% more than 2010 volume (27,084)	2013–14: 24,546
Fewer long waiting patients		
Elective surgery patients waiting more than the clinically recommended timeframe for their category:		
Category 1 : within 30 days	o - ≤2% with no patients waiting longer than 60 days	O
Efficiency—Efficiency and financial performance		
Year to date operating position	Balanced or Surplus	Surplus \$25.79M
Full-year forecast operating position	Balanced or Surplus	Surplus \$25.79M
Purchased activity	0% to +/- 1%	1.6%

## **Financial highlights**

Metro South Health has achieved a financial surplus of \$25.794 million for the year ending 30 June 2014. This represents a 1.4 per cent variance against its revenue base of \$1.8 billion.

The result is pleasing given the demand pressure on health services, and demonstrates that Metro South Health is an efficient provider of services.

Metro South Health delivered a range of services at levels 1.3 per cent higher than it is funded for, which demonstrates the value the health service is providing to its local communities.

During the year, Metro South undertook a significant number of quality and performance improvement initiatives that contributed to the overall positive financial result.

The surplus will allow Metro South Health to continue to reinvest into priority areas such as reducing patient waiting times, but also allow to invest in strategic initiatives designed to create longer term financial sustainability.

#### Income

Metro South Health's income includes operating revenue, which is sourced from three major areas:

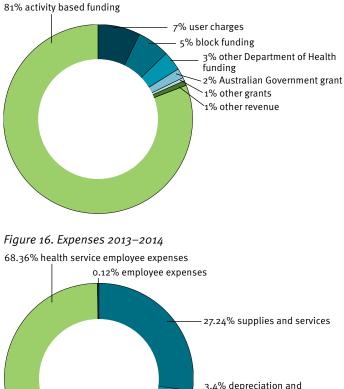
- Department of Health funding for public health services
- Commonwealth grants
- own-source revenue.

Metro South Health's total income was \$1.846 billion, which is an increase of \$43.4 million (2.4 per cent) from 2012–2013. Figure 15 details the extent of these funding sources for 2013–2014.

- Metro South Health's total income was \$1.846 billion.
- the activity based funding for hospital services was 81 per cent or \$1.49 billion
- block and other Department of Health funding was 8 per cent or \$162.7 million
- commonwealth grants and other grants funding was 3 per cent or \$40.2 million for health services
- own source revenue was 7 per cent or \$138.4 million
- other revenue was 1 per cent or \$15.5million.

Funding for public health services was predominantly from State Government (70.19 per cent) and Australian Government (29.81 per cent).

#### Figure 15. Revenue by funding sources



3.4% depreciation and amortisation 0.47% other expenses 0.27% grants and subsidies 0.15% impairment losses

#### **Expenses**

The total expenses were \$1.821 billion averaging at \$4.988 million a day for providing public health services. This is an increase of \$37.6 million (2.11 per cent) from last financial year. The increase in expenses includes:

- health service employee expenses decreased by \$15 million due to a reduction in full time employees as a result of 2012-2013 cost reduction strategies
- supplies and services increased by \$54 million mainly due to costs associated with expanded services at Logan, QEII and Beaudesert hospitals, and for additional elective surgery.

Figure 16 provides a breakdown of expenditure to the main categories.

In addition to the above, Metro South Health has invested in its asset portfolio of \$33.2 million, funded predominantly from State funding.

## Comparison of actual financial results with budget

Metro South Health's actual result in comparison to its budget as published in the *State Budget Papers*, *Service Delivery Statements* are presented in the following tables with accompanying notes.

#### Statement of Comprehensive Income for 2013–2014 financial year

	Notes	2013–2014 actual \$'000	2013–2014 budget \$'000	Variance %
Income				
User charges and fees	1	1,790,325	1,790,265	4%
Grants and contributions	2	40,207	28,397	42%
Other revenue	3	15,483	2,637	487%
Gains on disposal or re-measurement of assets		573	_	n/a
Total income		1,846,588	1,751,299	5%
Expenses				
Employee expenses	4	2,122	1,896	12%
Health service employee expenses	5	1,244,654	1,233,148	1%
Supplies and services	6	495,924	441,848	12%
Grants and subsidies	7	4,918	3,221	53%
Depreciation and amortisation	8	61,895	64,311	-4%
Impairment losses/losses on sale of assets	9	2,802	1,322	112%
Other expenses	10	8,479	5,553	53%
Total expenses		1,820,794	1,751,299	4%
Operating result		25,794	_	n/a

#### Notes

- 1. The increase in user charges and fees is due to additional funding from the Department of Health for expanded services at Logan, QEII and Beaudesert hospitals, along with additional funding for elective surgery.
- 2. The increase in grants is predominantly due to a higher level of grants funding for research and aged care services compared to budget.
- 3. The increase in other revenue is predominantly due to the reimbursement of joint appointment costs with a change in accounting treatment as these were budgeted as an offset to expenditure.
- The higher than budgeted employee expenses includes executives and board remuneration.
- 5. The increase in health service employee expenses is due to additional costs associated with specific growth funding reflected in the service agreement between Metro South Health and the Department of Health, as well as inflation for enterprise bargaining agreements.
- The increase in supplies and services reflects amendments in the service agreement between Metro South Health and the Department of Health, including specific and general growth as well as non-labour cost escalations.
- 7. The increase in grants expense is due to new funding arrangements, including the commitment to the Centre of Excellence for Head and Neck Cancer and Enhanced Maternal and Child Health Services.
- 8. The decrease in depreciation is due to the review of useful life of the building and medical equipment portfolio, asset transfers to other entities and disposal of assets.
- 9. The increase in impairment lossess is due to a review of the debt collectability of Metro South Health hospital fees predominantly relating to overseas patients and the impact of non-current asset disposals.
- 10. The increase in other expenses is spread across various categories such as interpreter services, legal fees and insurance.

## Statement of financial position as at 30 June 2014

	Notes	2013–2014 actual \$'000	2013–2014 budget \$'000	Variance %
Current assets		• • • • •		
Cash and cash equivalents	11	170,710	100,725	69%
Receivables	12	26,858	36,305	-26%
Inventories	13	13,773	12,763	8%
Other	14	4,191	1,534	173%
Total current assets		215,532	151,327	42%
Non-current assets				
Intangibles		477	178	168%
Property, plant and equipment	15	1,081,818	1,147,831	-6%
Other assets		_	1	-100%
Total non-current assets		1,082,295	1,148,010	-6%
Total assets	_	1,297,827	1,299,337	0%
Current liabilities				
Payables	16	142,530	123,727	15%
Accrued employee benefits		37	1,104	-97%
Other liabilities	17	1,923	36	n/a
Total current liabilities		144,490	124,867	16%
Total liabilities		144,490	124,867	16%
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Net assets		1,153,337	1,174,470	-2%
Equity				
Contributed equity	18	1,070,853	1,122,587	-5%
Accumulated surpluses/(deficit)	19	45,783	_	n/a
Asset revaluation surplus	20	36,701	51,883	-29%
Total equity		1,153,337	1,174,470	-2%

#### Notes

11. The increase in cash is due to Department of Health funds receivable in 2012–2013 being received in 2013–2014, end of year cash advances received for reimbursement payable to the Department of Health for payroll and vendor payments, and also the impact of the operating result of 2013–2014.

12. The decrease in receivables is predominantly due to the reduction in Department of Health funding receivables in 2013–2014.

13. The increase in Inventory is due to higher than budgeted actual stock levels.

**14.** The increase is due to higher than budgeted prepaid goods and services.

**15.** The decrease in property, plant and equipment is predominantly due to less than budgeted capital acquisition (timing of capital works completion) offset by an increase due to the revaluation of buildings.

16. The increase in payables is predominantly due to reimbursement payable to the Department of Health for payroll and vendor payments.17. The increase in other liabilities is due to hospital service revenues and fees received in advance.

18. The decrease in Contributed equity is due to delays in expected transfer of completed work in progress projects from the Department of Health.

**19.** The increase in accumulated surplus is due to the end of year results of both 2012–2013 and 2013–2014 financial years.

20. The decrease in asset revaluation surplus is due to the actual result of the revaluation of buildings being less than budgeted.