



#### Accessibility

If you have difficulty reading a standard printed document and would like an alternative format, please phone 13 22 81.



If English is not your first language and you need the Translating and Interpreting Service (TIS), please call 13 14 50.

For further accessibility information, visit: www.health.act.gov.au/accessibility

www.health.act.gov.au | Phone: 132281 | Publication © Australian Capital Territory, Canberra March 2018



## **CONTENTS**

FOREWORD	5
EXECUTIVE SUMMARY	
AMBITION, AIM & STRATEGIC PRIORITIES	8
QUALITY STRATEGY DRIVER DIAGRAM	9
STRATEGIC PRIORITIES	10
STRATEGIC CASE FOR CHANGE	11
WORKING TOGETHER TO IMPROVE QUALITY	12
WHAT WE HEARD	13
OUR FOCUS ON THE STRATEGIC PRIORITIES	16
ENABLERS	18
ENABLERS FOR IMPLEMENTATION	20
EXEMPLAR SAFETY AND QUALITY JOURNEY	22





### **FOREWORD**

I am delighted to present the ACT Health Quality Strategy 2018-2028 which aims to deliver the highest quality health care services to the people of the Australian Capital Territory (ACT) and surrounding New South Wales (NSW) region. ACT Health's ambition is to be a high performing health service that provides person-centred, safe and effective care. ACT Health is striving for the highest standards of quality through care that is person-centred, safe, and effective.

ACT Health has a long history of commitment to, and action on, safety and quality. The Quality Strategy will build upon work to date and bring a systems approach to deliver high-quality care, reduce harm and improve the outcomes and processes of care. It presents a shared understanding of quality and a commitment to place quality at the heart of the organisation and will support ACT Health to continually increase public confidence, excellent performance and further build its reputation as a health care provider of choice.

Implementation will begin mid 2018 with two, five and ten year milestones identified through a *Quality Strategy Implementation Plan and Measurement Framework*. Measures will be put in place to ensure the spirit and commitment of the strategy is reflected in the health care provided to our community.

The development of the Quality Strategy was supported by an engagement, consultation and co-design approach, involving staff across the organisation and patients, consumers and carers in our community.

Our community faces some challenges; we are growing and we are getting older. Many Canberrans are living with more chronic health conditions that impact on their ability to live their lives well. This, along with rising costs and increasing demand for health care, prioritises the importance of the safety, quality and experience of care.

Canberra is a wonderful city and in wanting Canberrans to be as healthy as possible, I acknowledge ACT Health's workforce in supporting the continual improvement of care and their importance in working collaboratively to achieve this strategy's ambition and aim. I look forward to continuing to work closely with our community, staff and health sector partners as the ACT Health Quality Strategy is implemented.

**Meegan Fitzharris MLA**Minister for Health and Wellbeing



### **EXECUTIVE SUMMARY**

ACT Health's Quality Strategy provides us with a framework through which improvement in services we offer to people can be focused and measured. To achieve this ACT Health will work on a portfolio of strategic priorities that will improve the safety and quality of care, reduce harm, variation and waste, improve patient experience and ensure the care that the community receives is evidence based and reliable.

This strategy is the result of an extensive staff and consumer engagement and consultation phase which has informed the strategic priority areas, making explicit our commitments through its adoption and implementation.

The Quality Strategy sets out how quality will be improved across the organisation and will build on work to date. It presents a shared understanding of quality, with a commitment to place safety and quality at the very centre of ACT Health and ensure that people are at the centre of everything we do. It sets down the guiding principles and strategic priority areas for the next two, five and ten years. It will support ACT Health to take a systematic approach to improving quality through:

- Understanding the meaning of quality
- Focusing on implementation of the Quality Strategy priorities
- Standardisation of practice making it easy to do the right thing
- Measuring quality
- Raising standards of care
- Recognising and rewarding quality
- Publishing quality performance information

The ultimate arbiters of quality are patients, families, consumers and their experience of care and health outcomes. We need to establish a common language and understanding about health care quality so we can work with our patients, families and consumers to improve the safety and quality of services. This strategy recognises the context of increasing demand and expectations, population and demographic changes and the organisational efficiency position that is also a significant driver for improving quality and reducing cost.

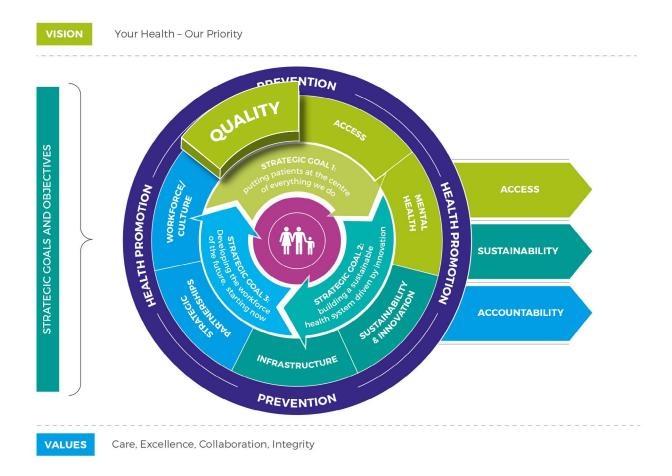
ACT Health will need to work across its health services to ensure integration of quality in the delivery of person-centred, safe, effective and high-quality care. Success of the strategy will be highly dependent on the necessary culture, leadership and behaviours that will manage and sustain the required changes. The efforts and actions of staff at all levels, both clinical and non-clinical are essential in achieving demonstrable improvement. Clinicians and other staff have been involved in developing this strategy and are committed to working together to support successful implementation.

#### THE STRATEGIC LANDSCAPE

The Quality Strategy needs to be viewed in the context of other ACT Health Strategies including the Workforce Strategy, Digital Health Strategy, Data Strategy and the Preventive Health Strategy. The ACT Health Territory-wide Health Services Framework sets out the overarching principles for integrating person-centred care to improve the health of Canberrans. The strategies further identify the activities required across the organisation to deliver on the development and redesign of health care services across the territory over the next decade.

#### **ACT HEALTH'S STRATEGIC PLAN**

Based on the best evidence-based delivery of publicly funded health services and input from key stakeholders across the care continuum, a Territory-wide Health Services Framework has been developed to anchor ACT Health's vision. This will provide the foundation for ACT Health to focus on person-centred care and to continue to build an innovative, high performing health system for the ACT. The framework is focused on integrating ACT Health services across three areas of health care – preventative health, community-based care, and care in hospital, with a key theme being Quality.



# **AMBITION, AIM & STRATEGIC PRIORITIES**

#### **QUALITY AMBITION**

ACT Health's quality ambition is to be a high performing health service that provides person-centred, safe and effective care.

#### ΔΙΜ

The Quality Strategy aims to deliver person-centred, safe, effective and efficient care.

#### STRATEGIC PRIORITIES

The priorities place people at the centre of everything we do, with an emphasis to continuously improve the safety, quality and experience of care and ensure the care that the community receives is evidence based and reliable. The co-design, consultation and engagement that has taken place in developing this strategy has resulted in the priority areas of:

- Strategic Priority 1: Person-centred Improve the experience of care
- Strategic Priority 2: Patient Safety Proactively seek a reduction in patient harm
- Strategic Priority 3: Effective Care Best evidence for every person, every time



# **QUALITY STRATEGY DRIVER DIAGRAM**



### STRATEGIC PRIORITIES

#### **Person-centred**

STRATEGIC PRIORITY 1

- A commitment to listening and acting
- Improve the experience of care
- Put the person at the centre of their care
- Listening to the patients'/ consumers views & experiences of care
- · Patient/consumer driven
- Engaged staff deliver person-centred care

#### STRATEGIC PRIORITY 2

#### Safe

- · Reduction in harm from:
  - > Sepsis
  - > Falls
  - > Medicines
  - > Pressure Injuries
  - > Hospital Acquired Infections (HAI)
  - > Hospital Acquired Complications (HACs)
  - > Overtreatment
  - > Adverse Events

#### STRATEGIC PRIORITY 3

#### **Effective**

- Evidenced based practice (EBP)
- Reduce avoidable readmissions
- Most suitable end of life care
- Effective communication and teamwork
- Efficient and standardised
   care
- Improve Handover/ Transition of care
- Early identification and care of patients with cognitive impairment

Development of an implementation plan and measurement framework



A Quality Strategy Implementation Plan and Measurement Framework will support us to implement our strategic priorities.



### STRATEGIC CASE FOR CHANGE

In developing this strategy we have taken into account the national drivers that support us putting safety and quality at the heart of everything we do to deliver the best possible care and outcomes. We have incorporated learning from many national and international reports into the safety and quality of care and the best national and international evidence base in informing and shaping its development.

The importance of a strategic approach to improving the safety and quality of care has been evidenced through numerous reports into failings throughout Australia, the United States of America and other international health care systems. In Australia, a system-wide focus on quality has been driven by a number of factors. Since the publication of the Quality in Australian Healthcare Study (1995), which identified a higher than expected number of hospital admissions were associated with adverse events, several factors have driven the system-wide focus on quality.

Over the last 10 -15 years it has been well recognised that health care can do better to reduce harm to patients. There is now a widespread acceptance and awareness of the need to improve the safety and quality of health care, however, significant levels of harm still exist, with research identifying at least 1 in 10 patients are harmed.

#### The national drivers include:

# The Australian Commission on Safety and Quality in Health Care

This is based upon the Australian Safety and Quality Framework for Health Care, developed by the Australian Commission on Safety and Quality in Health Care (the Commission). The primary aims of the National Safety and Quality Health Service Standards (the Standards) are to protect the public from harm and to improve the quality of health care. The Standards provide a nationally-consistent statement of the minimum level of care consumers can expect from health service organisations for quality assurance.

This strategy will build on the Standards and take a focused quality improvement approach to achieve demonstrable improvements in both the outcomes and processes of care.

# The Independent Hospital Pricing Authority

Nationally, the Independent Hospital Pricing Authority (IHPA) and the Commission have developed a range of funding models to support and encourage continued improvements in efficiency, the importance of improving safety and quality and reducing the cost of health care.

ACT Health is now required to monitor and report on Hospital-Acquired Complications (HACs) and sentinel events. Under an activity-based funding model, the funding level for all HACs across every hospital will be reduced to reflect the cost of a hospital admission with a complication. The Quality Strategy will focus on reducing HACs.

# WORKING TOGETHER TO IMPROVE QUALITY

#### **CO-DESIGN, CONSULTATION AND ENGAGEMENT**

The Quality Strategy has been developed following extensive staff and consumer engagement and consultation, using a co-design approach to influence and shape its development. We have provided a platform to understand what safety and quality means to each of us and the characteristics of delivering high quality and safe care. What matters and is important to patients, consumers and staff has informed the aim, priority areas, and enablers and have been incorporated into the strategy to support its successful implementation.

# We have taken the time to listen to our patients, staff and community about the things that matter to them.

The engagement and consultation approach included varied activities undertaken by ACT Health to ensure maximum engagement, providing various opportunities for consumers and staff to contribute to and shape the development of the Quality Strategy.

ACT Health worked with external consultants to ensure that as many staff as possible had an opportunity to contribute to and shape the development of the strategy.

ACT Health also asked the *Health Care Consumers' Association* (HCCA) to assist in the engagement with consumers, patients, families and carers. This process occurred through key informant interviews and focus groups undertaken with representation from consumers, carers, and community organisations. In addition, the HCCA drew on responses to an online survey from the broader Canberra community and comments posted on social media.

The information and data collected during the co-design and consultation phase was evaluated with the most common safety and quality priority areas and organisational enablers identified, themed and analysed.

In November 2017 a forum of leaders within ACT Health and consumers was held to talk about what we had learned and to share the findings, themes, priority areas and enablers.

#### Your voices were included

- Patients
- Families
- Carers
- Consumers
- 1646 (22%) ACT Health staff, both clinical and non-clinical participated directly
- Views from the Canberra community through online engagement



### WHAT WE HEARD

We engaged with patients, their carers, our community and staff in the development of the Quality Strategy and listened to what they said.

We will focus on ensuring the best experience of care with the person at the centre of their care.

#### **STRATEGIC PRIORITY 1: PERSON-CENTRED**

#### IMPROVE THE EXPERIENCE OF CARE

Person-centred care is a way of thinking and doing things that sees health care users as equal partners in planning, delivering and monitoring the improvement of safe, quality care that meets their needs. This means putting people and their families at the centre of decisions and seeing them as experts, working alongside health professionals to achieve the best outcomes. By shifting the culture from "doing to" to "doing with" significant clinical and financial improvements can be made.

Making sure people are involved in and central to their care is now recognised as a key component of delivering high-quality health care. The term "patient experience" is frequently used to describe a person's experience when accessing health care services. It has been demonstrated to improve where an organisation is committed to delivering person-centred care.

#### Staff identified

- High quality and safe care.
- Shared decision-making with patients and carers was valued.
- Patients should understand the available treatment options.
- Involve the patient in informed decisions about recommended interventions.
- Leadership that provides clarity and direction and support them to work together towards person-centred care.

#### **Consumers identified**

- Receiving good care centred to their needs.
- Involvement in care, decisions, and acknowledgment and respect for preferences.
- Coordination, continuity of care, safe transfers and transitions of care.
- Clear, comprehensive information and support for self-care.
- To be understood and treated with empathy.
- Involved in safety and quality improvement activities.
- Staff to go the extra mile to make a human connection.

# STRATEGIC PRIORITY 2: PATIENT SAFETY PROACTIVELY SEEK A REDUCTION IN PATIENT HARM

Our first obligation is to ensure that by coming into our care, we make every effort to keep them safe and the risk of harm to patients is reduced.

Patient safety is our highest priority and we will work relentlessly to proactively seek a reduction in patient harm. This includes health care adverse events that have a negative effect on care, even if not negative or harmful to the patient. We will strive for:

- No avoidable harm
- Avoidance of and a reduction in adverse events
- Reducing hospital-acquired complications
- Learning from incidents and reducing the risk of reoccurrence
- Creating a culture of psychological safety

# Staff identified patient safety concerns relevant to their areas of work

- Maintain and improve hand hygiene and reduce harm from infections.
- Patient falls risks and putting plans in place to prevent and reduce harm from falls.
- Correct patient identification for medication safety, reducing the risk of adverse outcomes.
- Improved knowledge of the physiology of pressure injury formation and identification of high risk patients to reduce harm.
- Sepsis would benefit from a systems approach.
- Recognising deteriorating patients and ensuringan appropriate response.

#### Consumers told us they value

- Staff respond quickly to a patient's needs when there is a clinical event.
- Consumer feedback is valued and used to make improvements.
- They are listened too.
- Staff work as a team and recognise the role that the family plays.
- Information is shared between the care team, patient, consumer and family.
- Having a competent care team that has communicated with each other.
- Not suffering from unintentional preventable harm, like acquiring a hospital infection, falling or having a medication error.
- The incoming clinicians know their story and history at handover.
- There are systems in place to identify when things have gone wrong and processes to learn from this.



# STRATEGIC PRIORITY 3: EFFECTIVE CARE BEST EVIDENCE, FOR EVERY PERSON EVERY TIME

An effective health care system is one that promotes and supports evidence-based, effective and reliable care provision. There should be no variation in the quality of care, which should be provided in an atmosphere of mutual trust where staff members can talk freely about safety problems and how to solve them. The safety and quality of care has been found to be seriously compromised during transitions of care where patients are moved between health professionals and clinical settings and where management and treatment plans are not effectively communicated.

# Staff told us they believed they provided effective care when

- Communication is effective between patients, their families and clinicians across the patient journey and continuum of care.
- Improving clinical handover across a range of health care settings.
- Involving the patient/family in clinical decision making.

#### Consumers told us

- The workforce needs to be well trained and supportive.
- They value having a comfortable physical experience and a healing atmosphere.
- Accessing care needs to be easy for them.

# OUR FOCUS ON THE STRATEGIC PRIORITIES

A *Quality Strategy Implementation Plan and Measurement Framework* is currently under development and will be finalised in the second quarter of 2018. Once the implementation plan and measurement framework is developed, base line data will be collated to inform the specific percentages for improvements for each priority. Two, five and ten year milestones will be developed to ensure the strategy is implemented and that there is a committment and accountability to its priorities. This will be presented to the ACT Health Executive Directors Council for Safety and Quality for discussion and confirmation prior to the launch of the improvement collaborative as part of the implementation phase.

STRATEGIC PRIORITY 1	STRATEGIC PRIORITY 2	STRATEGIC PRIORITY 3
PERSON-CENTRED	SAFE	EFFECTIVE
<ul> <li>Reduction in number of complaints and increase in number of compliments.</li> <li>Increase in hospital experience survey results ensuring that people have a positive experience of care.</li> <li>Analysing, theming and using consumer feedback and complaints to inform learning and improvement.</li> <li>Implement an Always Events®Approach¹.</li> <li>Use experience based design techniques and co design with services and patients.</li> <li>Improved outcomes – Patient Reported Outcome Measures (PROMs).</li> <li>Improved information and communication with patients and carers to support shared decision making.</li> <li>Patient, family and consumer involvement.</li> <li>Develop a Person-centred training programme for staff.</li> </ul>	<ul> <li>No preventable deaths.</li> <li>Reduction in sepsis mortality.</li> <li>Reduction in Suicide.</li> <li>Reduction in falls.</li> <li>Reduction in hospital-acquired complications (HACs).</li> <li>Reduction in infection rates.</li> <li>A reduction in Medication Errors.</li> <li>Medication reconciliation on admission, transfer and discharge.</li> </ul>	<ul> <li>Achieve the highest level of reliability of clinical care.</li> <li>Evidence based care – enhance the consistency of care.</li> <li>Reduce avoidable readmissions.</li> <li>Seek out and reduce variation in practice - measure against best practice and evidence.</li> <li>Improve the identification and care of patients with cognitive impairment that are over 65 years of age.</li> <li>Focus on improving End of Life Care – ensuring patients have a good death.</li> <li>Effective communication and teamwork.</li> <li>Effective and Safe Handovers and transitions of care.</li> </ul>

<sup>1</sup> Always Events®, are defined as those aspects of the care experience that should always occur when patients, their family members or other care partners, and service users interact with health care professionals and the health care delivery system (initially conceived in the US by the Picker Institute and now led by the Institute for Healthcare Improvement (IHI)).



These priorities are intended to improve the safety and quality of care in the organisation and will be pursued through coordinated actions and measurements.

#### **ENABLERS**

The Quality Strategy will need to be owned by everyone in ACT Health with recognition that quality should be at the heart of everything we do. It will require Executive, Management and Clinical leadership and other service providers to be focused on and inspired by its ambition to be a high performing organisation that provides person-centred, safe, effective and efficient care. The following four enablers will help us to create the conditions to support successful implementation of the Quality Strategy:

- Enabler 1: Culture and Leadership
- Enabler 2: Communication and Engagement
- Enabler 3: Continuous Improvement and Innovation
- Enabler 4: Quality Improvement Measurement

#### **ENABLER 1**

#### CULTURE AND LEADERSHIP - DEVELOPING A QUALITY CULTURE

Developing an organisational culture in which quality is a shared value central to clinical work that underlies all aspects of the organisation's activities is a major enabler. Our focus must be on how we can create a culture where every member of staff provides person-centred, safe high quality care for every person every time. In setting the scene for a safety culture, activities need to be acknowledged as being at risk of error and incidents. Staff need to be supported to freely communicate their concerns, either identifying a risk or uncovering an error.

Integral to continual quality improvement is the development of a respectful, transparent and just culture within which health care providers and others can report safety incidents without fear of blame. The organisational culture needs to encourage and support reflective practice, learning from experience, use and dissemination of knowledge, partnerships with stakeholders and effective leadership in order to enable systematic improvement in service quality.

#### THE COMMITMENT OF LEADERSHIP TO SAFETY AND QUALITY

Leadership is a critical element in successful safety and quality improvement programs and is non-delegable. Only senior leaders can productively direct efforts in health care to foster the culture and commitment required to address the underlying system causes of error in health care provision, reduce harm to patients and focus endeavours on improving the quality of care.

ACT Health has reviewed its safety management approach and will be implementing a strategic plan for safety incident investigation and management. This plan will include benefits of reporting, the redesign of the incident reporting system to maximise safety lessons learnt, the process of feedback to the reporter, and the importance of developing a strong incident reporting culture.

Frontline staff view reporting as a credible activity that will support changes that can keep patients safe. Engaging with staff who take the time to report errors can address both the specific safety issue raised and confirm the importance of patient safety as a priority of the organisation. Staff identified the importance of the feedback loop and devoting time to follow through on patient safety issues that could be improved. Patient and consumer involvement in safety initiatives provides another layer of protection against adverse events.

#### **ENABLER 2- COMMUNICATION AND ENGAGEMENT**

Building the will for the implementation of the Quality Strategy requires a genuine culture change in ACT Health. The safety and quality of care should be everyone's highest priority and a fundamental part of every employee's role, with leaders at every level of the system understanding and championing a culture of safety and quality. Executive, managerial and clinical engagement and ownership are crucial elements to support the successful testing, implementation and spread of patient safety and quality improvements. Communication about the importance of safety and quality must be well conceived and consistently repeated across the entire organisation. In communication with managers, clinicians, employees and patients, we shall stress that safety problems are quality problems and that all staff must be involved in identifying deficiencies in current care delivery processes and in designing and implementing solutions needed to create safe and high-quality care systems and processes.

Staff believe that communication with patients, families and carers is essential to the delivery of person-centred, safe and effective care. Creating an environment where clients and their families feel confident and safe to ask questions and express concerns (e.g. ensuring they are fully understood) are the top most desired outcomes of effective communication.

An organisational commitment to improve "Health Literacy" is required to help people understand information about health and health care, and how they apply that information to their lives, and use it to make decisions. The concept of Health Literacy is important because it shapes people's health and the safety and quality of their health care.

#### **ENABLER 3 - CONTINUOUS IMPROVEMENT AND INNOVATION**

#### **BUILDING QUALITY IMPROVEMENT CAPABILITY**

The ability of ACT Health to deliver on this strategy's implementation depends on the ability of staff to engage with improvement methodology and techniques and to test and implement the changes recognised to achieve and measure improvements. Building organisational capacity for patient safety and quality improvement is a crucial element in building a sustainable infrastructure and realising the aims of the Quality Strategy and ACT Health's other strategic goals.

#### STRATEGIC GOVERNANCE

The ACT Health, Executive Directors Council Safety and Quality will lead the delivery of the strategic priorities that have been identified through the development of the Quality Strategy. An implementation plan will be developed and monitored through this governance framework, along with the endorsed measurement framework to support the outcomes.

#### **ENABLER 4 - QUALITY IMPROVEMENT MEASUREMENT**

Measurement is a vital part of improvement – if we do not measure we have no way of knowing if the changes or intended improvements have had any impact.

#### Measurement is a fundamental to answer: "How do we know that a change is an improvement?"

We recognise that our measurement of quality needs to be varied in order to triangulate measurement of the safety, effectiveness and experience users have of our services.

The collection and use of patient-reported outcome measures (PROMs) in Australian health care are questionnaires which patients complete. They ask for the patient's assessment of how health services and interventions have, over time, affected their quality of life, daily functioning, symptom severity, and other dimensions of health which only patients can know. PROMs promise to fill a vital gap in our knowledge about outcomes and about whether health care interventions actually make a difference to people's lives. ACT Health is committed to integrating PROMs into the Quality Strategy Measurement Framework.

### **ENABLERS FOR IMPLEMENTATION**

To enable staff to deliver on safety and quality, conditions need to be created to support staff and every team to engage successfully in quality improvement. This is underpinned by effective teamwork. Measurable quality actions in the implementation plan will include the commitment of leaders to provide effective, supportive and responsive governance and assurance systems. The workforce of our health service is a prized asset. Good health and wellbeing of our staff will enable them to deliver person-centred, safe, effective and efficient care in practice.

ENABLER 1	ENABLER 2	ENABLER 3	ENABLER 4
CULTURE AND LEADERSHIP	COMMUNICATION	CONTINUOUS IMPROVEMENT AND INNOVATION	QUALITY IMPROVEMENT MEASUREMENT
<ul> <li>A culture built on continuous improvement where improving the quality of care is everyone's business.</li> <li>Outstanding leadership support and attention to safety and quality.</li> <li>Effective team work – high performing teams.</li> <li>Fair and just culture avoiding a culture of blame to facilitate learning and improve reporting.</li> <li>Implement a Programme of Patient Safety Leadership WalkRounds™.</li> <li>A learning system and organisation that is committed to transparency and learning from incidents and near misses.</li> <li>Supporting staff and patients when things go wrong.</li> <li>Engaged and capable Executives, Managers and Clinicians.</li> <li>Implement a plan to recognise and reward quality performance and celebrate success.</li> </ul>	<ul> <li>Performance feedback system</li> <li>All units involve consumers/patients and families in safe handover and transitions of care.</li> <li>Improvement in quality and timeliness of discharge summaries.</li> <li>Consumers and families are listened to and supported to ask questions about their care.</li> <li>Clinical staff are supported to develop skills in shared decision making.</li> <li>Culture of open communication</li> </ul>	<ul> <li>Build capacity and capability in safety and quality improvement.</li> <li>Develop a skilled workforce to improve the safety and quality of care.</li> <li>Develop and implement programmes of bespoke training in safety and quality.</li> <li>Develop and implementation of an Improvement Academy.</li> <li>Support staff to attend collaborative learning sessions and development opportunities</li> <li>Build a cadre of leaders in safety and quality.</li> <li>Provide a programme of support to staff to coach and advise them to test and implement changes as they relate to implementation of the Strategy.</li> <li>Realise innovation through practice.</li> </ul>	<ul> <li>Development and implementation of the Quality Strategy Measurement Framework.</li> <li>Real time safety and quality data and measurement for improvement.</li> <li>Embed safety and quality performance measures at all levels of the system.</li> <li>Work with consumers and carers to develop a public report that meets their information needs relating to quality and safety of health services.</li> <li>Celebrate achievements and improvements in standards of care.</li> <li>Publish performance information and improvement in standards of care.</li> <li>Evaluate care.</li> <li>Align measurement to The Digital Health Strategy.</li> </ul>

<sup>2</sup> Patient Safety Leadership WalkRounds are a recognised intervention to support organisations to build a culture of safety through Senior Leaders participating in a structured programme of visits (Institute for Healthcare Improvement (IHI)).



These enablers create the conditions that support successful implementation of the Quality Strategy.

#### **EXEMPLAR SAFETY AND QUALITY JOURNEY**

#### **HOME**



John is a 76 year old man who lives at home with his partner.



John feels very unwell, has a high temperature and his partner Anne is concerned that he is not behaving normally and is exhibiting unusual behaviours, with confusion and aggression. Anne takes him to the General Practitioner, who after assessment, advised that John present to hospital.

#### HOSPITAL- EMERGENCY DEPARTMENT

Sepsis is a major cause of morbidity and mortality. It contributes to between one third and one half of all deaths<sup>3</sup>.



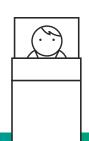
On arrival in the Emergency Department (ED) John is assessed as being septic, resulting in delirium. John receives his first dose of intravenous antibiotics within 60 minutes of sepsis recognition.



As the staff in the ED understand the evidence base for the treatment for sepsis and the benefits to patients receiving early antibiotics, the Sepsis Bundle is commenced. The ED measure their sepsis mortality.

Early diagnosis and prompt treatment is essential as each hour's delay in administering antibiotics increases John's risk of death by 8%<sup>4</sup>.

#### **HOSPITAL - WARD**



John is transferred to the inpatient ward for ongoing management of his sepsis and his delirium.

The ward nurse completes a full risk assessment with John and with Anne present.

John is identified as being at risk of a fall and a care plan is put in place with a Falls Bundle commenced:

- Cognitive impairment
- Lying and standing Blood Pressure
- A medication review
- Information regarding falls risks, prevention and interventions are discussed with John and Anne, inclusive of appropriate foot wear
- Relevant interventions are put in place to prevent falls such a placement of the nurse call bell for John.

#### **HOME**



John and Anne's support needs were discussed during his hospital stay and supports required at home identified. The day before John is discharged home, a safe discharge information pack is prepared. Medication reconciliation, including a comprehensive easy to understand discharge summary for his general practitioner, confirming follow-up appointments, patient information for medications and contact details for local community resources were prepared.

<sup>3</sup> https://www.australiansepsisnetwork.net.au/healthcare-providers/sepsis-epidemiology

<sup>4</sup> https://www.australiansepsisnetwork.net.au/healthcare-providers/sepsis-epidemiology



ACT Health would like to acknowledge the invaluable contribution of many individuals and those that supported the development of the Quality Strategy:

- Jane Murkin, Deputy Director General, the Division of Quality, Governance and Risk, who led the design and development of the strategy on behalf of the Director General, Nicole Feely
- The ACT Health staff who participated in the co-design and engagement activities and contributed to its development.
- The Health Care Consumers Association (HCCA) and the many consumers and carers who gave their time to the HCCA.
- The patients and families who shared their stories about their care.
- The facilitation of design events by ThinkPlace.

#### Staff from the Division of Quality Governance and Risk:

- Liz Sharpe Director Strategic Projects
- Heather Needham Patient Experience Leader
- Louise Botha Project Co-ordinator ACT Health Quality Strategy

