



CREATING A HEALTHIER STATE FOR EVERYBODY.

STRATEGIC QUALITY PLAN

A dark blue background featuring a faint, grid-like map of the world. The continent of Australia is highlighted in a slightly lighter shade of blue. A white curved arrow starts from the left side of the page and points towards the highlighted Australia.

• WESTERN AUSTRALIA 1998/9 - 2002/3

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Strategic Quality Plan

Western Australia

1998/9 - 2002/3



FOREWORD

The Western Australian Government, through its partnership with the Commonwealth under the Australian Health Care Agreement, has identified a number of strategic initiatives that will provide the framework for continual quality improvement of the State hospital system.

While there are many initiatives which aim to improve the quality of health care at the operational level, there has always been a need for a strategic plan to provide a perspective on and context for quality improvement activities in the Western Australian health system.

The Strategic Quality Plan has been developed to provide a Statewide planning perspective for monitoring and managing the quality of health care in both metropolitan and rural hospitals.

The plan recognises the important role that everyone in the health system has in improving the quality of health care in Western Australia; including the consumers, health care practitioners and managers, the metropolitan and rural health service boards, and the Health Department of Western Australia.



Alan Bansemer

COMMISSIONER OF HEALTH



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EXECUTIVE SUMMARY

The Western Australian Government has a strong commitment to the provision of high quality public hospital and other health care services. The Government is striving to ensure that it provides an integrated health service that strongly encourages evidence based clinical care and is responsive to consumer needs.

The State Government's aim to improve quality will be enhanced through a partnership with the Commonwealth under the Australian Health Care Agreement. Under the Agreement the Commonwealth will provide funding over five years (1998-2003) for initiatives to improve quality. The terms of the Agreement require the State to develop a "strategic quality plan" to provide a vision for quality improvement within the public hospital system.

This document is the Strategic Quality Plan for Western Australia. It was developed within the context of national and existing State initiatives in quality improvement. It builds on the areas of agreement reached at the Commonwealth/State level, where seven strategic initiatives were identified. Work in related areas including organisational performance, key performance indicators and risk management, developed within the Western Australian health system, are also included.

The purpose of the Strategic Quality Plan is to assist in further development of a health care system that is focused on consumer needs, and which strives for continuous improvement in all aspects. It is a model that will strengthen consumer involvement in areas of planning, delivery, monitoring and evaluation of health services. It will also enhance innovation; foster clinical best practice and risk management to ensure safety and quality in health care. Organisational systems that support a culture of accountability for quality within clinical and non-clinical services will be developed as part of this Plan.

This Plan adopts a framework that promotes leadership as the underlying driver of quality improvement. Responsibility for this leadership has to be understood, accepted and implemented by staff at all levels. Moreover, the framework presents quality improvement as a continuum, commencing with the goal of attaining minimum standards and moving towards a model of strategic organisational development.

The Western Australian Strategic Quality Plan focuses on the seven initiatives agreed between the Commonwealth and the States/Territories, and two further initiatives (Risk Management and Supporting Health Workforce Development) developed by Western Australia. In total, this program of nine interrelated strategic initiatives are grouped into four major areas:

- **Patients / Clients / Consumers**

1. Proposed strategies will strengthen the consumer voice by facilitating their involvement in service planning, delivery, monitoring and evaluation.

- **Organisational Change and Development**

2. Clinical best practice will be expanded to incorporate an integrated and comprehensive system of programs and strategies to advance clinical service delivery.
3. Innovation will be enhanced through strategies that encourage people at all levels to participate in service delivery improvements.
4. Risk management will be enhanced through dedicated risk management programs to improve service delivery.
5. The health workforce will be developed through systematic education and training programs to support quality improvement strategies and engender a culture that accepts, understands and implements the quality improvement initiatives.

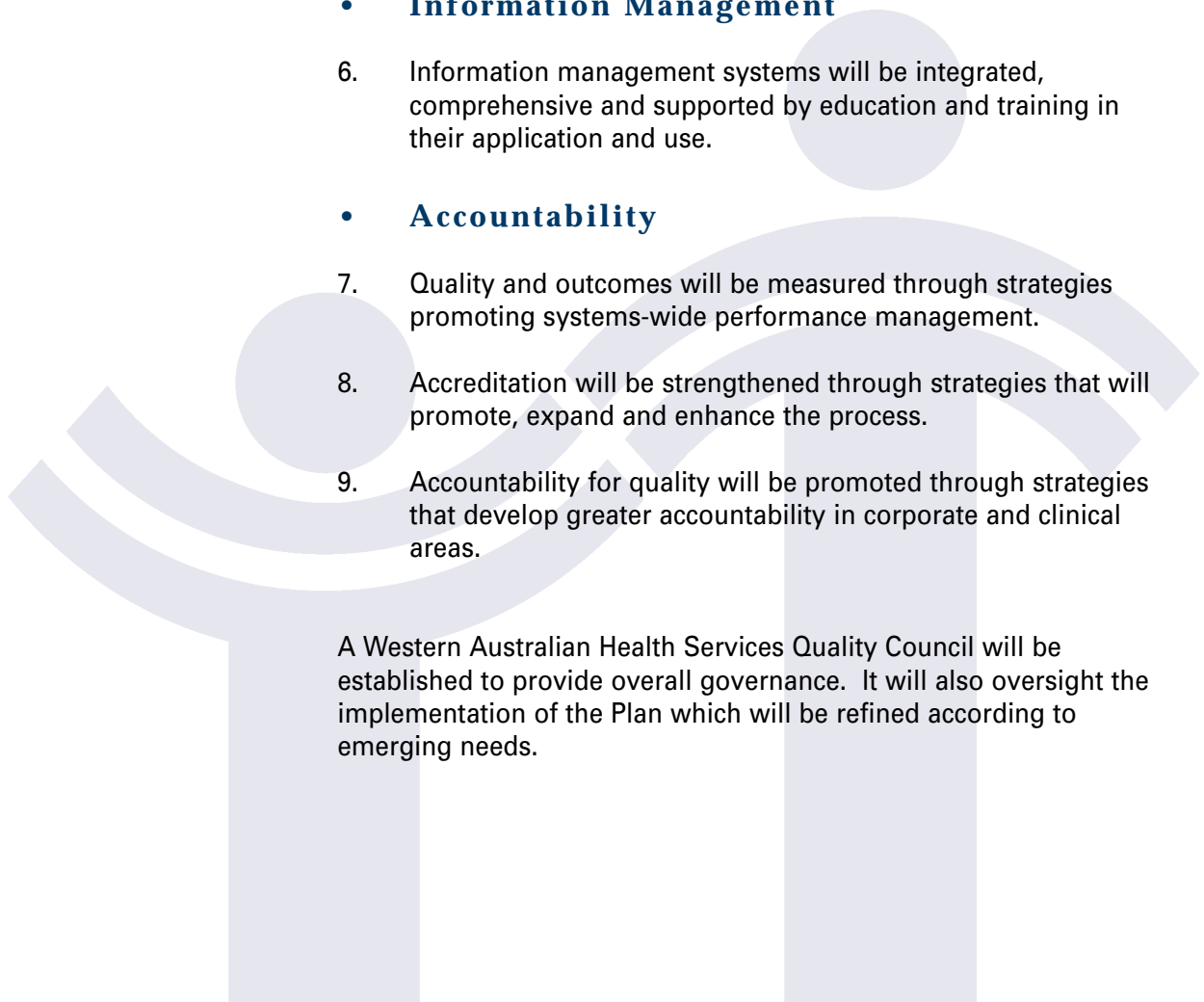
- **Information Management**

6. Information management systems will be integrated, comprehensive and supported by education and training in their application and use.

- **Accountability**

7. Quality and outcomes will be measured through strategies promoting systems-wide performance management.
8. Accreditation will be strengthened through strategies that will promote, expand and enhance the process.
9. Accountability for quality will be promoted through strategies that develop greater accountability in corporate and clinical areas.

A Western Australian Health Services Quality Council will be established to provide overall governance. It will also oversight the implementation of the Plan which will be refined according to emerging needs.



INTRODUCTION

The Western Australian Government has a strong commitment to the provision of high quality public hospital services within the State. The Government is striving to ensure that it provides an integrated health service that strongly encourages clinical best practice, based on established scientific evidence, and is responsive to consumer needs.

In addition to the State Government's commitment, the Commonwealth Government has indicated its intention to increase the focus on quality improvement in the nation's public hospital system, with the provision of funds under the Australian Health Care Agreement¹. Under this Agreement the Commonwealth Government has dedicated funding to Western Australia over the five years (1998/99-2002/03) of the Agreement. This funding is part of the overall vision of the Commonwealth to encourage the States and Territories to enhance the safety and quality of care provided within the Australian public hospital system.

In order that these monies enhance the area of public hospital quality and safety, the Health Care Agreement requires that:

- *The State Minister and the Commonwealth Minister will jointly agree, in the first grant year of the Agreement, a Strategic Plan to advance quality improvement and enhancement of public hospital services during the term of this Agreement; and*
- *the Commonwealth and Western Australia will jointly review progress under the Plan during the 2000-01 financial year².*

BACKGROUND - OTHER NATIONAL DEVELOPMENTS

There is currently considerable action nationally in relation to the quality of health care. According to the interim report by the National Expert Advisory Group on Safety and Quality in Australian Health Care (NEAG)³, April 1998, the level of safety and quality in Australian hospitals and community based services, is generally of a high standard. Indeed, there is an existing pool of clinical expertise in quality and involvement of health care organisations, with a variety of quality initiatives currently being undertaken. The report acknowledges the fact that whilst it is important to maintain the best of the existing system, it is also essential to focus on the areas that require improvement and enhancement.

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- 1 Australian Health Care Agreement between the Commonwealth of Australia and the State of Western Australia, 1998.
 - 2 Australian Health Care Agreement, op cit, Clauses 29, 30.
 - 3 National Expert Advisory Group on Safety and Quality in Australian Health Care. *Interim Report*, April 1998.

The work of NEAG represents a national commitment by Australian Health Ministers to examine issues relating to quality. It also represents a tangible response to the findings of the Taskforce on Quality in Australian Health Care⁴. The report of the Taskforce outlines an extensive analysis on safety and quality and presents a range of recommendations focusing on all elements of the health care system in Australia. NEAG has commissioned further analyses of the available data and has continued the work to examine ways to improve the safety and quality of the Australian health care system.

The interim report by NEAG recommended five key action areas to be targeted⁵. These relate to:

1. Providing appropriate and accessible consumer health information.
2. Providing better frameworks for health care organisations to manage quality of care through their organisation.
3. Improving systems for self-assessment and peer review by all clinical service providers.
4. Encouraging learned colleges, professional associations, and medical and nursing administrators to actively ensure quality performance through ongoing certification programs.
5. Strengthening the quality focus of organisational accreditation processes through requiring organisations to demonstrate mechanisms for quality enhancement.

The funding provided through the Australian Health Care Agreement will assist States and Territories to further pursue their own vision for quality improvement, as well as achieve progress in relation to the key actions identified by NEAG.

SCOPE OF THE STRATEGIC QUALITY PLAN

The primary focus of this Plan is to address quality within the State hospital system, specifically, acute care hospital services. In addition, as hospitals operate as an integral part of a wider health care system, those services at the interface between the hospital and the wider health system (eg discharge planning processes) are also included within the scope of this Strategic Plan.

LEGISLATIVE FRAMEWORK

The Health Services (Quality Improvement) Act 1994⁶ in Western Australia provides for the approval and protection of quality improvement committees reviewing, assessing and monitoring the quality of health services.

4 *The final report of the Taskforce on quality in Australian health care*, Australian Government Publishing Service, Canberra, June 1996.

5 National Expert Advisory Group, *op cit*, p.i.

6 Health Services (*Quality Improvement*) Act 1994.

The Act and its associated Regulations⁷ describe quality improvement as an approach to the measurement of quality in health care which moves away from the traditional 'quality assurance' method⁸ to a process of continuous quality improvement. Quality is essentially consumer focused and defined jointly by the health service provider and by the consumer. Quality improvement also concentrates on the evaluation and continuous improvement of key processes within health care systems. It is proactive to the extent that adverse events are minimised with a focus on enhancement of services and products, rather than merely on correction.

ORGANISATIONAL FRAMEWORK

The Health Department of Western Australia, which is the State's principal health authority, provides overall strategic direction for health in Western Australia. The Health Department, under the Commissioner of Health, is responsible to the Minister for Health to ensure the effective and efficient management of public sector health services. Its core business activities include corporate governance; policy development and ministerial advice; fund acquisition and acquittal; planning; system-wide health information; health services purchasing; strategic workforce planning; monitoring and evaluation; and regulatory requirements⁹.

Boards of management have overall responsibility for managing publicly funded health services. The Metropolitan Health Service Board (MHSB) brings together all publicly funded health services within the metropolitan area under a single authority. Country health services are served by their local boards of management. These Boards are responsible for policy implementation, delivery of services according to contract, management of organisational assets, and reporting against key performance indicators.

DEVELOPMENT OF THE STRATEGIC QUALITY PLAN

The Strategic Quality Plan was developed by a committee that included representatives from acute hospital services, the Health Consumers' Council and the Health Department of Western Australia. A process of consultation with metropolitan and country quality improvement personnel provided valuable input into the development of the Plan from the outset. Importantly, this consultation should ensure that the plan is relevant to their situation and thus assist in its implementation.

7 Health Services (*Quality Improvement*) Regulations 1995.

8 Definition of quality improvement as per the Health Services (*Quality Improvement*) Act 1994 and Health Services (*Quality Improvement*) Regulations 1995 Guidelines, Health Department of Western Australia.

9 Health Department of Western Australian Annual Report, 1997/1998.

The Plan builds on the areas of agreement reached between the Commonwealth and the States, where seven strategic initiatives were identified. Work in related areas including organisational performance, key performance indicators and risk management, developed within the Western Australia health system were also included.

The Plan was also influenced by the interim report from NEAG¹⁰ with its recommendations on the five key action areas. Moreover, the Health Department organised a Quality Enhancement in Health Care Symposium¹¹, which provided a forum for the wider health community to discuss the issues raised by NEAG in its interim report.

Other contributing factors included international initiatives on quality, for example, the National Health Service Report¹² in the United Kingdom and the final report by the President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry¹³ in the United States.

THE WESTERN AUSTRALIAN STRATEGIC QUALITY PLAN

This document outlines the shared vision for quality of the Western Australian public hospital system. It records a set of aims, objectives, strategies and outcomes for nine major strategic initiatives to enhance quality and safety within the State for the life of the Health Care Agreement.

VISION

A health care system that is focused on consumers' needs and strives for continuous improvement in all areas.

FRAMEWORK FOR THE STRATEGIC PLAN AND STRATEGIC INITIATIVES

This Plan will focus on the seven strategic initiatives that Western Australia and the Commonwealth have agreed and two further initiatives (Risk Management and Supporting Health Workforce Development) developed by Western Australia. In total, these nine strategic initiatives are clustered into four interlinked major areas to advance quality in the Western Australian health care system. These components, together with a conceptual outline of the Western Australian Strategic Quality Plan, are shown on page 7.

10 National Expert Advisory Group, op cit, p.i.

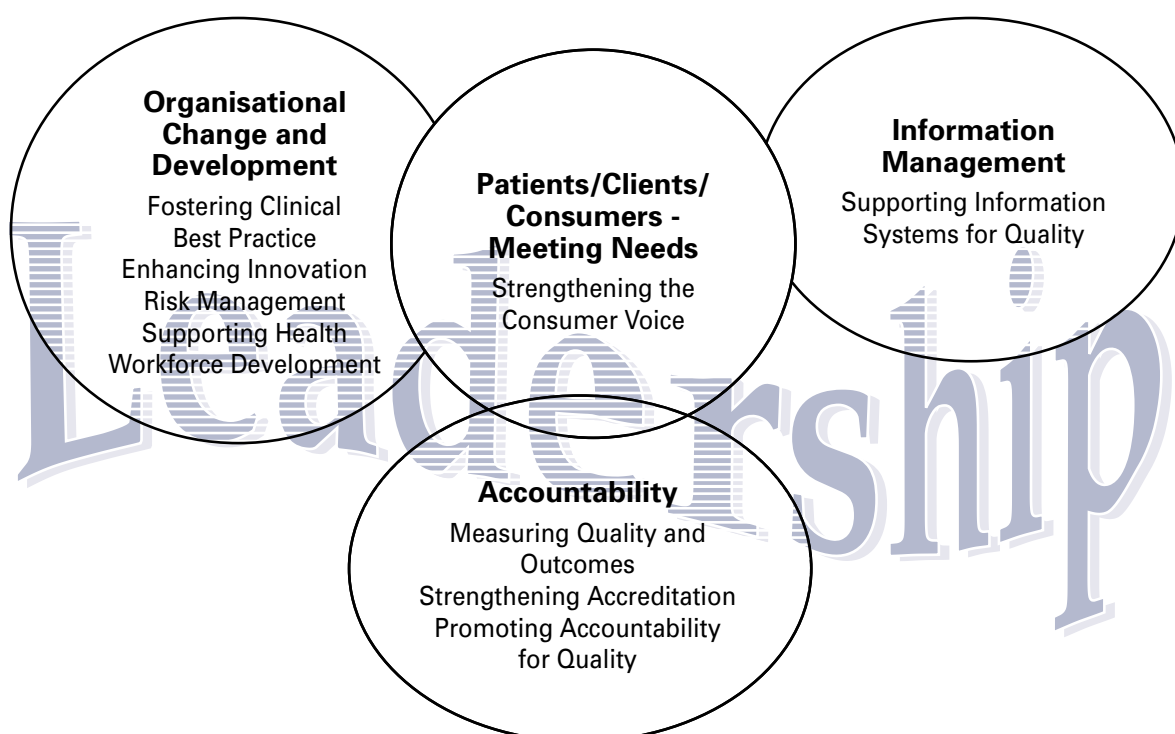
11 Quality in Health Care Symposium, Perth, Western Australia, 17 February, 1999.

12 Department of Health The new NHS *A First Class Service: Quality in the new NHS* December, 1997.

13 President's Advisory Commission report *Quality First: Better Health Care for all Americans* March, 1998.

AREA OF FOCUS	STRATEGIC INITIATIVE
Patients/Clients/Consumers-Meeting Needs	1. Strengthening the Consumer Voice
Organisational Change and Development	2. Fostering Clinical Best Practice 3. Enhancing Innovation 4. Risk Management 5. Supporting Health Workforce Development
Information Management	6. Supporting Information Systems for Quality
Accountability	7. Measuring Quality and Outcomes 8. Strengthening Accreditation 9. Promoting Accountability for Quality

CONCEPTUAL FRAMEWORK FOR QUALITY



FRAMEWORK DEFINITION

The conceptual framework embraces an expansive definition of quality improvement and incorporates the description provided by the Health Services (Quality Improvement) Act 1994¹⁴.

The framework involves the concept that leaders at all levels communicate a vision for the future through people using a number of processes and strategies. This vision is made real by people at the local level who lead the way in its various forms of implementation. The vision and its program of implementation is continuously evaluated and enhanced by remaining consumer focused; formulating decisions on input from research and data; adopting an approach that includes accountability at all levels and fostering a culture of continuous improvement. This framework is systematic, dynamic and engenders the view that leadership, at all levels, is the underlying driver of continuous improvement in quality.

It also adopts the view that quality may be seen within a continuum, commencing with the goal of attaining minimum standards at one end and moving towards a model of strategic organisational development at the other. This concept is formulated on the basis that the health care environment is dynamic, involving complex interactions between consumers, the community, the health care workforce and the health system infrastructure. Minimum standards are necessary for the health service to operate safely, however, the goal of organisations in relation to quality is to strive towards an organisational learning capacity. Each of the nine strategic initiatives may be seen to have this continuum of quality.

GUIDING PRINCIPLES

Supporting the four major areas of strategic focus is a set of principles that demonstrate a commitment to best practice and guide the application of the strategic initiatives at the local service level.

These principles can be articulated as:

Access to health services that are committed to the application of best practice approaches to the provision of patient care.

This is provided on a needs basis, regardless of age, gender, ethnicity, religion, health insurance status and socio-economic status.

Health services are also committed to the provision of readily accessible consumer health information.

Efficiency and Effectiveness of service provision. Health services are committed to the rational use of resource inputs to produce a service or output, as well as the attainment of stated outcomes.

14 Health Services (*Quality Improvement*) Act 1994 and Health Services (*Quality Improvement*) Regulations 1995 Guidelines, Health Department of Western Australia op cit section 2.

Reproducibility of clinical care that is evidence-based, meets minimum standards and has the potential of being reproduced when required in other comparable settings.

Safety of patients and staff as a major objective of health services as is an approach based on **Prevention** of adverse events. There is a commitment to risk management that facilitates a proactive approach to maintain safety and prevent adverse incidents.

Appropriateness of care tailored to meet individual needs. Health services are committed to the provision of clinical care identified as beneficial and relevant for the individual.

Participation of Consumers/Providers/Employees to ensure that health services are aware of their needs and modify and develop services accordingly. Health services are committed to strengthening pathways for consumers and people with special needs to influence areas of health service planning, delivery, monitoring and evaluation.

GOVERNANCE

A Western Australian Health Services Quality Council will be established to provide overall guidance at a macro level. The implementation of the Strategic Quality Plan will be influenced by this Council. The Council will oversee a system-wide perspective on quality and will use the Plan as a guide for overall direction for the future. The Plan is a dynamic document, which is subject to further development according to emerging needs.

PROGRAM OF STRATEGIC INITIATIVES

• PATIENTS / CLIENTS / CONSUMERS - MEETING NEEDS

The views of patients and consumers of health care services are considered essential in health service planning, delivery, monitoring and evaluation. As a result, their involvement should be strengthened to address the identified paucity of current consumer input¹⁵. Consumer input needs to be wide ranging, with special consideration given to minority and special needs groups¹⁶. Consumer participation in health care services must be meaningful, with their concerns being addressed and their feedback used to enhance service delivery practices^{17 18}.

15 Taskforce Report op cit p.31.

16 *National Expert Advisory Group Interim Report*, op cit p. 7.

17 Consumer Health Forum of Australia Inc. Report identified a number of key performance issues for consumers. These included issues on access, treatment effectiveness, communication and participation, care, continuity of care, human needs and service efficiency.

18 Consumer Focus Collaboration Strategic Plan 1997/8 - 2000/01, August, 1998 outlines strategies for strengthening consumer focus in health service delivery.

Strategic Initiative 1: Strengthening the Consumer Voice

A way forward to strengthening consumer involvement, and allowing feedback to influence all aspects of service delivery will be to provide appropriate and accessible health information. Consumers will also play an active role in the planning, delivery, monitoring and evaluation of health care within all spheres of the health system. Education and training for health care providers will focus on supporting active consumer involvement and finally, health services will strengthen mechanisms for improving accountability to consumers.

• ORGANISATIONAL CHANGE AND DEVELOPMENT

The application of a program of focused change and development will ensure that health care service delivery is safe, promotes continuous improvement, ensures clinical best practice, engenders an environment which supports innovation and fosters a workforce culture that embraces all of the above¹⁹.

While a commitment to quality improvement is essential, in itself it does not provide a guarantee that organisational and cultural changes will result. Therefore, a further commitment to implement the necessary development and change, through the strategic initiatives below, is required.

Strategic Initiative 2: Fostering Clinical Best Practice

Modern health care is complex and clinical practices must be safe and of high quality. As a result, care should be based on scientific evidence and expert judgement²⁰. To support this approach, the objectives for this broad ranging initiative will include a focus on incorporating clinical practice guidelines, clinical pathways and other support tools as part of each health service's approach to quality care. In addition, a clinical framework and support system to promote evidence - based practice will be developed. Clinical practice guidelines will be incorporated with other quality initiatives, such as, the development of performance measures, benchmarking, accreditation and information on health systems provided to consumers. Health care research supporting clinical best practice will be enhanced and a collaborative approach to patient safety and quality of care will be promoted.

19 Moss, F. and Garside, P. Organisational change: the key to quality improvement, *Quality in Health Care*, vol 7, 1998.

This article identified organisational change as being instrumental in the achievement of quality improvement.

20 Brook, R.H., McGlynn, E.A. and Cleary, P.D. Quality of health care: Part2: measuring quality of care, *The New England Journal of Medicine*, Vol 335, No. 13, 1996.

Strategic Initiative 3: Enhancing Innovation

To ensure a continued commitment to the provision of high quality health care services, an environment that encourages and supports innovation in patient safety and quality of care, needs to be achieved. The objectives for this initiative will encourage the identification of innovation in the method of service delivery at all levels of the organisation. In addition, a working environment that motivates employees to participate in innovative enterprises will be fostered.

Strategic Initiative 4: Risk Management

This initiative will involve the development and implementation of an integrated risk management system. Risk management is considered a compatible partner of quality improvement requiring dedicated support and development. The recent interim report by NEAG²¹ noted that modern health care delivery is complex and risk-laden. Consequently, a strategic risk management initiative needs to address the requirement for health care systems to be proactive in managing risk. A way forward will be to pursue objectives such as the development of seamless approaches to corporate and clinical governance for risk management. This approach to risk management will also encourage learning from near misses and failures. In addition, risk management standards for the government health industry will be developed and implemented, and management and employees will be made accountable for risk management. Finally, risk management will be promoted as an integral part of the organisational culture.

Strategic Initiative 5: Supporting Health Workforce Development

This initiative will aim to create a culture of lifelong learning to ensure that the health system workforce is better equipped to offer modern, effective and high quality services²². It will also engender a culture that is knowledgeable and willing to implement quality and safety schemes, as well as promote these health industry enterprises to external stakeholders. The call for system-wide quality improvement²³ not only requires systematic changes, it also needs to be supported by a workforce prepared to implement quality improvement efforts at their local level²⁴. This goal will be supported by fostering a collaborative approach to learning and establishing standards of professional clinical practice and care.

21 *National Expert Advisory Group Interim Report*, op cit p. 1.

22 Garside, P. Organisational context for quality: lessons from the fields of organisational development and change management, *Quality in Health Care*, vol 7, 1998. This article advocates the need for behavioural changes in order to achieve quality improvement.

23 *National Expert Advisory Group Interim Report*, op cit p. 5.

24 *The new NHS A First Class Service: Quality in the new NHS* December, 1997 op cit section 5.16.

• INFORMATION MANAGEMENT

Information systems must be able to assist and guide quality improvement efforts within the health sector. While the provision of information systems is fundamental, the efficient use of the information generated from these systems is vital. Consequently, the provision of greater access to users and a program of staff training and education (in its use and the application of the information gained), will ensure that it becomes a valuable tool in advancing quality and safety within health services.

Strategic Initiative 6: Supporting Information Systems for Quality

This initiative will aim to establish an accessible information system that enhances safety and quality of care. Modern health care that focuses on evidence-based medicine requires the complementary support of comprehensive and integrated information management systems. Although these systems have to meet current needs they must be flexible and expansive enough to keep up with new developments in clinical practices²⁵. To meet this requirement, an evaluation of existing information systems for quality management will be a necessity. In addition, there will be a need to identify and co-ordinate the development of integrated information systems that meet the current and future needs of health systems. Finally, training programs for the application of the integrated management systems will be developed.

• ACCOUNTABILITY

Accountability in health services is a vital component of quality and safety of care. As a result, accountability should encompass a broad range of measures focusing not only on individuals or groups but also on systems as a whole. The clarification of responsibilities and a commitment to evaluation and review are some ways of ensuring the application of accountability.

Strategic Initiative 7: Measuring Quality and Outcomes

This initiative will aim to develop consistent measures of quality and outcomes in the provision of health services. The purpose of measuring quality and outcomes is to lay the groundwork for improvement. As a result, it is a vital component of a quality improvement system²⁶. To support this goal, standardised definitions of quality and outcome indicators will be coordinated.

25 *Quality First: Better Health Care for all Americans* March, 1998, section on Building the Capacity to Improve Quality: Investing in Information Systems, Chapter 14.

26 Blumenthal, D., Quality of health care: Part 1: quality of care - what is it? *The New England Journal of Medicine*, Vol 335, No. 12, 1996.

Standardised performance indicators will be used as a basis for reporting and benchmarking appropriately at various levels of service delivery. Quality of care indicators will be collected, assessed and reported on an ongoing basis for continuous improvement in occupational and patient safety. These will contribute to the demonstration of achievement in improved safety and quality enhancement outcomes.

Strategic Initiative 8: Strengthening Accreditation

This initiative aims to strengthen organisational accreditation processes through external review and increase the number of health services that meet minimum standards. Health services' accreditation processes should signal the attainment of relevant minimum or core standards while fostering continuous improvement in organisational and clinical performance. The focus should be on genuine service delivery improvements, not just on the attainment of the award²⁷. A way forward will be to promote accreditation processes as an active means of improving health care services, with an objective of establishing, reviewing and maintaining high standards of health care.

Strategic Initiative 9: Promoting Accountability for Quality

This initiative will aim to identify and clarify the accountability of corporate and clinical governance. Along with measuring quality and outcomes, making health service providers accountable for quality improvement is a way of ensuring that it is applied at the local level and that responsibility is taken for its application. Managers within health services and clinicians will be encouraged to take a systematic approach to improving and resourcing quality of care. Performance standards outlining expected safety and quality enhancement achievements for boards of management and senior managers of health care organisations would be clarified. Finally, senior managers of health authorities and health care organisations will be encouraged to implement mechanisms to strengthen cross-professional linkages.

Based on the above framework and guiding principles, the attached Appendix outlines a program of strategies accompanying the nine initiatives.

27 National Expert Advisory Group Interim Report, op cit p. 18.

REPORTING

In an attempt to monitor Western Australia's progress towards achieving the aims of this Plan, internal State reporting of achievements to date will be undertaken annually. In addition, Western Australia will report against the stated outcomes to the Commonwealth during the financial year 2000-01, as per the terms of the Australian Health Care Agreement.

Assessment will, in the first instance, be based on reports against key performance indicators on aspects of quality provided annually to the Auditor General²⁸.

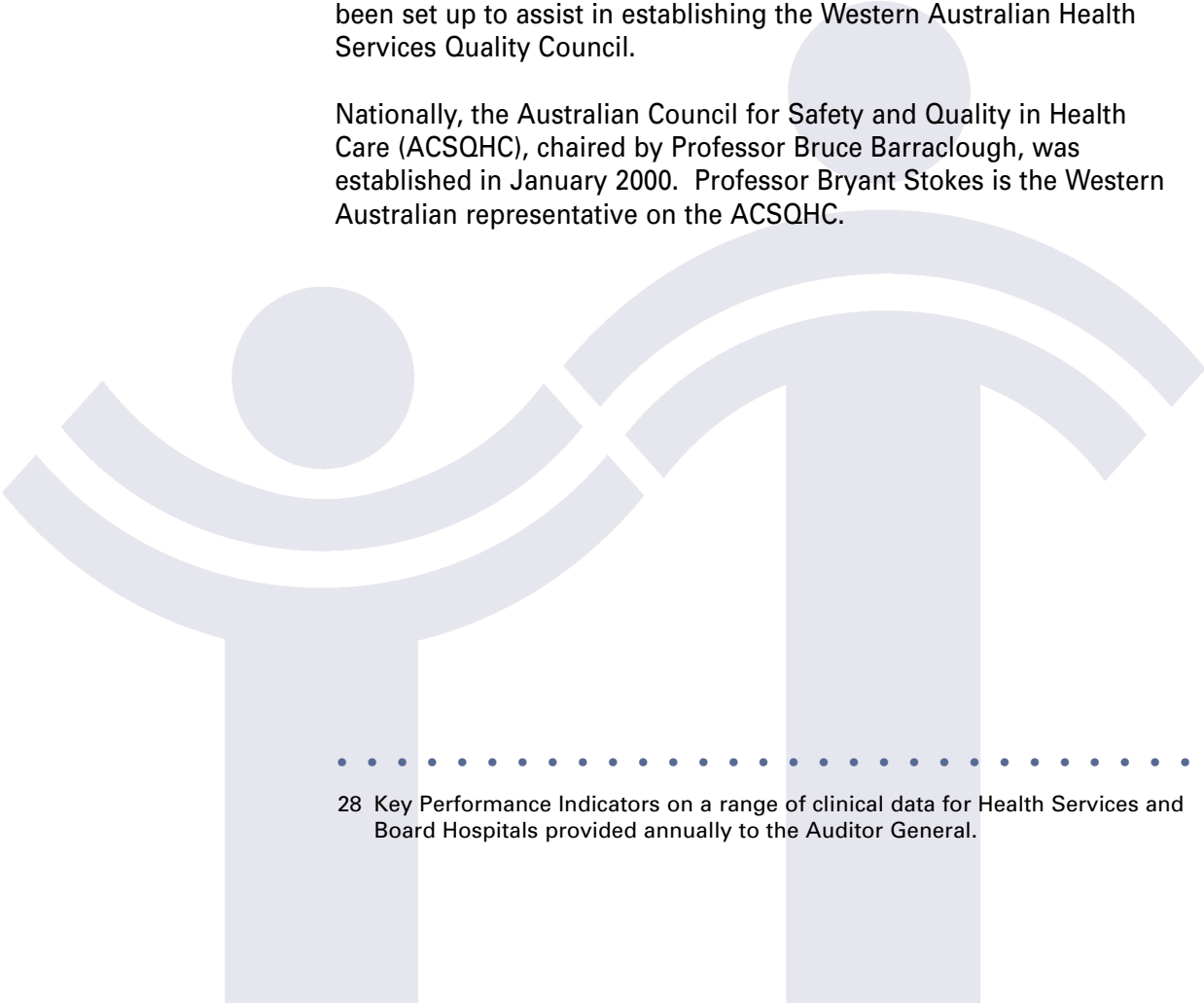
In addition, minimum standards and other reporting requirements will be developed and implemented with input from the Health Services Quality Council when it is established.

POSTSCRIPT

The Strategic Quality Plan for Western Australia was endorsed by the Hon Dr Michael Wooldridge, Commonwealth Minister for Health and Aged Care in late 1999.

Since the development of this Strategic Plan, an Interim Quality Council Steering Group, chaired by Professor Bryant Stokes, Chief Medical Officer in the Health Department of Western Australia, has been set up to assist in establishing the Western Australian Health Services Quality Council.

Nationally, the Australian Council for Safety and Quality in Health Care (ACSQHC), chaired by Professor Bruce Barraclough, was established in January 2000. Professor Bryant Stokes is the Western Australian representative on the ACSQHC.



28 Key Performance Indicators on a range of clinical data for Health Services and Board Hospitals provided annually to the Auditor General.

• APPENDIX •
STRATEGIC QUALITY PROGRAM



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
Quality Council	1. Provide overall guidance at the macro level.		Introduction of a Quality Council has resulted in a more coordinated quality improvement approach.

1. Strengthening the Consumer Voice

AIM: To strengthen the involvement of consumers in health service planning, delivery, monitoring and evaluation.

1. Provide appropriate, accessible health information to consumers.
2. Involve consumers in an active role in the planning, delivery, monitoring and evaluation of health care within all spheres of the health system.
3. Promote education and training initiatives for health care providers and consumers which support active consumer involvement.
4. Strengthen mechanisms for improving the accountability of health services to consumers.

Consumer Participation

1. Investigate models of consumer action groups (including those representing special interest/cultural issues) and assess their application to the health system.
2. Enhance formal communication networks with consumer action groups (including those representing special interest/cultural issues and groups ranging from self-help to fully funded government services) and the health system.
3. Promote and encourage consumer representatives to participate on country hospital boards.
4. Develop mechanisms for consumer participation payments to cover out-of-pocket expenses.
5. Implement the Consumer Participation Resource Kit.

Customer Service Council

6. Establish and promote Customer Service Councils within all health services.
7. Enhance and promote the communication capacity of Customer Service Councils.

Participation of Consumers in planning, delivery, monitoring and evaluation of health care within all spheres of the health system has resulted in an increase in service delivery improvements.

Demonstrated processes of accountability of health services to consumers are in place.



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
<p>1. Strengthening the Consumer Voice (Continued)</p> <p>AIM: To strengthen the involvement of consumers in health service planning, delivery, monitoring and evaluation.</p>	<ol style="list-style-type: none"> 1. Provide appropriate, accessible health information to consumers. 2. Involve consumers in an active role in the planning, delivery, monitoring and evaluation of health care within all spheres of the health system. 3. Promote education and training initiatives for health care providers and consumers which support active consumer involvement. 4. Strengthen mechanisms for improving the accountability of health services to consumers. 	<p>Patient Records</p> <ol style="list-style-type: none"> 8. Explore the feasibility of consumers having easier access to their health records within State hospital systems. <p>Complaints Management</p> <ol style="list-style-type: none"> 9. Enhance and extend (to rural areas) the MHSB Complaints Management System with reporting and action strategies clearly defined. 10. Extend staff training on complaints handling. 11. Introduce a standardised complaints management process across all operational metropolitan and country areas. <p>Health Information</p> <ol style="list-style-type: none"> 12. Investigate, develop and disseminate standardised information on 100 common health interventions and associated risk factors. <p>Education and Training</p> <ol style="list-style-type: none"> 13. Raise staff awareness of consumer action groups (including those relating to special interest/cultural issues). 14. Develop and implement leadership training programs focusing on consumer issues. 15. Develop information packages for hospital board members on consumer issues. 	<p>(See previous page).</p>



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
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2. Fostering Clinical Best Practice

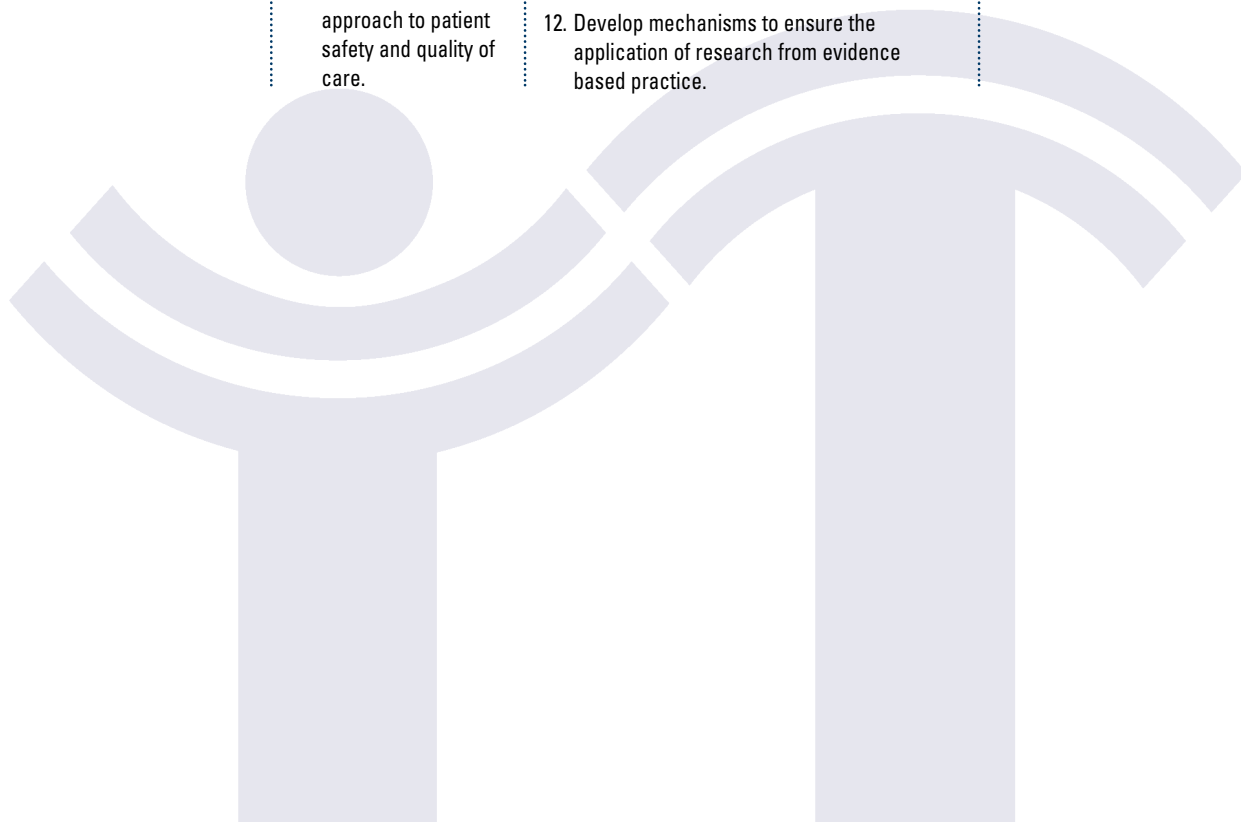
AIM: To support and develop approaches for evidence based practice to improve patient safety and quality of care.

1. Incorporate clinical practice guidelines, clinical pathways and other support tools as part of each health service's approach to quality and occupational and patient safety.
2. Develop a clinical framework and support system to promote evidence based practice.
3. Incorporate clinical practice guidelines into other quality initiatives such as the development of performance measures, benchmarking, accreditation and information on the health system provided to consumers.
4. Enhance health care research supporting clinical best practice.
5. Foster a collaborative approach to patient safety and quality of care.

Evidence Based Practice

1. Identify potential areas for the development of clinical practice guidelines and pathways.
2. Explore feasibility of developing multi-disciplinary clinical practice guidelines and pathways for three conditions per annum.
3. Extend the clinical guidelines network in the metropolitan area.
4. Establish a clinical guidelines network in the rural sector.
5. Continue to provide support to best practice nursing.
6. Pilot the Continuous Approach to the Review and Evaluation of Patient Care Standards (CARE) program.
7. Extend the implementation of the computer based Allied Health System.
8. Develop mechanisms to analyse data collated by the Medical Board of WA and disseminate relevant information to health services and consumers.
9. Support quality improvement research and dissemination of evidence in surgical services.
10. Develop a policy to ensure that clinicians are credentialled to perform procedures in the WA hospital system.
11. Support and expand the work of the WA Drugs & Therapeutics Committee.
12. Develop mechanisms to ensure the application of research from evidence based practice.

Development of evidence based practice has resulted in safer clinical service delivery.



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
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2. Fostering Clinical Best Practice (Continued)

AIM: To support and develop approaches for evidence based practice to improve patient safety and quality of care.

1. Incorporate clinical practice guidelines, clinical pathways and other support tools as part of each health service's approach to quality and occupational and patient safety.
2. Develop a clinical framework and support system to promote evidence based practice.
3. Incorporate clinical practice guidelines with other quality initiatives such as the development of performance measures, benchmarking, accreditation and information on the health system provided to consumers.
4. Enhance health care research supporting clinical best practice.
5. Foster a collaborative approach to patient safety and quality of care.

Information Sharing

13. Establish networks with organisations that provide information on evidence based clinical practice.
14. Disseminate information gained from networking with organisations promoting clinical best practice to the wider health community.
15. Develop mechanisms to identify and share information on variations in quality and clinical outcomes.
16. Provide support for health services to participate in roundtable forums.

Continuum of Care

17. Develop and expand linkages with general practice.
18. Develop mechanisms for visiting medical practitioners to implement clinical best practice care.
19. Develop mechanisms to enhance continuum of care with primary, secondary and tertiary health systems and the community.

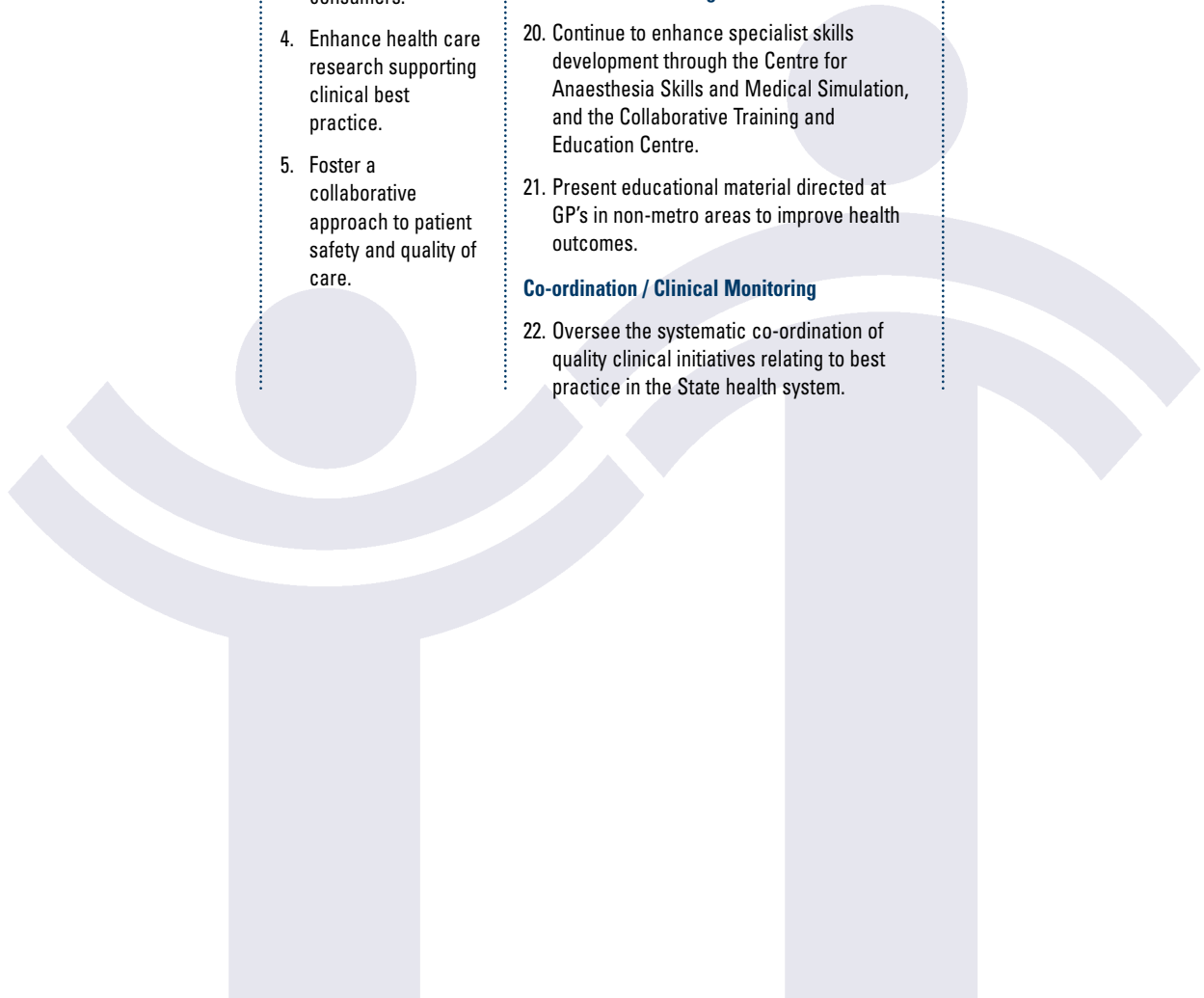
Education and Training

20. Continue to enhance specialist skills development through the Centre for Anaesthesia Skills and Medical Simulation, and the Collaborative Training and Education Centre.
21. Present educational material directed at GP's in non-metro areas to improve health outcomes.

Co-ordination / Clinical Monitoring

22. Oversee the systematic co-ordination of quality clinical initiatives relating to best practice in the State health system.

(See previous page).



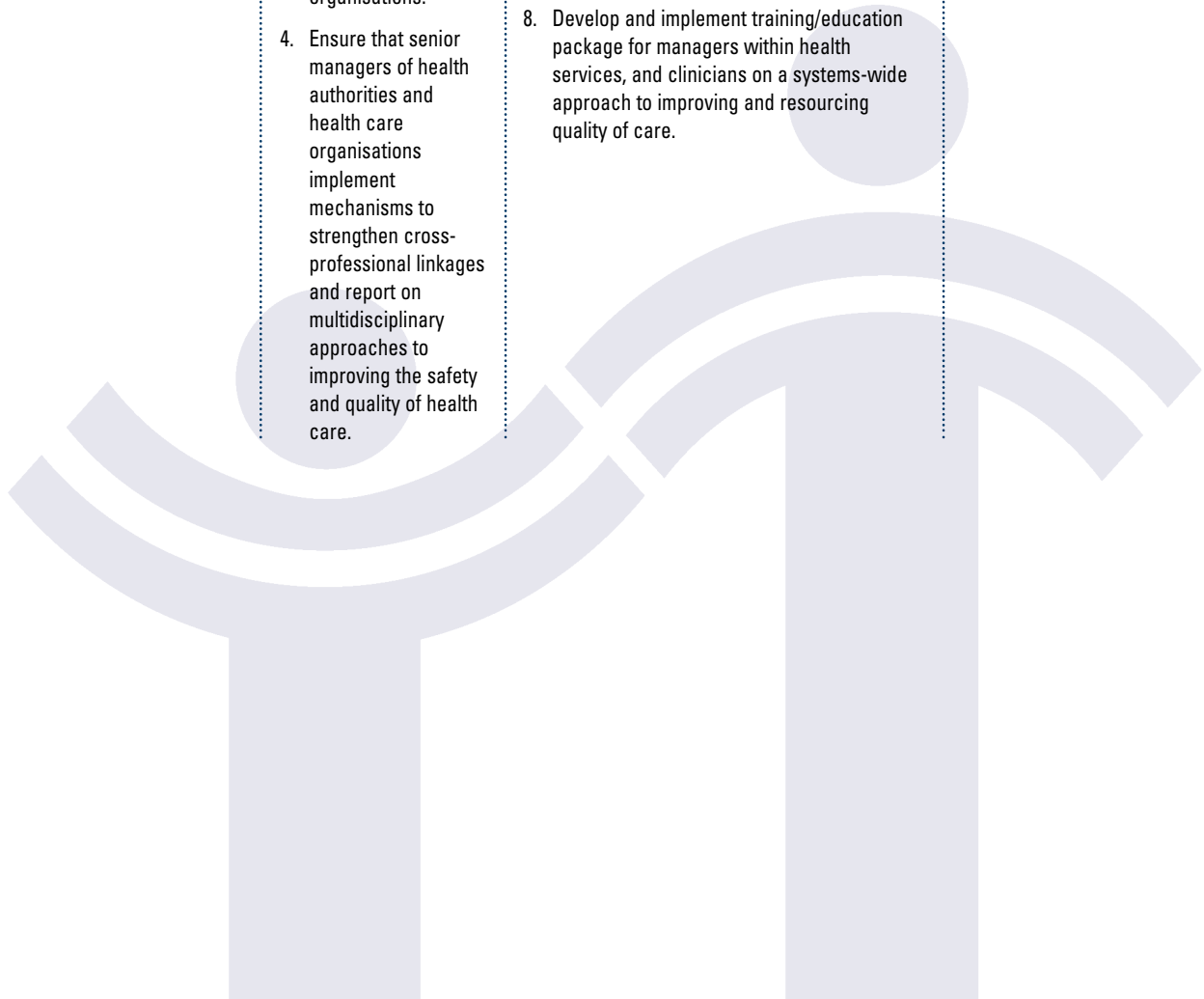
INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
<p>3. Measuring Quality and Outcomes</p> <p>AIM: To develop consistent measures of quality and outcomes in the provision of health care services.</p>	<ol style="list-style-type: none"> 1. Standardise definitions of quality and outcome indicators. 2. Use standardised performance indicators as a basis for reporting and benchmarking appropriate to each level of service delivery. 3. Collect, assess and report on an ongoing basis, quality of care indicators identified by jurisdictions in order to pursue continuous improvement in quality and occupational and patient safety. 4. Demonstrate achievement of improved safety and quality enhancement outcomes. 	<p>Systems-wide Performance Management</p> <ol style="list-style-type: none"> 1. Continue the development of standard Key Performance Indicators (KPIs) and methods of recording, updating and reporting. 2. Continue to support the development and implementation of minimum standards, organisational assessment and accreditation. 3. Establish mechanisms for the collation and reporting of demonstrated achievements against minimum standards and other quality improvement criteria. 4. Pilot an organisational self-assessment tool. 5. Examine statistical software packages for the assessment and management of quality data. 6. Develop mechanisms for individual health service providers to benchmark performance. <p>Education and Training</p> <ol style="list-style-type: none"> 7. Develop and implement training/education to assist health service providers to participate in the systems-wide performance management process. <p>Patient Evaluation of Quality and Outcomes</p> <ol style="list-style-type: none"> 8. Continue with patient evaluation surveys and extend to target special groups and remote areas. 	<p>Implementation of agreed minimum standards for quality has assisted in the development of consistent :</p> <ul style="list-style-type: none"> - measures of quality - high quality service delivery.



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
<p>4. Strengthening Accreditation</p> <p>AIM: To strengthen organisational accreditation processes and increase the number of health services that meet minimum standards.</p>	<ol style="list-style-type: none"> 1. Develop mechanisms to establish, review and maintain the minimum standards of health care. 2. Continue external review. 3. Work towards the introduction of core minimum standards for health services within an improvement framework. 	<p>Accreditation</p> <ol style="list-style-type: none"> 1. Continue to participate in accreditation programs. 2. Evaluate and modify current accreditation processes to meet needs appropriate to each level of health service delivery. 3. Identify ways of incorporating accreditation processes within existing health system structures. 4. Assess the appropriateness of standards applicable in different health care environments. 5. Extend the application of NATA accreditation process to three other centres. <p>Education and Training</p> <ol style="list-style-type: none"> 6. Develop and implement training/education in the application of accreditation processes. 7. Develop and fund a technical support team to assist in the education and training for accreditation across the State health system. 	<p>Development of accreditation processes appropriate to each level of service delivery has resulted in an increase in the number of health services that meet minimum standards.</p> <p>Use of organisational assessment processes has resulted in improved management of health services.</p>



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
<p>5. Promoting Accountability for Quality</p> <p>AIM: To identify and clarify the accountability of corporate and clinical governance.</p>	<ol style="list-style-type: none"> 1. Ensure that accountability for quality is the responsibility of both management and employees through individual and team based performance objectives. 2. Encourage managers within health services and clinicians to take a systematic approach to improving and resourcing quality of care. 3. Clarify performance standards outlining expected safety and quality enhancement achievements for boards of management and senior managers of health service organisations. 4. Ensure that senior managers of health authorities and health care organisations implement mechanisms to strengthen cross-professional linkages and report on multidisciplinary approaches to improving the safety and quality of health care. 	<p>Performance Management - Clinical and Corporate</p> <ol style="list-style-type: none"> 1. Develop performance indicators for boards of management and senior managers within health services on the achievement of safety and quality improvements. 2. Develop and implement guidelines for visiting medical practitioners involvement in quality and safety initiatives occurring within the health service system. 3. Develop mechanisms to foster an understanding of accountability among all clinicians. 4. Develop mechanisms to formalise agreement with colleges on the accountability of clinicians. 5. Review the WA Health Services (Quality Improvement) Act 1994. <p>Education and Training</p> <ol style="list-style-type: none"> 6. Maintain the metropolitan Quality Leadership Forum. 7. Extend the Quality Leadership Forum to all staff including country areas. 8. Develop and implement training/education package for managers within health services, and clinicians on a systems-wide approach to improving and resourcing quality of care. 	<p>Accountability standards for corporate and clinical governance are established.</p> <p>The application of corporate and clinical governance has improved accountability.</p>



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
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5. Promoting Accountability for Quality (Continued)

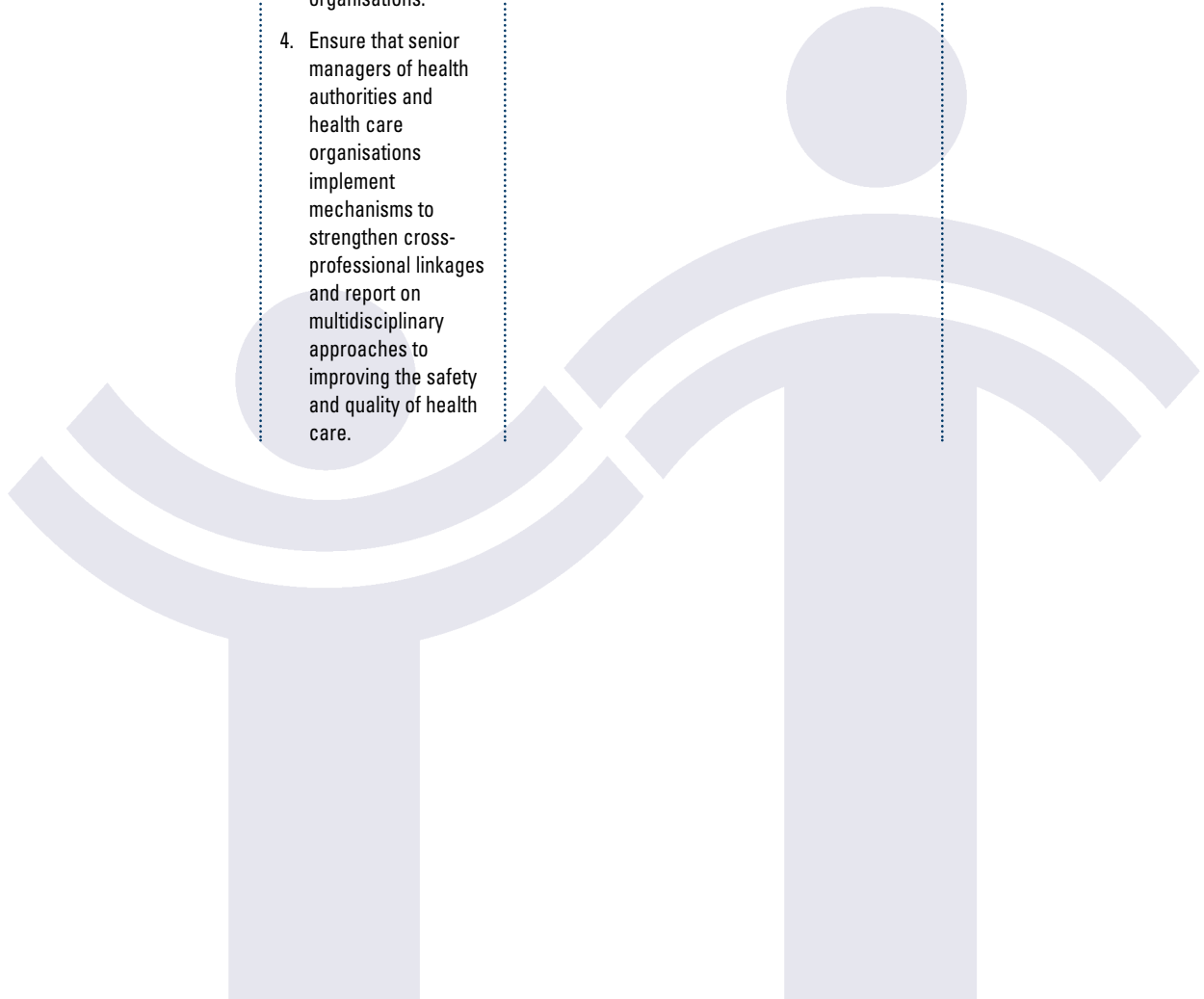
AIM: To identify and clarify the accountability of corporate and clinical governance.

1. Ensure that accountability for quality is the responsibility of both management and employees through individual and team based performance objectives.
2. Encourage managers within health services and clinicians to take a systematic approach to improving and resourcing quality of care.
3. Clarify performance standards outlining expected safety and quality enhancement achievements for boards of management and senior managers of health care organisations.
4. Ensure that senior managers of health authorities and health care organisations implement mechanisms to strengthen cross-professional linkages and report on multidisciplinary approaches to improving the safety and quality of health care.

Clinical Peer Review and Quality Improvements Committees

9. Continue to support and enhance the work of Mortality Committees to foster clinical best practice.
10. Extend clinical audit programs to specialist groups at training hospitals.
11. Continue and expand the work of Clinical Peer Review Committees.

(See previous page).



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
<p>6. Enhancing Innovation</p> <p>AIM: To create an environment that encourages and supports innovation in patient safety and quality of care.</p>	<ol style="list-style-type: none"> 1. Identify innovation in the manner of service delivery. 2. Develop mechanisms for resourcing innovative projects at the local level to enhance patient quality and safety. 3. Foster a working environment that motivates employees to participate in initiatives. 	<p>Service Delivery Improvements</p> <ol style="list-style-type: none"> 1. Pilot innovative models of clinical practice. 2. Develop clinical processes that incorporate continuum of care, measurement and review practices for quality improvement. 3. Develop mechanisms to promote clinical service delivery innovation. 4. Develop mechanisms for monitoring the application of innovative methods of service delivery. 5. Pilot the use of local service delivery in the management of diabetes in remote settings and assess outcomes. 6. Pilot a program on a holistic approach to health service delivery. <p>Innovations Leadership</p> <ol style="list-style-type: none"> 7. Develop mechanisms for recognising, rewarding, and promoting innovative approaches to health service delivery. 8. Develop mechanisms to support a rural body to promote and facilitate innovation. 	<p>Implementation of innovative practices have improved the quality of service delivery.</p>



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
<p>7. Supporting Information Systems for Quality</p> <p>AIM: To establish an accessible information system that enhances safety and quality of care.</p>	<ol style="list-style-type: none"> 1. Evaluate existing systems for quality management. 2. Identify and coordinate the development of integrated information systems that meet the current and future needs of health systems. 3. Develop training programs for the application of the integrated management systems. 	<p>Information Management Systems Development</p> <ol style="list-style-type: none"> 1. Develop mechanisms for integrating information management systems. 2. Develop and implement systems to improve the effectiveness and efficiency of operating rooms patient throughput. 3. Develop a client interface for the timely transfer of information to consumers. <p>Implementation, Education and Training</p> <ol style="list-style-type: none"> 4. Conduct gap analyses of staff training needs in the area of managing and using information systems. 5. Develop and implement systems, including training and education in the application of information received from the information management system. <p>Monitoring Information Management</p> <ol style="list-style-type: none"> 6. Develop mechanisms for monitoring whether information management systems are meeting the needs of health care services. 	<p>Use of current and accessible information has resulted in improved safety and quality of care.</p>



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
<p>8. Risk Management</p> <p>AIM: To develop and implement an integrated risk management system.</p>	<ol style="list-style-type: none"> 1. Develop a seamless approach to corporate and clinical governance for risk management. 2. Develop the capacity to learn from near misses and failures. 3. Develop and implement integrated risk management standards for the government health industry. 4. Ensure that management and employees are accountable for risk management. 5. Ensure that risk management is an integral part of the organisational culture. 	<p>Planning for Risk Management</p> <ol style="list-style-type: none"> 1. Continue and expand the development of the MHSB Risk Management Strategic Plan and programs to include rural health services. <p>Risk Management in Service Delivery</p> <ol style="list-style-type: none"> 2. Develop and implement standards, processes and mechanisms for incorporating risk management to improve service delivery. 3. Improve processes for informed consent. 4. Develop mechanisms for Adverse Events, Clinical Incident Reporting Systems and Mishap Investigation. <p>Education and Training</p> <ol style="list-style-type: none"> 5. Raise awareness of risk management through the development and implementation of workshops. <p>Monitoring Risk</p> <ol style="list-style-type: none"> 6. Maintain Occupational Health and Safety (OHS) Committees. 7. Maintain Risk Management Committees. 	<p>Proactive management of risk has improved the safety and quality of care.</p>



INITIATIVES	OBJECTIVES	STRATEGIES	OUTCOMES
<p>9. Supporting Health Workforce Development</p> <p>AIM: To create a culture of lifelong learning to ensure that the health system workforce is equipped to offer modern, effective and high quality services.</p>	<ol style="list-style-type: none"> 1. Foster a collaborative approach to learning. 2. Establish standards of professional clinical practice and care. 3. Enhance a culture of understanding of the central requirement of health care organisations to ensure patient safety and quality of care. 	<p>Professional Development</p> <ol style="list-style-type: none"> 1. Establish ongoing professional development programs including remote exchange for clinical staff to enhance skills. 2. Establish and implement coordinated State network program with universities and professional bodies in the certification and credentialling of clinicians. 3. Establish vocational educational training competencies required by non-clinical support staff. 4. Develop and implement mechanisms for recognising and rewarding behaviour that support lifelong learning. <p>Education and Training</p> <ol style="list-style-type: none"> 5. Develop and implement training/education programs in relation to leadership in quality and safety within the health sector to stakeholders. 6. Develop and implement programs to enhance clinical leadership. 7. Establish links with universities and colleges to communicate the role of health care organisations in ensuring patient safety and quality of care. <p>Health and Wellbeing of Staff</p> <ol style="list-style-type: none"> 8. Develop and implement mechanisms to ensure the occupational health and safety of staff within health care systems. 	<p>A skilled workforce that is better equipped to provide improved safety and quality of care.</p>



