Covering note to Transformation Programme

The document in this download represents the key Vision and Directions documentation for the Gold Coast Transformation Programme 2009 – 2011. It is presented here unchanged from the original distribution in early 2009 so that there is a true representation of our logic as we designed and executed our Transformation Program.

It has been provided to registrants of the AHHA / NHS Improvement Conference in Sydney (May 2012) as a resource and a point of conversation.

We do not believe that Gold Coast Health Service District has the "holy grail" of innovation and transformation. If we had our time again, there are things we would change, things we would amplify and others we would do exactly the same.

Our simple wish is that by sharing this work, we have in some way made a contribution to improving the health of our community and the care that we deliver. We trust that it might be of some benefit.

Adrian Nowitzke
Chief Executive Officer
Gold Coast Health Service District

14 May 2012

Dear Gold Coast Staff, Queensland Health Colleagues, External Partners and Stakeholders,

The future is ours to create. We have never had an opportunity like this to fashion a world-class public health system here on the Gold Coast that will be recognised for its excellence across Australia. But this will require vision, dedication, commitment, cooperation and change. It will require a Transformation.

Please find attached the Vision and Direction Statement for the Transformation of our District Health Service between now and 2011. It outlines why we need to transform, begins to paint a vision of the outcome of the Transformation and describes the path to get us to that place. The Transformation involves separate reform agendas in the areas of Customer Service, Clinical Care, Financial Management and Technology. Integral to the success of these reforms is our commitment to work collaboratively with our organisational partners.

The document is quite detailed and some may find it too long. However, in line with our themes of transparency and respect for all our staff, I have chosen to make it as widely available as possible. There will be separate, shorter, brochures distributed at the District Forums this week and to pay slip delivery points over the coming weeks.

Change is both exciting and difficult. It is challenging and rewarding. But there is no doubt that the staff of Gold Coast Health and its partners can maximise this opportunity to seize the future. I am reminded of the words of John F Kennedy who said: "There are risks and costs to a program of action, but they are far less than the long-range risks and costs of comfortable inaction".

With best wishes,

Adrian

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Transforming Gold Coast Health 2009 – 2011:

Vision and Direction

Gold Coast Health Service District

Gold Coast Health
Building a healthier community

Our vision

The vision of the Gold Coast Health Service District is to seize the future and be the greatest provider of public healthcare in Australia.

Our mission

The mission of the Gold Coast Health Service District is to:

- Lead disease prevention on the Gold Coast
- Provide secondary and tertiary health services of the highest quality and best value to the people of the Gold Coast, Northern NSW and South West Queensland
- Design and implement the best contemporary models of integrated health care
- Provide high quality health sector education
- Contribute to knowledge development through research and evidence-based clinical practice.

Our values

The values of the Gold Coast Health Service District are:

- Excellence in everything that we do
- Working together in partnership
- Value for, and responsible use of, public money
- Care and respect for all people
- Continuous learning by individuals, teams and the organisation.

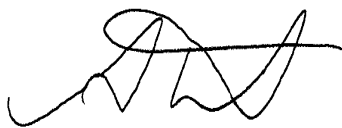# A Message from the Chief Executive Officer

Dear Staff,

We have never had a better opportunity to shape our future as an organisation than we have at present. In four short years we will have a wonderful collection of first-class healthcare buildings. Our challenge is to occupy them with first-class clinical services and supporting operations.

The staff of Gold Coast Health, who presently number nearly 5000 people, are a wonderful team with a rich diversity of skills, knowledge and opinions. We are united by the desire to provide the best healthcare to the people of our community. We have a collective responsibility to maintain the community's confidence in their health service. We know we have challenges ahead of us. Our transformation program will allow us to harness the ideas, energy and commitment of our people to build this confidence.

In launching this program, we are empowering staff to examine the way we operate and decide how we can deliver better service. Working together, we will design and implement improvements to build a health system we are all proud to be a part of.

Our future rests in the hands of our people. This document sets out a vision for transformation towards a first-class health system and provides a high-level pathway to reach our destination. The success of this program could not be in better hands.

With best wishes,

Dr Adrian Nowitzke
Chief Executive Officer
Gold Coast Health Service District

Contents

1 Why transform?

Over the next 30 months, Gold Coast Health Service District is embarking on a journey to improve the way it delivers public healthcare services to the people of the Gold Coast. This document explains why we are undertaking this transformation and how we are going to do it.

Gold Coast Health today

The Gold Coast Health Service District has been delivering public healthcare to the people of the Gold and Tweed Coasts for nearly 60 years. Over that time, our District has grown in size and now consists of two major hospitals, one sub-acute and interim care facility, a stand-alone day surgery centre and nine major community facilities. In the 2008/09 financial year, our operational budget exceeds $530 million and our workforce has grown to over 5000 people. In addition, we have commenced two major building projects with a projected investment of $1.8 billion over four years.

The type of healthcare we deliver is radically changing. The development of the Nursing School and two Medical Schools on the Coast has increased our self-sufficiency. Our technology and research base is expanding and in 2012 we will operate Australia's only named and functioning "University Hospital".

We must continue to deserve the confidence of the community in their public health system.

We are in a privileged position. As the largest single provider of healthcare on the Gold Coast, people look to us for leadership. In addition, we are servants of the public and the custodians of the healthcare system for our community. Issues such as access, safety, quality and effective performance of their system are of paramount importance to our community. The overall aim of this transformation program is to continue to earn the confidence of our community as we grow and change.

Challenges

Our population is growing and now our region ranks as the fastest growing area in Australia outside of a capital city, and the fastest growing area in South-East Queensland. In 2006-07, the population reached 524,667[1]. We are the sixth largest city in Australia. This means that 1 in every 40 Australians now lives on the Gold Coat. In addition to sustained population growth, we are also being challenged by increasing levels of chronic disease and an ageing population.

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[1]   Australian Bureau of Statistics, Regional Population Growth, 2006-07.

These factors are contributing to a major increase in demand for the services provided by our District. Meeting this challenge is being exacerbated by an existing shortage of healthcare professionals. This shortage is leading to fierce competition for experienced staff. In addition, the current severe downturn in global economic conditions is increasing the strain on State and Federal government revenues. Governments are warning us that the rate of increase in spending on public healthcare is not sustainable in the long-term. In Queensland, if spending on public healthcare continues to increase at its current rate, public healthcare will consume the entire State Government budget by 2042. All of this is contributing to our increased focus on looking for ways to manage our resources appropriately.

We must find new ways to deliver services to the community.

In short, we must find new ways to improve our health services and meet the growing needs of the population we serve.

Improving our services

Our transformation program will enable us to improve our services and support us to operate as a leading public healthcare provider, characterised by the qualities described below.

Transforming Gold Coast Health

We will transform Gold Coast Health to become an organisation that is:
- Focused on the continuous improvement of health outcomes in the community
- Working to a clear vision and plan
- Committed to working with partners
- Recognised as responsible, credible and trustworthy
- Delivering reliable, safe and quality services always
- Distinguished by its outstanding people
- Valuing teaching, education and continuous learning
- Responsible in the wise use of public money
- Using modern technologies to enable healthy outcomes.

Specifically, the program will help us to build the core capabilities of our organisation and support us to:

- Provide improved customer service to the community

- Enhance the quality of clinical care we provide

- Implement modern technologies to facilitate the delivery of improved health outcomes

- Manage our resources and support systems more efficiently.

What it means for staff and the community

Our patients and their carers tell us that they do not always receive the level of service and quality of care that we aspire to provide. We also know that our staff regularly encounter a wide range of day-to-day challenges and operational issues that prevent them from providing the level of service and care they want to provide.

The core reason for our transformation program is to improve the health system and enable our staff to deliver improved care to the community. We want to provide staff with the opportunity to design new ways of working and implement systems and processes to eliminate the day-to-day issues and challenges that our patients, families and our staff regularly experience during the patient journey.

Getting involved

We want staff to challenge the things that stop them from doing their best so we can implement changes to improve the system.

In establishing the program, we want to promote a culture where staff have permission to challenge the things that stop them from doing their best and implement changes to improve the system. Our transformation program will give staff the opportunity to get involved and define new ways working to eliminate:

- Confusion and frustration for patients and staff
- Errors caused by limited access to the right information
- Delays in treatment caused by poor organisation
- Duplication and overlap of roles
- Wasted resources
- Uncertainty about what is happening next.

It will provide us with the opportunity to look for ways to improve the way we work so we can:

- Give patients and families improved information
- Standardise our practices and offer safer treatment
- Make it easier for staff to access and record patient information
- Make sure patients do not stay in hospital longer than they need to
- Communicate more effectively with each other
- Seek and learn from feedback from patients, carers and each other
- Improve our cooperation and teamwork.

Our transformation program will help us provide a better experience for everyone.

All of this will help us to create a well organised health system that will provide a better experience for everyone:

Patients and Carers		- Improved access - Improved communication - Safe and high quality care - Excellent customer service.
Staff		- Empowerment - Better teamwork and collaboration - Greater satisfaction and recognition - Continuous learning.

Partners		• Improved information • Better consultation • More involvement • Trust.
Community		• Improved participation • More transparency • Efficient use of time, materials and resources • Confidence.

Imagine transforming the patient journey …
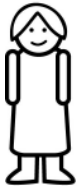
Mrs S is a 75 year old lady who lives at home at Tugun with her husband. They have two married children who live interstate and five grandchildren. Her husband needs her to help him with his daily activities after his stroke two years ago. Mrs S had a heart attack seven months ago and also takes blood thinner (Warfarin) for her heart.

For the last ten years, she has been suffering from back pain. She has recently developed pains in her legs which are getting worse when she walks. She visits her GP to see what she can do about it. What are some of the challenges Mrs S and staff might experience today? How would our transformation program solve these challenges?

Imagine transforming from a world where …	To a world where …
• The GP recognises that Mrs S is suffering from a fairly common problem. She might either need treatment by a physiotherapist or alternatively she may need an operation • The GP refers Mrs S to the Outpatient Department to see a specialist to decide • Mrs S waits for her Outpatient appointment. She makes a number of calls to the hospital to find out about her appointment.	• The GP follows the pathway that has been developed by the District and its partners in General Practice to manage Mrs S's condition • He orders some specific tests including an MRI as advised by the pathway and refers Mrs S to see a physiotherapist • The GP is able to discuss Mrs S's treatment options with a hospital specialist to agree a course of action • The GP's assistant goes online directly to book Mrs S's appointments • Mrs S and her family receive information that describes how to manage her condition and also describes the range of services that are available to support them.
• Mrs S makes several visits to the Outpatient department. During her visits she sees a different doctor each time, is prescribed new medication and also visits a physiotherapist • At each visit, she answers a lot of the same questions that she has answered on previous visits • Her symptoms continue to persist.	• The District contacts Mrs S to confirm her upcoming appointment to see a specialist. Her appointment is scheduled at the local rooms for specialist public consultations • Mrs S attends her appointment to see the specialist at the local public consultation rooms conveniently located in her local shopping centre • The physiotherapist commences treatment earlier in the journey • Mrs S has not needed to visit the hospital so far.

Imagine transforming from a world where …		To a world where …
	• Eventually, the specialist orders a number of tests including an MRI • After having her MRI done and making another visit to the Outpatient department, Mrs S receives her results and is advised that she needs an operation • Mrs S is placed on a waiting list for her operation.	• The MRI and other test results reveal that Mrs S needs an operation • Mrs S is placed on a waiting list for her operation and given an estimated date when it will take place • She is given information that allows her to proactively manage her condition while she waits for her operation • She also receives a visit from an Occupational Therapist and a dietician.
	• Some months later, Mrs S is scheduled for her operation • She is given limited notice to attend the Pre-admission clinic • She answers a lot of questions again but needs to correct the specialist who thinks she is still on her old medication.	• She is kept informed by the hospital when her operation will take place • The hospital contacts her to confirm her appointment. This gives her time to arrange with family members to look after her husband • At Pre-admission clinic, the specialist consults her electronic medical record to review her history and current medications.
	• Mrs S's family want to know about the care she will receive in hospital. She is not sure if the hospital told her. • Mrs S is admitted to hospital and has a successful operation.	• The hospital provides Mrs S and her family with information about her condition and the care she will receive • She is admitted to hospital and has a successful operation.
	• After a spending a few days in hospital, plans are made to transfer Mrs S to Carrara to commence her rehabilitation • After her rehabilitation, Mrs S is discharged • She continues to visit the Outpatient department a few more times.	• Mrs S's rehabilitation starts immediately after her operation • She is transferred to Carrara for further rehabilitation as per her care plan • Mrs S is discharged and is able to return home • She attends the outpatient clinic once and continues to see her GP who continues her care according to her agreed care plan.

2   What are we going to do?

This section describes the initiatives we will implement as part of our program to transform Gold Coast Health.

There are four ways our program will reform key areas of our organisation and enable us to improve the services we deliver to the community. We will implement:

1	Customer Service Reform	• Initiatives that will enable us to provide outstanding service to patients, carers and other consumers of District services
2	Clinical Care Reform	• Initiatives to streamline and standardise our processes and improve the quality and consistency of care we provide
3	Finance Reform	• Initiatives to improve the way we manage our resources and support systems so we can operate a more cost effective and efficient organisation
4	Technology Reform	• Modern technologies that will facilitate our ability to deliver improved outcomes to patients and the community.

Customer Service Reform

Our customer service initiative will help us respond to the community and improve the healthcare system.

Compassionate care and excellent customer service are at the heart of this patient-centred transformation program. Our customer service reform program will implement two initiatives designed to improve the customer service we provide to consumers of GCHSD services. A goal of this initiative is to increase the "voice" of the community in designing and delivering their healthcare system. The key initiatives in this work-stream are:

- Responding to consumers
- Excellent customer service.

Each of these initiatives is described below.

Initiative 1: Responding to consumers

The objective of this initiative is to improve our responsiveness to consumer feedback. The initiative will involve establishing a mechanism to increase consumer participation in District processes. The aim will be to ensure that consumers are represented in District decision making bodies and that their needs are appropriately identified and responded to by all levels of the organisation.

Initiative: Responding to consumers

- Create mechanisms to understand the needs and wants of our customers
- Identify current and new mechanisms to increase consumer participation in District activities

Initiative: Responding to consumers
• Implement improved formal and informal mechanisms to gather consumer complaints and feedback
• Improve the way we respond to consumer feedback
• Improve the organisation's focus on measuring consumer satisfaction and feedback
• Implement improved mechanisms to track how the organisation is responding to feedback
• Improve customer service management across the organisation including the definition and implementation of customer service responsibilities and accountabilities for staff throughout the organisation.

Initiative 2: Excellent customer service

The objective of this initiative is to improve the customer service we provide throughout our clinical and non-clinical processes. Projects in this initiative will include:

• Transforming care at the bedside (TCAB)

• Communication and patient safety workshops (CAPS)

• Frontline staff training workshops.

Each of these projects is described below.

Project 1: Transforming care at the bedside (TCAB)

Around the world, progressive and successful hospitals are instituting this program which was designed by the Institute for Healthcare Improvement and The Robert Wood Johnson Foundation which commenced in Queensland at Ipswich Hospital. It envisions a new model of bedside care and embraces frontline leadership.

Project 1: Transforming care at the bedside (TCAB)
Throughout the TCAB project, frontline staff will create, test and measure new ideas for improving bedside care using a range of tools and methodologies developed for the TCAB program. Teams will focus on designing improvements around achieving four key goals:
• Safe and reliable care: Care for patients is safe, reliable effective and equitable
• Vitality and teamwork: Working within a joyful and supportive environment that nurtures professional formation and career development; care teams continually strive for excellence
• Patient-centred care: Truly patient-centred care honours the whole person and their family, respects individual values and choices and ensures continuity of care. It leads to patients saying, "They give me the help I want (and need), when I want (and need) it."
• Value-added care processes: All care processes are free of waste and promote continuous flow.

Project 2: Communication and patient safety workshops (CAPS)

In this initiative, staff will attend workshops designed to improve communication and enhance patient safety.

Project 2: Communication and patient safety workshops (CAPS)
Throughout this initiative staff will learn a range of techniques to assist them to communicate more effectively and enhance the safety of patients. The key learning outcomes for participants will include: • Developing an understanding of how communication contributes to improved patient safety and care outcomes • Recognising the importance of communication and teamwork and how they contribute to the safety of patients • Recognising the types of errors that occur due to poor communication • Understanding how to communicate effectively and the importance of double-checking to be sure information has been received correctly • Learning new communication techniques that will enhance the patient experience, deliver improved care outcomes and improve patient safety.

Project 3: Frontline staff training workshops

This program complements the other two in that it supports frontline staff who do not have direct clinical interaction with patients and their families. It also recognises that we have many more customers in addition to patients and their families.

Project 3: Frontline staff training workshops
During this initiative, participants will learn a range of techniques to improve their ability to communicate with patients and each other and enhance the safety of patients. The key learning outcomes for the participants include: • Understanding how to achieve consumer participation in the organisation • Understanding how to generate commitment to service and achieve customer satisfaction • Learning core customer service skills including obtaining customer feedback.

Clinical care reform

Our clinical reform program will enable us to operate high quality and consistent clinical care processes and help us improve the quality of clinical care we provide to the community.

The clinical reform program will use international "best practice" process redesign to ensure that the patient flows smoothly through the health system. Our clinical reform program will enable us to operate high quality and consistent clinical care processes and help us improve the quality of clinical care we provide to the community. We will use two vehicles to deliver our clinical reform program across the District. They are:

• Gold Coast Health 18 weeks

• Gold Coast Heath lean thinking.

These initiatives have been successfully introduced and applied in overseas jurisdictions to deliver marked improvements in clinical care. 18 weeks will focus on reducing the time from referral to initial treatment.

Lean thinking will focus will on improving the pathway once initial treatment has commenced. Each initiative is described below.

Initiative 1: Gold Coast Health 18 weeks

This initiative is based on a similar program that has been rolled out by the National Health Service (NHS) throughout the United Kingdom (UK). The goal of our 18 weeks program is to ensure that no patient will have to wait more than 18 weeks from the time of referral to the start of treatment. This timescale includes the first definitive treatment and all the stages that lead up to it such as outpatient consultations, diagnostic tests and procedures. It also includes referrals from GPs, specialists and a range of other groups.

The overall aim of 18 weeks is to improve clinical care - not just reduce waiting times. The program aims to change the way we go about delivering care and manage our day-to-day operations to improve the service we deliver to patients. In addition to improving time to treatment (speed), 18 weeks also improves:

- Quality
- Equity
- Efficiency
- Customer service.

The program is based on the reality that we share patients with the General Practice sector and that we are one part of the patient's overall journey. The responsibility of all healthcare professionals is to work together so the patient moves seamlessly through the system. Using teams of frontline staff from multiple disciplines and sectors, the program maps out how patients currently receive their care and creates improved pathways to achieve a maximum 18 week pathway from referral to commencement of treatment.

Initiative: Gold Coast Health 18 weeks

The program is divided into three stages. These include:
- Measure the current pathway
- Define the new pathway
- Implement and evaluate the new pathway.

Measure the current pathway

In this stage, teams review the existing processes and develop a baseline set of measures which will be used to measure the progress the District makes towards improving the pathway. They also use a range of different analysis techniques to undertake root cause analysis to identify the causes of the key problems that occur in the existing pathway.

Define the new pathway

Based on this analysis, teams then systematically identify potential solutions for improving the pathway. To do this, they focus on identifying ways to improve patient flow and eliminate delays in patient care caused by unnecessary paperwork, clinical decision making, information and communication. 18 weeks applies seven key principles to achieve this:

Initiative: Gold Coast Health 18 weeks

- Focus on the whole patient journey
- Plan ahead along all stages of a patient's pathway
- Balance capacity and demand
- Pool similar work together and share staff resources
- Keep things moving - see and treat patients in order
- Reduce things that do not add value to patient care
- Keep the flow - reduce unnecessary waits.

Teams then create plans to identify all the actions that need to be taken to deliver each solution. Milestone dates and responsibilities are allocated against each action to create an implementation schedule.

Implement and evaluate the new pathway

Once the action plans and implementation schedule have been established, the teams then test solutions and identify any potential implementation issues. As these are resolved, the solutions are implemented for wider rollout. As the solutions are implemented, the teams use measurement tools to evaluate whether the required improvements are being delivered. Progress reports are regularly produced to highlight the progress that is being made towards achieving the 18 week pathway.

Initiative 2: Gold Coast Health lean thinking

We have run several successful programs in the District through the Clinicians Using Lean Thinking (CULT) team. Now we will explode Lean Thinking Methodologies to systematically improve the clinical care pathways we operate throughout the District. The aim will be to deliver better and improved quality of care to patients and make the working lives of our staff less stressful and more rewarding. It will also contribute to boosting our efficiency and overall productivity. Specifically, the initiative will achieve the following benefits:

- Improved quality and safety – fewer mistakes, accidents and errors, resulting in better patient care

- Improved delivery – better work gets done sooner

- Improved throughput – staff find they are capable of achieving much more

- Accelerating momentum – a stable working environment with clear, standardised procedures creating the foundations for constant improvement.

Initiative: Gold Coast Health lean thinking

In this initiative, improvement teams will be established to examine ways to improve the clinical care process. They will use a range of Lean Thinking tools to uncover waste in the patient journey and eliminate its root cause. Each project will follow three steps to improve the patient journey. These are:

- Identify the value streams
- Map the value streams
- Identify and implement improvements.

Each of these steps is described below.

Identify the value streams

Initiative: Gold Coast Health lean thinking

A value stream defines all the actions and information that is needed to deliver care to a patient. In this step, project teams will define the different end-to-end processes in which a patient receives care from the commencement through to the end of their journey.

Map the value streams

Once the value streams have been identified, staff will map every action that is currently taken along the value stream that enables the patient to move through the system from one stage to another. This involves identifying who does what, when they do it and how long it takes them. Staff also examine what equipment and materials are needed at each step in the journey and identify the range of information that is needed or collected through the entire process.

During this process, the teams will identify a range of issues currently causing blockages, bottlenecks, confusion and errors throughout our District. They will then begin to think about how the process could be redesigned to improve patient flow and deliver improved care to the patient.

Identify and implement improvements

In this step, project teams will examine the value stream and identify improvement opportunities. This will involve convening rapid improvement events whereby staff will pool their knowledge and expertise to map improvements and create a "future state" map. Following each session, teams will move to implement each improvement. This process will implement reform rapidly and also build a culture of continuous improvement across the organisation. Standardised processes will be implemented throughout the organisation and continuous improvements will be embedded into these processes on an ongoing basis.

Finance reform program

Our Finance reform program will help us operate a more cost effective and efficient organisation.

Money is a tool for us to use to improve our organisation. The better we use it, the more opportunities we will have to reach our goals. The goals of our Finance reform program are to:

- Allocate our resources so they align with activities and strategic directions

- Create a culture throughout the District where we live within our means

- Improve our capacity to manage increased activity and improve quality of our service

- Capture every available cent of funding and revenue.

We will use the Casemix Excellence initiative as our vehicle to achieve these goals.

Initiative: Casemix Excellence

In this initiative, we will conduct a range of activities designed to improve our ability to operate as an efficient and cost effective operation.

Initiative: Casemix Excellence

A range of activities will be conducted to deliver the Casemix Excellence initiative. These include:

- Develop and implement a Casemix Excellence strategy and structure for the organisation
- Build knowledge and understanding of Casemix and its application to our operations
- Develop and implement education and training programs to build skills and capabilities throughout the organisation
- Design and implement initiatives to resolve system issues, improve data quality and promote timely reporting
- Implement culture improvement and behaviour change initiatives to promote Casemix excellence throughout the organisation
- Define and implement approaches to mitigate the key risks that prevent us from achieving Casemix excellence
- Implement change management and communications initiatives to support delivery of Casemix excellence.

Technology reform program

Our technology reform program implement modern technologies that help us deliver better care and improve the efficiency of our organisation.

Our technology reform program will enable us to implement modern technologies to facilitate the delivery of improved care and service and improve the efficiency of our organisation. The goals of the reform program are to:

- Achieve a limited electronic health transformation across the District in time for opening of the Robina Hospital Expansion in March 2011
- Implement responses to the current operational challenges being experienced by the District
- Prepare the District for the transition to a full digital health service model when the Gold Coast University Hospital becomes operational in 2012.

Three core technology solutions will be implemented as part of the technology reform program. These solutions are:

- Radiology: Picture Archive and Communications System (PACS) and Radiology Information System (RIS).
- Pathology: Digital Request and Results Management system.
- Electronic Medical Record: Clinical information system.

Radiology: PACS and RIS systems

Project: Radiology: PACS and RIS systems

The PACS and RIS solutions will:

- Reduce costs because printed films and physical storage space will no longer be required
- Improve the availability of images and reports

Project: Radiology: PACS and RIS systems

- Improve the turnaround time for the reporting of images taken
- Promote timely and improved care planning because it is easier to access images and results
- Improve the ability of staff to manipulate images. For instance, radiologists can magnify and investigate areas of interest
- Promote improved collaboration as PACS can be viewed from multiple terminals and locations by a number of clinicians at the same time
- Enable the patient to become more engaged and better informed.

Pathology: Digital Request and Results Management system

Project: Digital Request and Results Management system

The Digital Request and Results Management solution will:

- Reduce risks to patients as clinicians will have better access to test results
- Enable clinicians to review test results in a timely manner
- Reduce costs as test results will be available online at the point of care. This will reduce the incidence of ordering unnecessary tests
- Facilitate improved care planning as it is easier for clinicians to access results
- Enable clinicians to filter and prioritise abnormal results.

Electronic Medical Record: Clinical information system

Project: Electronic Medical Record: Clinical information system

The recommended EMR solution will:

- Facilitate removal of the paper record from the clinical environment
- Solve issues associated with storing paper records on site
- Prepare staff for the transition to a future-proofed environment when the new Gold Coast University Hospital goes live in 2012
- Address a number of the issues and challenges currently being experienced in relation to using paper medical records.

In addition, the EMR solution will enable a whole range of capabilities that will contribute to delivering improved care to patients. These include:

Enabling improved patient administration and service coordination

- Enabling the efficient processing of patient access and discharge
- Providing a better view of the future demand for resources
- Providing an improved ability to schedule resources
- Increasing the quality and safety of care through reliable identification of patients and clients
- Increasing the efficiency of care provided by reducing the number of wasted appointments
- Decreasing the costs of storing and transporting patient records.

Enabling improved patient care

- Improving medication management practice throughout the District
- Improving the consistency and completeness of order requests, results and clinical documentation
- Improving ordering and fulfilment of tests, medications and other services

Project: Electronic Medical Record: Clinical information system
• Improving distribution of results
• Increasing the availability of information to staff at points of care
• Improving tools available to staff to support clinical decision making
• Improving the ability to communicate information to patients
• Improving the ability to integrate and share information between different services.

To support delivery of each technology solution, the technology reform program will:

- Establish program management and governance functions to align the objectives of each technology implementation

- Implement process improvement initiatives designed to improve operational processes and workflows that are impacted by the new technologies

- Mobilise implementation project teams to plan and manage the deployment of each technology solution

- Mobilise change management teams to give staff the skills and information they will require to implement all the resulting technology, process, workflow and role changes successfully.

For more information on the Technology reform program, please refer to the District's *Roadmap for a Limited Electronic Health Transformation, 2009-2011* (February 2009). This document will be released on Monday 23 February and will be available to staff via the Gold Coast intranet site (http://qheps.health.qld.gov.au/gldcoast/).

3   How will we get there?

This section describes the high level roadmap we will follow to implement our transformation program.

Our transformation program will be implemented as part of the wider journey to open the new Gold Coast University Hospital in 2012. The high level timeline for the transformation program is illustrated below:
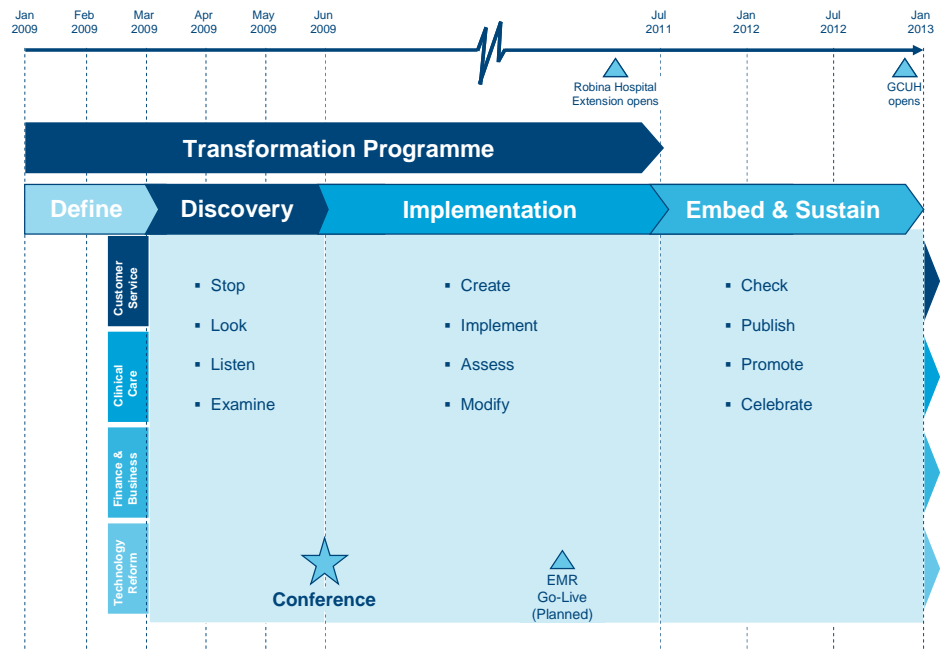
The program will run for 30 months commencing January 2009 and with a scheduled completion date of July 2011. An additional phase will operate after this date to allow us to embed and consolidate the changes in preparation for the move to the new GCUH campus in 2012.

Approach

There are four phases in our overall approach to managing and implementing our transformation program. These are:

- Definition
- Discovery
- Implementation
- Embed and Sustain.

Definition phase (January – February 09)

The Definition phase of the program has commenced with the development of a vision for becoming the greatest public healthcare provider in Australia and the development of the program roadmap (this document). We will now commence the process to engage key stakeholders and obtain their buy-in and commitment to support us

deliver the program. We will also develop a detailed plan for the Discovery phase of the program and appoint owners for each of the core streams of work in the transformation program.

Discovery phase (March – May 2009)

In this phase, we will mobilise multidisciplinary teams to begin the process of undertaking a detailed examination of the way our organisation works to uncover the issues and challenges our staff and consumers experience. Discovery phase will involve undertaking a detailed mapping and measurement exercise across the organisation to examine the way we operate and uncover the things we would like to change. Discovery phase will involve:

- **Stopping** and taking a step back to examine the way we operate

- **Looking** at what we do and the way we work

- **Listening** to consumers and staff to understand their experiences

- **Examining** in detail how things work, how long they take and what issues and challenges we experience.

Implementation phase (June 2009 – June 2011)

In this phase, we will commence the detailed process to design and implement reforms to the issues and challenges that we have uncovered in the Discovery phase. We will kick-off the Implementation phase by launching an organisation-wide conference to:

- Familiarise staff, consumers and stakeholders with the results of the Discovery phase

- Brief them on the goals of Implementation phase

- Generate interest in the program.

Following the conference, we will launch projects and activities to develop the solutions we need to enhance our organisational capabilities and become the greatest public healthcare provider in Australia. Implementation phase will involve:

- **Creating** solutions to address the core organisational issues and challenges that are preventing us from offering the level of service we aspire to provide

- **Implementing** each of the solutions we develop

- **Assessing** how effective and successful the solutions are

- **Modifying** solutions based on the results of our assessments to ensure they deliver the outcomes we are seeking to achieve.

Embed and Sustain phase (July 2011 –)

In the Embed and Sustain phase, GCHSD will continue the process of embedding and sustaining the solutions we have implemented so that they cease to become "solutions" and instead become our standard way

of working. A key feature of this approach will be to create an organisation mindset that looks to continually improve the way we operate. This phase will involve:

- **Checking** to see that the changes are taking hold and delivering the improvements that we want

- **Publishing** our results so everyone is aware of how we are performing and where our areas for improvement are

- **Promoting** and communicating our success and looking for ways to extend these throughout the organisation

- **Celebrating** our success and taking the time to acknowledge our people for all they have achieved.

Key milestones

The key milestones for the program are as follows:

Milestone	Date
Definition phase commences	January 2009
Definition phase completed	28 February 2009
Discovery phase commences	1 March 2009
Discovery phase completed	31 May 2009
Implementation phase commences	1 June 2009
Electronic medical record go-live	1 September 2010
Robina Hospital Expansions opens	1 May 2011
Implementation phase completed	30 June 2011
Embed and Sustain phase commences	1 July 2011
Risk period of returning to old practices as Gold Coast Hospital prepares to move to Parklands	1 July 2012 to 12 December 2012
GCUH opens	12 December 2012

Key accountabilities

The key accountabilities associated with implementing the transformation program are:

- The Chief Executive Officer and Chief Operations Officer will sponsor the program and are ultimately accountable for the successful delivery of the desired program outcomes

- The Strategic Development division will coordinate the planning and implementation of program strategies and initiatives consistent with the milestones

- Executive Directors will be accountable for the development and implementation of agreed strategies through their divisional services.

For more information

For information on the GCHSD Transformation program, please contact the office of Strategic Development on (07) 5519 7056 or visit QHEPS: http://qheps.health.qld.gov.au/gldcoast/.