

May 2015

# News for staff

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Welcome to the first edition of Transforming Health News for Staff.

This publication will be issued regularly to keep you up to date on the progress of Transforming Health and provide further information on key milestones.

If you have any Transforming Health stories you would like to share or questions you would like answered, please email [transforminghealth@health.sa.gov.au](mailto:transforminghealth@health.sa.gov.au)

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## Planning underway to provide the best care this winter

Managing winter demand is important. Part of [Transforming Health](#) is to take steps to improve how the system responds in peak demand. During the peak winter period of 2014, South Australia's metropolitan emergency departments saw significantly more patients than in previous years, with a corresponding increase in admissions.

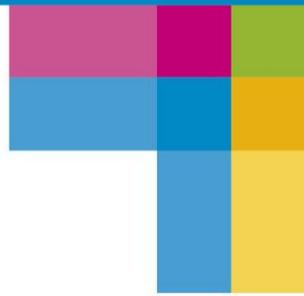
While the influx was in part due to a bad flu season, it was also attributed to difficulties in getting patients safely and efficiently through a hospital from when they present to an emergency department, receiving timely diagnostics, early clinical decision-making and then discharging the patient home or admitting them to a bed. All supporting clinical and business processes must be streamlined and work well together, especially during times of additional demand.

This is why significant work has already started to improve patient access and flow at Flinders Medical Centre and the Royal Adelaide Hospital. Healthcare system specialists McKinsey and Co are now working with frontline staff in two Local Health Networks to design, pilot and implement strategies to manage peak demand and improve the way patients move through the system over the upcoming winter period. These strategies have been designed in collaboration with those who understand the intricacies of the health system best – doctors, nurses, and allied and scientific health professionals. Some of the work includes:

- > Identifying the specific system and process issues in hospitals that cause delays to patient care, or where co-ordination of a patient's care isn't seamless
- > Designing solutions to target bottlenecks in clinical and business processes
- > Developing the tools and capability to continuously review and improve clinical and business processes
- > Planning for the introduction of these solutions so that they are successfully in place to respond to winter demand, as well as their ongoing review to ensure they meet the needs of patients.

A new 'Emergency Departments Are for Emergencies' campaign will encourage members of the public to consider if their condition is really an emergency before presenting at an emergency department. The new campaign will also remind South Australians that emergency care is available 24 hours a day, 7 days a week to provide the community with assurance that emergency care will be there if it is needed.

With the ongoing involvement and support of our staff, we can meet the quality standards and principles developed through Transforming Health to deliver best care, first time, every time.



## Expert panel starts planning for new PTSD Centre for Excellence

An expert panel has been established to advise the government about the model of care and building requirements for the new Centre for Excellence for the treatment of Post-Traumatic Stress Disorder (PTSD).

The panel, which is co-chaired by Associate Professor Susan Neuhaus C.S.C., Chair of The Repatriation Hospital Foundation and Professor Dorothy Keefe P.S.M., Transforming Health Clinical Ambassador, met for the first time on Tuesday 24 March.

The inaugural meeting brought together a number of clinical experts, Veteran representatives, emergency services and senior Department for Health and Ageing staff. At the meeting, members agreed to establish communication channels to share information about the work of the panel with interested stakeholders, including releasing a bulletin after each meeting to detail the work in progress.

The panel held a workshop on Tuesday 14 April to begin the process of carefully considering the key elements of a proposed model of care for the Centre for Excellence, which will replace Ward 17 at the [Repatriation General Hospital](#) in providing essential PTSD treatment to the Veterans' community of South Australia.

Dr Taryn Cowain, Head of the Department of Psychiatry at the Repatriation General Hospital, opened the workshop by outlining the current services provided by Ward 17. The panel then began the process of exploring the current and future mental health needs of Veterans to determine an appropriate model of care.

The potential location for the Centre for Excellence will be considered once all the elements of the model of care have been decided.

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## Unlocking capacity in our health system

Unlocking capacity is a core component of [Transforming Health](#) because it will facilitate the system-wide changes that are essential to enable our staff to provide all South Australians with best care, first time, every time.

Some examples of ways we will unlock capacity in the health system include:

- > Rostering senior nurses and doctors on-site overnight and on weekends and allied health staff available during weekends, so that patients can be admitted to hospital faster, start treatment earlier and get treatment for deteriorating conditions quicker
- > Extending criteria-led discharge so that patients who are ready can return home sooner
- > Collocating rehabilitation and medical services so that rehabilitation can start sooner and to minimise the risks of patients deconditioning
- > Collocating and consolidating some services to improve patient outcomes, including creating new processes to reduce the risk of elective procedures being cancelled and ensuring our specialist clinical teams see the recommended numbers of patients to retain their high-level skills
- > Implementing statewide models of care to provide consistency across the state
- > Converting multi-day cases to day cases, and ensuring consistency in theatre start times, scheduling and calling of patients for operations

- > Developing direct admission pathways for mental health consumers who are known to the Community Mental Health Services so they can bypass the Emergency Department and be directly admitted to a hospital bed.

## SAHMRI to lead evaluation of Transforming Health

The South Australian Health and Medical Research Institute (SAHMRI) will lead the evaluation of [Transforming Health](#), bringing together skilled researchers and data infrastructure from across the state.

Professor Steve Wesselingh, Executive Director at SAHMRI, will co-chair the Advanced Health Research and Translation Centre Executive Group for Transforming Health, along with SA Health's Deputy Chief Executive, Jenny Richter. The group is responsible for evaluating Transforming Health to ensure it is having a positive impact on the health of South Australians and that changes lead to improvements in quality outcomes.

Throughout the research and evaluation process for Transforming Health, SAHMRI will engage researchers, health services, industry and the community to translate data-driven evidence into practice and policy that delivers enhanced health service delivery and improved health outcomes for the state.

The Advanced Health Research and Translation Centre Executive Group held their inaugural meeting on Wednesday 29 April 2015.

SAHMRI has recently been recognised as being amongst the world's best for using medical research to improve patient care, being awarded the title of Advanced Health Research Translation Centre by the National Health and Medical Research Council (NHMRC). It brings together South Australia's three largest universities, with the SA Government, the former Medicare Locals, the Aboriginal Health Council SA, and the Health Consumers Alliance, in research that delivers health outcomes and community impact.



### Q&A with Dorothy Keefe, Clinical Advisory Group Chair

Professor Dorothy Keefe P.S.M. is the Clinical Ambassador for Transforming Health and the Chair of the Clinical Advisory Group, which will provide clinical leadership on the implementation of [Transforming Health](#) initiatives.

#### What is your vision for the Clinical Advisory Group?

Health reform works best when it is clinician-led, patient-centred, evidence-based, data-driven and supported by an electronic health record. My vision is for the Clinical Advisory Group – doctors, nurses and midwives and allied and scientific health professionals who work in our healthcare system – to provide clinical leadership and guide the way we implement Transforming Health.

The role of the Group is to outline the details for how we plan to transform health in each service area. For example, for stroke, we are starting by reviewing the changes to stroke services and defining what the 24 hour statewide service will look like, what supports it will need and where, and how all the teams around the state will work together to get patients to the right place to receive the right care, and then home again quickly.

The Clinical Advisory Group will ensure that everything we do as part of Transforming Health fits with the principles and standards developed by our doctors, nurses and midwives and allied and scientific health professionals.

### **How will the Group's work influence the Transforming Health process?**

The Clinical Advisory Group plays a key role in developing the changes that will take place under Transforming Health. We will develop, review and approve health reform initiatives and provide them to the Transforming Health Program Board, which will ratify them and oversee implementation in the Local Health Networks.

### **Who is a part of the Clinical Advisory Group and how often do you meet?**

The Group currently has 28 members, including doctors, nurses and midwives and scientific and allied health professionals from across SA Health. The Chief Medical Officer, Chief Nurse and Midwifery Officer and Chief Allied and Scientific Health Advisor are also members of the Clinical Advisory Group. We meet on a fortnightly basis and have had a number of meetings and a training session so far.

### **What is the Group's current focus?**

We have prioritised our first three areas of work. We will work across all areas of Transforming Health but we are starting by focussing on developing detailed plans for stroke services, fragility fractures and acute coronary syndrome. We have also developed our Terms of Reference and started leadership training for our clinicians to make sure they have the skills needed to effectively lead health reform.

### **What are the Group's key challenges?**

One of our biggest challenges is that everyone is keen to get the work done immediately, but that is not really possible. We have to set up each area of the system, test that it works, refine it as we go along, and make sure that the changes we make result in better health outcomes for South Australians. That means that evaluating our outcomes is a key priority.

### **What outcomes would you like to achieve?**

I would like to see the Group deliver health reform initiatives in all identified areas of service delivery and for us to monitor the success of Transforming Health. Success will be evident in two ways:

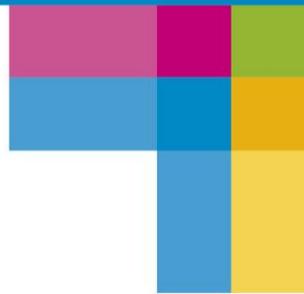
1. An increase in consistent quality care as measured against our principles and standards
2. A reduction in the amount of time patients spend in hospital, which will reduce the number of blocked beds in our hospitals so that we can get better flow through the system, from presentation at an emergency department to discharge home.

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## **Community events summary**

Following the release of [Delivering Transforming Health – Our Next Steps](#) on 17 March 2015, 48 Transforming Health information sessions were held at hospitals and community locations across metropolitan Adelaide throughout March and April 2015.

These events gave community members and staff the opportunity to gain more information about the next steps for Transforming Health and how the changes will affect their local hospital. More than 800 people attended an event which is the start of an ongoing, consultative process with staff, community and industry organisations.



## Inaugural Consumer and Community Engagement workshop

In [Delivering Transforming Health – Our Next Steps](#), the Government affirmed its commitment to engaging and consulting with the community and consumers throughout the implementation of Transforming Health.

A first step in this process is to develop the Peak Consumer and Community Engagement Forum for Transforming Health to guide and direct engagement with consumer and community groups.

On 7 May 2015, more than 80 people attended a workshop held in partnership with the Health Consumers' Alliance of SA (HCA) to establish the Peak Consumer and Community Engagement Forum and Strategy. HCA will co-chair the Forum once it is established.

The workshop brought health consumers together with representatives from peak health organisations and the Government to discuss what the Forum might look like, who should be involved, what the priorities might be and what principles should underpin the work of the Forum. Workshop participants also discussed what methods and mechanisms of engagement could be used to meaningfully engage with health consumers throughout the Transforming Health process.

Following the workshop, HCA will work with SA Health to establish the Peak Consumer and Community Engagement Forum. The Forum will provide broad, strategic and representative consumer and community engagement; communicate with consumers and between communities to proactively identify concerns and solutions; and match the intent of Transforming Health with community aspirations for best care, first time, every time in the way that those communities prefer.

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### Example of a patient journey:

#### The cost of elective surgery cancellations

John is a 70 year old man who was booked in for his elective hernia operation at The Queen Elizabeth Hospital.

John struggles to get around these days as his eye sight is declining and arthritis has set in, but he still does a great job caring for his wife Elsie. Elsie has Parkinson's Disease which has now progressed to the stage where she is in a wheelchair and needs extra care for daily activities such as showering. Between John and the Royal District Nursing Service, Elsie is able to be cared for in her own home.

On the day of John's surgery, his daughter Emma has planned to take the day off work so that she can pick him up early and get him to hospital on time. After waiting to make sure her Dad is okay after the surgery, Emma plans to head back to her parents' house to check on Elsie, who will be looked after by a carer as John will be in hospital overnight.

John is also a diabetic and Emma worries about him fasting overnight and not having breakfast in preparation for surgery. She has heard that sometimes surgery can be postponed to late in the day which could mean her Dad would have to go a long period of time without eating. Emma worries about both of her parents and their health.

Late on the afternoon before John's planned surgery, the hospital rings. They are very apologetic and advise him that they need to cancel his surgery as the theatre is needed for emergency surgery, creating a backlog in elective surgery. The hospital assures John that his surgery will be rebooked soon. The postponement is not only an inconvenience for John, but also for his daughter Emma, his wife Elsie and the carer enlisted to look after Elsie while John is in hospital.

Under [Transforming Health](#), John will be able to choose to have his surgery at a dedicated elective surgery centre, where it is less likely to be postponed due to emergency surgery.



Through Transforming Health, three dedicated elective surgery centres will be created, with multi-day surgery provided at The Queen Elizabeth Hospital, day surgery at Noarlunga Hospital and eye surgery at Modbury Hospital. Having specialist streams will mean fewer cancellations, shorter waiting times, teams that see enough patients each year to maintain and improve their skills and better planned and managed care for patients like John.

Elective surgery will continue at other hospitals and all metropolitan hospitals will increase their provision of elective day surgery procedures.

We are committed to improving the performance of our systems of care, including elective surgery, so that stories like John's are rare and so that patients and their families can rely on our health system to provide the best care, first time, every time.

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## For more information

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