



STANDARD 1: Clinical Governance

CRITERION: Governance, leadership and culture (Action 1.1 – 1.6)

Leaders at all levels in the organisation set up and use clinical governance systems to improve the safety and quality of health care for patients.

Provide a summary of the processes that are in place to meet this criterion.

WH's (WH) approach to clinical governance is called 'Best Care'. Initially developed in late 2013 in consultation with consumers, staff and the Board, this approach describes a vision for the best possible care for all WH patients and focuses on the behaviours, strategies and organisational systems needed to achieve this vision.

Best Care is outlined in a dedicated WH Policy and Framework, with a range of related policies and procedures covering quality and safety systems such as incident reporting, risk management, variation monitoring and staff education integrated into our centralised policy, procedure and guideline (PPG) system.

Within the WH Best Care Policy and Framework are role statements and expected behaviours for staff who provide, lead, govern and support Best Care.

WH's education and learning programs support staff development to actively engage in Best Care related systems and care practices.

The WH Best Care Framework and accompanying Action Plan translate the WH Purpose into organisational objectives, strategies and priority actions to improve point of care clinical practices and systems supporting Person-Centred, Co-ordinated, Right and Safe care. Best Care priority actions are incorporated into and referenced within WH's annual business plans.

WH is an official signatory to the National 'Close the Gap' Statement of Intent, and in line with this commitment, the organisation actively supports the objectives and priorities of the Victorian Government's Korin Korin Balit-Djak Aboriginal Health, Wellbeing and Safety Strategic Plan 2017-2027.

These priorities, as well as core elements of the Reconciliation Action Plans are reflected in WH's Aboriginal Health Plan led by the organisation's Aboriginal Health Unit and overseen by the Aboriginal Health Steering Committee, and the complementary Aboriginal Employment Plan led by the Workplace Strategy and Wellbeing arm of WH's People, Culture and Communications Directorate.

How does the health service monitor the requirements of this criterion are being met and where is the information reported?

A Best Care Committee structure supporting reporting from operations through to the WH Board is integrated into the overall WH Committee Structure and a bi-monthly WH Best Care Report is generated against the dimensions of Person-Centred, Co-ordinated, Right and Safe Care.

The WH Monitoring and Performance (MaP) warehouse provides a central resource for a range of Best Care performance measures.

Informing and supporting the ongoing review and improvement of WH's quality and safety systems is our engagement with Safer Care Victoria, the Victorian Agency for Health Information, and Better Care Victoria.

These state-wide agencies were created in response to the report 'Targeting Zero: supporting the Victorian hospital system to eliminate avoidable harm and strengthen quality of care'.

A culture of safety and quality improvement is measured annually through WH's participation in the state-wide 'People Matter' Survey. A 'patient safety culture' metric is informed by staff responses to eight individual questions on culture, systems and improvement.

WH also undertakes in-house processes annually to obtain ratings from consumers and staff on how WH is performing against the WH vision of providing Best Care that is Person-Centred, Co-ordinated, Right and Safe.

An annual Quality Account publication is submitted to the WH Board, the Victorian Department of Health and Human Services (DHHS) and is accessible to WH staff, volunteers and members of the community via the WH Intranet and Internet.

Have improvements been implemented?

A dedicated 'Live Best Care' micro-site was developed in 2019 to further assist staff to understand the key principles of Best Care, improve their accessibility to essential information and share action plans and improvements.

A Live Best Care learning package was developed to complement the site and includes a survey to garner ongoing feedback from staff on their awareness and engagement in quality and safety systems.

The WH Performance Unit has enhanced MaP Reporting in 2019 through the integration of data sourced from the newly introduced Electronic Medical Record (EMR) and the introduction of Power BI reporting. Through this collaboration, several interactive dashboards have been developed which extract 'near-live' and historical data on clinical processes.

Over the past year, we have reviewed the achievements of our 2015-2018 Aboriginal Health Plan. These include developing a community pharmacy program to improve access to PBS medicines for Aboriginal patients living with chronic disease, implementing an award winning Koori Maternity Service, almost doubling the number of inpatients identified as Aboriginal, and introducing education and employment programs for Aboriginal members of our community.

To develop the WH Aboriginal Health Cultural Safety Plan for the next three years (2019-21), extensive consultation has been undertaken with WH staff, WH Aboriginal Health Steering Committee members, Aboriginal community members, and the DHHS.

Provide examples of outcomes since the previous onsite assessment:

Strong performance against the state-wide 'patient and safety culture' metric has been maintained in 2019, with an overall score of 91% against a target of 80%.

88% of WH staff also reported in 2019 that they agree that their manager displays strong leadership in promoting Best Care.

Our commitment to Aboriginal Health is reflected in the achievements from the 2015-18 Aboriginal Health Plan and external recognition of our Koori Maternity Service at the 2019 Victorian Public Healthcare Awards.

External interest in our Best Care Framework continues to be evident, with key elements visible in other Victorian Health Services.

CRITERION: Patient safety and quality systems (Action 1.7 – 1.18)

Safety and quality systems are integrated with governance processes to enable organisations to actively manage and improve the safety and quality of health care for patients.

Provide a summary of the processes that are in place to meet this criterion.

WH's Best Care Framework encapsulates our approach to organisational quality and safety management. Best Care describes a vision for Person-Centred, Co-ordinated, Right and Safe Care for all WH patients and focuses on the behaviours, strategies and organisational systems needed to achieve this vision. These systems are grouped under five headings (or pillars) – Leadership, Process, Workforce, Improvement, with the central pillar 'Patient First'.

The **Process** pillar focuses on maintaining and enhancing the policies, procedures, guidelines (PPGs) and tools supporting the delivery of Best Care. WH's PPG system supports the development, authorisation, promulgation and review of PPGs covering quality and safety systems and associated risks. PPGs are based on and referenced to relevant legislation, industry standards and clinical best practice, and are available to staff through the WH intranet.

WH's PPGs guide the clinical practice that is documented by healthcare records available to clinicians at the point of care. WH administers an EMR and digital medical record (DMR) for all patients, available at the point of care and accessible through any computer device connected to the WH network.

The **Improvement** pillar focuses on:

- **Utilising purposeful information collection from audits, indicators and incidents to analyse, share and respond to identified risks and opportunities to improve Best Care** – this is supported by a Risk Management Framework that aligns to the International Standard ISO 31000:2009, an Incident Management System that meets the requirements of the Victorian Health Incident Management System (VHIMS), and a Variation Management approach that draws together processes such as clinical audits, data review, Morbidity and Mortality (M&M) meetings and the use of clinical quality registries.
- **Supporting improvement activity to maximise positive impact on patient care and outcomes** – this is supported by annual business and Best Care action planning, the Live Best Care approach for Improvement and Innovation and a dedicated team which assists staff in applying consistent quality improvement methodology.
- **Reporting and recognising Best Care Improvement activity** – this is supported by a WH Improvement Register, the WH 'Live Best Care' microsite, an annual Best Care and Research Conference, publication of an annual Quality Account, and participation in external healthcare improvement conferences and awards programs.

How does the health service monitor the requirements of this criterion are being met and where is the information reported?

The continuing review of PPGs is flagged through reporting of scheduled document review and operational reporting mechanisms such as variation monitoring, Morbidity and Mortality reviews and the report and management of clinical and non-clinical incidents.

WH's Monitoring and Performance reporting solution (MaP) brings together data from WH's health records and operational patient and incident systems to provide a single source of truth for performance reporting.

This data, plus the output from a number of quality and safety system registers created within the WH SharePoint Platform eg risk, business planning, and improvement, inform the reporting to WH's Best Care Committees that are integrated into the overall WH Committee Structure.

Reporting includes a bi-monthly WH Best Care Report generated against the dimensions of Person-Centred, Co-ordinated, Right and Safe care.

Informing and supporting the activity and ongoing review and improvement of WH's quality and safety systems is our engagement with Safer Care Victoria, the Victorian Agency for Health Information, and Better Care Victoria. This includes the completion of an annual Organisational Strategy Improvement Matrix (OSIM) self-assessment on the maturity of WH's systems for supporting the monitoring, review and improvement of quality, safe care and service delivery.

WH staff also provide feedback on their awareness and engagement in quality and safety systems through the WH 'Live Best Care' learning package.

An annual Quality Account publication is submitted to the WH Board, the DHHS and is accessible to WH staff, volunteers and members of the community via the WH Intranet and Internet. This Report brings together the activity and outcomes of a number of quality and safety systems to report on performance against the WH vision of providing Best Care that is Person-Centred, Co-ordinated, Right and Safe.

Have improvements been implemented?

The WH Performance Unit has enhanced MaP Reporting in 2019 through the integration of data sourced from the newly introduced EMR and the introduction of Power BI reporting. This has supported access to 'near-live' and historical data to support clinical care and data review that was previously collected manually. A Power BI Report has also been generated to support monthly status reporting on PPGs.

Integration of the 'RiskMan' Incident management system with Power BI reporting in MaP provided a valuable tool to track and action (as required) live incident reporting throughout the implementation phase of the EMR. A project was also undertaken in 2019 to standardise the M&M meeting structure. Two units participated in a pilot with more units scheduled to come on board by mid-2020.

Planning has been undertaken to load patient information onto the My Health Record (MyHR). EMR-related work continues to enable the loading of discharge summaries onto the MyHR and WH is participating in state-wide projects to load diagnostic reports.

Engagement with Safer Care Victoria (SCV), the Victorian Agency for Health Information (VAHI), and Better Care Victoria (BCV) has informed the development and application of the 'Live Best Care' improvement methodology. This is visible in projects such as 'Sepsis Pathway' and 'Choosing Wisely'. WH is also currently piloting a new information platform with VAHI.

Provide examples of outcomes since the previous onsite assessment:

The introduction and development of information technology has improved the maturity of WH's quality systems and the capacity for these systems to be integrated with governance processes supporting the Best Care domains of Person-Centred, Co-ordinated, Right and Safe Care.

Staff feedback demonstrates greater awareness and supported use of quality and safety systems. For example, 74% of staff in 2019 agree that their area has sufficient access to data which supports the monitoring of care or service delivery compared to 61% in 2017. In addition, 79% of staff in 2019 feel sufficiently supported and encouraged to be involved in the review and improvement of care or services compared to 73% in 2017.

The annual WH Quality Account continues to highlight significant Best Care improvement activity and performance improvement, with WH attracting multiple awards in the past 2 years from external programs designed to showcase and acknowledge healthcare improvement activity.

CRITERION: Clinical performance and effectiveness (Action 1.19 – 1.28)

The workforce has the right qualifications, skills and supervision to provide safe, high-quality health care to patients.

Provide a summary of the processes that are in place to meet this criterion.

WH's Best Care Framework describes a vision for Person-Centred, Co-ordinated, Right and Safe Care for all WH patients and focuses on the behaviours, strategies and organisational systems needed to achieve this vision. These systems are grouped under five headings (or pillars) – Leadership, Process, Workforce, Improvement, and the central pillar 'Patient First'.

The **Workforce** pillar focuses on recruiting and supporting a workforce with the right qualifications, skills and supervision to provide Best Care. Workforce management systems supporting our staff to provide Best Care focus on:

- **Supporting the workforce to understand their role and responsibilities for Best Care** – this is supported by articulation of the role and responsibilities for staff within the Best Care policy, framework and learning package. WH makes a concerted effort to translate much of the complex information that supports great clinical care into clear, readily available, clinician-friendly procedures and guidelines, and uses a range of variation monitoring methods including clinical quality registries, auditing, Morbidity and Mortality meetings, peer review and benchmarked data to support the ongoing review and improvement of care.
- **Appropriately orienting and training the workforce to provide Best Care** – this is supported by Best Care focused WH orientation, 'WeLearn' education packages and educators. WeLearn and Simulation training also support mandatory training, and cultural immersion training improves staff awareness of the Aboriginal and Torres Strait Islander health needs.
- **Ensuring clinicians are appropriately credentialed and work within agreed scope of practice** – this is supported by the WH Credentialling and Scope of Practice policy and procedures that are compliant with AHPRA and external guidelines, and cover medical, nursing and allied health staff. These procedures are supported by discipline specific credentialing committees and an online credentialing system (Cgov).
- **Routinely reviewing individuals' performance in provide Best Care** – this is supported by WH's Performance and Development system that includes annual performance reviews (titled Professional Development Plans at WH) and performance development planning.
- **Providing supervision to clinicians to provide Best Care** – this is supported by a range of discipline specific clinical supervision models and education resources.

How does the health service monitor the requirements of this criterion are being met and where is the information reported?

WH's Committee Structure incorporates discipline specific committees covering credentialing and scope of practice, and an organisation-wide Education and Learning Committee, while the WH Best Care Committee structure supports clinical care variation reporting from the ward to the Board.

The 'Cgov' system supports the monitoring of workforce governance, including professional registration and credentialing and scope of practice status, while data is accessed from the WeLearn platform to track staff engagement in training. In addition, the WH Monitoring and Performance (MaP) warehouse provides a central resource for a range of Best Care performance measures, including the engagement of staff in mandatory education and performance reviews

MaP is also a central resource for clinical variation reporting both internally and to the Victorian Agency for Health Information (VAHI). This Agency in turn provides benchmarking data on a range of clinical performance measures, as do the Clinical Registries to which WH subscribes.

WH staff provide feedback on whether they feel supported to deliver clinical practice and their professional growth through the annual state-wide People Matter Survey and via the 'Systems Supporting Best Care' survey accessed through the WH 'Live Best Care' learning package. Annually, a survey is distributed by the Centre for Education to all employees to evaluate current training programs offered to WH employees. This survey also seeks feedback on areas of training that staff would like to have provided. Survey results are analysed and contribute to the planning of ongoing training and education programs.

Have improvements been implemented?

In line with WH's 'Best People' Strategy, a range of staff training and development opportunities have been implemented and redesigned to build the capability of staff to support Best Care. Support for training has been reviewed and enhanced to improve engagement. Training has also adapted to support the changing clinical environment within WH. For example, using Simulation, new Rapid Response Code activation and response processes were thoroughly tested prior to the opening of the Joan Kirner Women's and Children's building in May 2019. To complement face-to-face orientation for new staff, an online orientation program has been developed. A new 'Live Best Care' learning module has also been developed to support staff understand how Best Care relates to their day-to-day practice.

Improvements have also been made to the Cgov credentialing system for clinical staff. In 2018, WH subscribed to AHPRA's Professional Information Exchange (PIE) module which automatically alerts the discipline-specific medical credentialing officer on a weekly basis if any WH clinical staff have changes to their AHPRA profiles. A Cgov module has also been developed in-house which enables theatre nursing staff to view a 'read-only' dashboard of medical staff's credentialing and scope of practice status.

The Aboriginal Health Plan 2015-18 supported more than 1,000 WH staff and volunteers to undergo cultural responsiveness and immersion training, as well as providing opportunities for vocational training for members of our community with an Aboriginal background.

In order to create the best possible environment to provide care, WH has progressed its Positive Workplace Strategy. This has included implementation of the SCORE (Sustaining a Culture of Respect and Engagement) Project. Initial results show improvement in the level of civility of co-workers, improved trust with supervisors, and interactions with patients and families.

In 2018-19, 154 nurses and midwives engaged in various leadership programs, including the 'Working Together' pilot program and the 'Transforming Leadership Capability' program.

In addition, the integration of EMR sourced data with the WH MaP system and the introduction of Power BI performance reporting has supported the provision of variation monitoring.

Provide examples of outcomes since the previous onsite assessment:

Staff training programs have been further developed to support strong compliance with mandatory training requirements, with learning offerings well aligned with focus areas to support staff provide safe, high quality care. The impact of this is apparent in, for example, favourable benchmarking of the incidence of complications of patient care and compliance with clinical processes supporting safe care eg moments of hand hygiene and use of emergency codes.

There is a cultural element to this as well, with for example, nearly double the number of WH patients identified as Aboriginal following cultural immersion training and 96% of staff agreeing through the 2019 'Systems Supporting Best Care' survey that their area respects diversity and responds to patients and visitors in a culturally appropriate way.

Other positive staff feedback from this Survey is 98% of staff agreeing that they understand their roles and responsibilities for providing or supporting Best Care.

The introduction and/or development of information technology has also improved the maturity of WH's quality systems to support the monitoring and review of clinical care variation.

CRITERION: Safe environment for the delivery of care (Action 1.29 – 1.33)

The environment promotes safe and high-quality health care for patients.

Provide a summary of the processes that are in place to meet this criterion.

Building, plant and equipment at WH are maintained in compliance with relevant standards and codes, e.g. AS3003 'testing of patient treatment areas' and AS3551 'testing of biomedical equipment'. Engineering preventive and reactive maintenance is performed by in-house WH trade staff and external contractors if required. Work details are captured within Engineering's management system BEIMS with jobs linked to relevant asset codes, preventative maintenance schedules or project codes.

Cleaning schedules and cleanliness audits also support a safe environment for the delivery of care, as does the WH Occupational Health and Safety Team who provide tools and support to identify and address environmental hazards and risks.

WH has a range of organisational processes for the prevention and effective management of Occupational Violence and Aggression (OVA) for the protection of staff and others in the workplace. These reflect the principles of the Victorian DHHS Framework for Preventing and Managing OVA, and cover the domains of: Governance, Prevention, Training, Response, and Reporting and Investigation. WH has a Prevention and Management of OVA procedure with oversight provided by the WH OVA committee.

WH has a comprehensive 'Wayfinding' strategy applied across each of its sites. This is outlined in the WH Wayfinding and Signage Policy. This strategy focuses on identification of the most effective way to direct people through a space and includes printed information, design elements or architectural features, digital devices (for example kiosks) and human interactions (for example WH volunteer visitor guides).

Visitors have access to all designated public areas (unless access controlled or restricted) during normal business hours of the hospital. Visitors with special circumstances can arrange visitation within restricted patient care areas and beyond normal business hours with the Nurse Unit Manager or Midwife Unit Manager, or the Nurse or Midwife in Charge. Where complex social situations, security or behavioural concerns have been identified, further assessment of visiting arrangements are undertaken, with security staff involvement as required.

WH has a strong commitment to improving Aboriginal and Torres Strait Islander health, by providing a culturally respectful, high quality, safe, collaborative and holistic health care organisation. WH's Aboriginal Health Steering Committee provides advice and direction to the organisation on matters relating to improving the health of Aboriginal patients and a welcoming environment.

A welcoming environment at WH includes acknowledgement plaques at the entrance of hospital sites, Aboriginal flags flying at main entry points and displayed in reception areas and boardrooms, artwork commissioned by Aboriginal artists, communication resources, and a dedicated Aboriginal Health Liaison Unit and Manager. Culturally sensitive health programs such as maternity care are also available to support Aboriginal health needs.

How does the health service monitor the requirements of this criterion are being met and where is the information reported?

Systems such as the BEIMS engineering management system, the WH RiskMan incident system and auditing and data programs support the reporting of information relating to the environment of care at WH.

The WH Committee Structure supports the review and action planning or implementation associated with monitoring and enhancing the care environment within WH.

Associated committees include a Capital Committee, an OVA Committee, an Aboriginal Health Advisory Committee and an Infection Prevention Committee.

An annual Quality Account publication reports on the environment of care at WH. This is submitted to the WH Board, the Victorian DHHS and is accessible to WH staff, volunteers and the community via the WH Intranet and Internet.

Have improvements been implemented?

WH has been engaged in an extensive program of capital development to improve the environment of care at WH. This has included significant infrastructure works at Footscray Hospital, a transformation of public spaces at Williamstown Hospital, and the construction of a fit-for-purpose building for the care of women and children at Sunshine Hospital.

The Joan Kirner Women's and Children's (JKWC) opened its doors to patients on 15 May 2019. The JKWC offers local women and families world-class maternity and paediatric services and features the western suburbs' first neonatal intensive care unit. This contemporary designed building significantly enhances WH's ability to safely deliver care.

The development of JKWC also provided the opportunity to develop four Support Person Accommodation (SPA) facilities. These facilities can be used for family/carers from regional areas, and for the family or carers of critically ill or unstable patients.

Footscray Hospital's capacity to deliver a fit-for-purpose, safe environment for patient care also received a significant boost (\$1.5 Billion) following the Victorian Government's commitment in October 2018 to provide a new hospital. Planning work for the new hospital is continuing ahead of construction starting in 2020 and scheduled for completion in 2025. The State Government also committed funding for expansion of the Sunshine Hospital Emergency Department into a 3-level facility with a doubling of points of care. This building is due for completion in 2021.

WH staff reported over 300 occupational violence incidents in 2018-19, with nearly 7% of these resulting in a staff injury or illness. A number of initiatives have been rolled out to support our staff to predict and prevent occupational violence, and effectively and safely manage it when it does occur. These initiatives include awareness and education campaigns for staff and visitors, new personal duress alarms, new procedures for response to aggression, and use of a behaviours of concern risk assessment tool which has been highly commended by Worksafe in the 2019 awards and won the Victorian Public Healthcare Award for staff safety in the same year.

Informed by the WH Aboriginal Health Plan 2015-2018, engagement of the Aboriginal community has led to a number of innovative programs to support health needs in a culturally sensitive manner. These include care for Aboriginal patients through a Special Needs Dental Program established at Williamstown Hospital, provision of capes for Aboriginal women to use during group-based breast cancer screening sessions, and piloting of a Cultural Safety Audit Tool.

Provide examples of outcomes since the previous onsite assessment:

WH's engagement in an extensive program of capital development has seen significant improvements to the environment of care at WH.

The cultural safety of the environment of care for Aboriginal patients has also been enhanced through implementation of the WH Aboriginal Health Plan 2015-18. In consultation with the Aboriginal community, a new WH Aboriginal Cultural Safety Plan has been developed for 2019-2021, with implementation underway.

Initiatives to support staff in predicting, preventing and managing occupational violence are having a positive effect on the number of significant incidents from violence and have attracted interest from other health services and external healthcare improvement Awards.