



STANDARD 2: Partnering with Consumers

CRITERION: Clinical governance and quality improvement systems to support partnering with consumers (Actions 2.1 & 2.2)

Systems are designed and used to support patients, carers, families and consumers to be partners in healthcare planning, design, measurement and evaluation.

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

Within Western Health's (WH) Best Care Framework, quality and safety systems that support our staff to provide Best Care are grouped under five headings (or pillars), with 'Patient First' as the central pillar. 'Patient First' encompasses the quality and safety systems used by WH to support partnering with consumers under the headings of: Working Together, Shared Decision-Making, Equity and Inclusion, Effective Communication, and Personalised and Holistic Care.

Dedicated roles such as the Manager of Consumer Partnerships and Diversity, support Patient First system development, operation and ongoing improvement. A Patient First Committee with consumer representation sits within WH's Best Care Committee structure. WH has an overarching policy and framework governing Patient First. A dedicated Patient First intranet site provides a central resource for information and tools on Patient First related systems, with procedures developed for processes such as collecting patient stories and recruitment of consumer representatives.

WH's organisation-wide orientation program includes a focused section on partnering with consumers and WeLearn packages such as 'Hello My Name Is' and 'Cultural Diversity' are available to support staff understand the value of partnering with consumers and how to do this effectively. WH has also engaged in external programs to educate staff on techniques to support partnering with consumers eg Collaborative Pairs and improvement Co-Design. WH has an operational risk register that flags risks that relate to partnering with patients / consumers.

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

A number of systems support the measurement and review of organisational and clinical strategies for partnering with consumers.

Patients are asked about their satisfaction with partnerships to involve them in their care through WH's participation in the Victorian Health Experience Survey (VHES). VHES reporting functionality was enhanced in November 2019 to allow users to see an interim view of results at the beginning of each calendar month. VHES results are incorporated within WH Best Care dashboards that are reported through the WH Best Care Committee structure.

The WH Patient Story Program has proven an effective mechanism to review and improve the way we partner with consumers and carers in the delivery of care.

Consumer representatives on a wide range of Best Care Committees also play an integral role in reviewing existing strategies for partnering with consumers and setting priorities for action.

A staff survey on awareness and engagement in Best Care systems was linked in 2019 to a redesigned 'Live Best Care' learning package. This package is designed to obtain staff feedback on an ongoing basis on a number of quality systems, including those relating to Patient First.

The WH Best Care Committee structure accommodates and supports Patient First related reporting, with WH's annual Quality Account publication supporting the sharing of Patient First related systems and activity.

Have improvements been implemented?

Patient First strategies and projects are prompted by a combination of proactive planning and response to monitoring activities, and are supported by the 'Live Best Care' for improvement and innovation.

Annual planning in 2019 has prompted for example the development of a WH Literacy Committee, while external direction has guided the development of a three-year Disability Access and Inclusion Plan (DAIP).

Review of WH practice against the NSQHS Standards and review of VHES data has also provided impetus to explore how partnering with consumer systems can be enhanced. Associated improvement projects include development of a 'Welcome to Ward video', Comprehensive Care consumer partnership messaging, and a redesign of WH's Patient Information development and approval process.

Collaborative Pairs methodology has been used within 2019 to enhance projects on the 'Sepsis Pathway' and 'Choosing Wisely' (appropriateness of patient tests) improvement projects. Co-designed projects are now a routine consideration for improvement activity as can be seen in projects such as Intensive Care Unit Recovery Solutions and 'Improving the Hospital Experience for Inpatients with Autism Spectrum'.

The WH Patient Story Program has proven an effective mechanism to review and improve the way we partner with consumers and carers in the delivery of care. For example, patient stories have informed our 'Call for Help' program (where patients, carers and family can escalate clinical concerns), the formation of a Bariatric Assessment Team (BAT) and our Quiet Hospital program. Video stories from patient experiences have also been made available to staff eg through the WH Live Best Care site.

Provide examples of outcomes since the previous onsite assessment:

WH has adopted the five focus areas of Safer Care Victoria's (SCV) 'Partnering for Healthcare' framework. This has helped us identify and bring together systems and improvements across WH that support Patient First.

A range of opportunities to engage and apply partnership methodology has seen increased engagement of consumers in a range of governance and improvement activities.

There has also been an increased awareness of the importance of the 'voice of the patient' in clinical care and service delivery. This 'voice' has been heard in the delivery, review and improvement of care and services.

WH adapted a SCV quality system assessment tool in 2019 to self-assess the maturity of Patient First Systems. The outcome of the initial self-assessment was a maturity rating of level 3 'Refining' (ie gaining momentum).

CRITERION: Partnering with patients in their own care (Actions 2.3 – 2.7)

Systems that are based on partnering with patients in their own care are used to support the delivery of care. Patients are partners in their own care to the extent that they choose.

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

Within WH's Best Care Framework, quality and safety systems that support our staff to provide Best Care are grouped under headings (or pillars), with 'Patient First' as the central pillar. 'Patient First' has a strong focus on WH practices and improvement activity supporting partnering with patients in their own care.

Application of all NSQHS Standards across WH has included identifying and enhancing 'patient first' focused practices supporting engagement of patients and families or significant others in their own care. These processes are outlined in the criteria summaries of the separate NSQHS Standards. These include for example, patient goal setting for comprehensive care and the 'Call for Help' program for acute deterioration.

With particular reference to WH practices supporting this criterion, WH aligns care and service delivery with the Australian Charter of Healthcare Rights. Copies of Charter booklets are available in WH Health Information Centre's (HIC's) and other areas that are accessible to the public such as main hospital thoroughfares or corridors, elevators and inpatient wards across the organisation. Information and details on how to access a copy of the Charter are also available on the WH intranet and internet pages, with links to the documentation in multiple languages.

WH has a robust policy that articulates the process to be used by WH staff when seeking patient consent for medical treatment and a detailed discussion of the issues involved in seeking consent and how to escalate. This policy is reviewed annually to ensure that it complies with current legislation and best practice. The Policy encompasses provisions for obtaining consent when a patient does not have decision making capacity, but also captures the Victorian model for Advance Care Directives

This policy is accessible to staff through the policy, procedure and guideline (PPG) site on the WH intranet and also on the Patient First intranet page. In support of this policy, the WH Electronic Medical Record (EMR) documents medical treatment decision maker (formerly known as a substitute decision maker) or support people involved in care decisions.

WH's organisation-wide orientation program includes a focused section on partnering with consumers and WeLearn packages such as 'Hello My Name Is' and 'Cultural Diversity' are available to support staff engage patients and families in care communication and decision making.

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

A number of systems support the measurement and review of WH practices supporting partnering with patients in their own care.

Patients are asked about their satisfaction with involvement in care through the VHEs. VHEs results are incorporated within WH Best Care dashboards that are reported through the WH Best Care Committee structure.

The WH Patient Story Program has also proven an effective mechanism to review and improve the way we partner with consumers and carers in the delivery of care.

WH clinical auditing activity encompasses review of patient care partnerships through, for example, perioperative and blood management patient consent audits. The WH Best Care Committee structure supports measurement and review of WH practices for partnering with patients in their own care, with WH's annual Quality Account publication supporting sharing of related improvement activity.

Have improvements been implemented?

Strategies and projects to enhance partnering with patients in their own care are prompted by a combination of response to external direction (eg legislative changes), proactive planning and response to monitoring activities, and are supported by the 'Live Best Care' approach for improvement and innovation.

Changes to the Medical Treatment and Decisions Act came into effect in March 2018 and significant work was undertaken to prepare clinicians at WH. This included delivering training in clinical areas and updating related policies and procedures, including the patient Consent policy. More recently, Policy and Pathway development and implementation were undertaken to administer the Voluntary Assisted Dying Act (Vic).

Annual planning activity has prompted in 2019 engagement of patients in a 100-day End PJ Paralysis challenge, a 'Choosing Wisely' campaign to 'Ask Why and Justify' the necessity of certain medical imaging tests, and a new menu management system (CBORD) to improve the food-matching process at WH.

Review of WH practice against the NSQHS Standards and review of VHES data has also prompted development of a 'Welcome to Ward video' which includes information about patient rights, and a Comprehensive Care 'think about the link' project that aims to enhance the role of patient, families and other support people in the identification of clinical risk and the setting of patient goals.

In 2018, Better Care Victoria selected WH as the site to partner with CivVic (public sector technology accelerator). WH subsequently co-designed a Patient-Reported Outcome Measures (PROMs) mobile application with WeGuide. A prototype of this application will be available in March 2020 to pilot in several WH clinical services.

Provide examples of outcomes since the previous onsite assessment:

There has been an increased awareness of the importance of listening to and engaging patients in their care and improvement activity to enhance partnerships. This is reflected in improvement activity that has had a focus on patient and family partnerships.

91% of WH staff completing the 2019 'systems supporting best care' survey agreed that their area follows the 'Hello My Name is' practice of introducing themselves and stating their role when interacting with patients or visitors.

Victorian Health Satisfaction Data with indicators relating to engagement in care has shown some improvement (generally and against peer health services) over the past two years, but ratings still tend to fluctuate between reporting periods.

Locally collected patient feedback has proven an effective mechanism to review and improve the way we partner with consumers and carers in the delivery of care. For example, patient stories have informed our 'Call for Help' program, the formation of a Bariatric Assessment Team (BAT) and our Quiet Hospital program.

CRITERION: Health literacy (Actions 2.8 – 2.10)

Health service organisations communicate with consumers in a way that supports effective partnerships.

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

Within WH's Best Care Framework, quality and safety systems that support our staff to provide Best Care are grouped under headings (or pillars), with 'Patient First' as the central pillar. 'Patient First' has a strong focus on WH practices and improvement activity supporting communicating with consumers.

'Patient first' focused practices supporting communication with patients and families or significant others include the use of volunteer run Health Information Centres, a Patient Representative Service, Language Services and tools, and a Patient Information 'Consumer Tick' review process.

Staff who produce consumer information utilise templates and guidelines which instruct them to use plain English and consult with at least three patients, families or carers from their own areas, before submitting written information to the WH Consumer Review Panel. The Panel consists of 12 consumers who review publications electronically and they provide a final check and 'patient approved tick' for submitted documentation. Patients and consumers also play a key consultation role when new or revised documentation is generated as part of improvement programs.

WH is one of the most culturally diverse communities in Victorian with 68% speaking a language other than English at home. Language services at WH receive approximately 4000 requests for interpreters per month for about 80 different languages.

WH's organisation-wide orientation program includes a focused section on partnering with consumers and WeLearn packages such as 'Hello My Name Is' and 'Cultural Diversity' are available to support staff communicate with patients and families. Training is also available to support staff to have difficult conversations with patients and families eg breaking 'bad news' and a recent open disclosure training course for senior clinical leaders.

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

A number of systems support the measurement and review of WH practices supporting communicating with consumers.

Patients are asked about their satisfaction with communication or information provided to them through their care episode via the VHES. VHES results are incorporated within WH Best Care dashboards that are reported through the WH Best Care Committee structure.

The WH Patient Story Program has also proven an effective mechanism to review and improve the way we communicate with consumers and carers in the delivery of care.

Data review also encompasses the communication focus areas of language services and complaints management.

The WH Best Care Committee structure accommodates and supports measurement and review of WH practices supporting communicating with patients in their own care, with WH's annual Quality Account publication supporting sharing of Patient First related systems and activity.

Have improvements been implemented?

Strategies and projects to enhance communicating with patients are prompted by a combination of response to external direction, proactive planning and response to monitoring activities, and are supported by the 'Western Way' for improvement and innovation.

In response to a Victorian Department of Health directive, WH developed a Disability Access and Inclusion Plan (DAIP) in 2019. This Plan has a focus on supporting communication through initiatives such as undertaking Scope Australia's "10 steps to Communication Access" program.

Improving communication is also a focus area in WH's 2019-21 Aboriginal Health Cultural Safety Plan.

Review of WH practice against the NSQHS Standards and review of VHES data has also prompted redesign of our Patient Information Development and Approval process and development of a Health Literacy Committee.

WH has a strong reputation for constantly improving the language services provided to our diverse community. Annual planning activity has prompted in 2019 continued implementation of new Interpreter Guidelines with inpatient interpreter episodes for the past year increasing to an average of 35% of all interpreter activity against a 30% target. All adult wards now use a bespoke version of WH's award winning CALD Assist App that helps non-English speaking patients communicate with staff. Trials of different models of video interpreter support also continue.

Co-design projects are now a routine consideration for improvement activity and have supported communication supported projects such as Intensive Care Unit Recovery Solutions and 'Improving the Hospital Experience for Inpatients with Autism Spectrum'.

Provide examples of outcomes since the previous onsite assessment:

There has been an increased awareness of the importance of communicating with patients to support effective partnerships. This is reflected in improvement activity that has had a focus on enhancing communication, particularly for those patients for whom health equity is a challenge.

VHES data shows that patient satisfaction with 'doctors, nurses and other health professionals explaining things in a way you could understand' sits above 90%.

96% of WH staff completing the 2019 'systems supporting best care' survey agreed that their area respects diversity and responds to patients and visitors in a culturally appropriate way.

Language services have continued to build on improving access for inpatients, with inpatient interpreter episodes for the past year increasing to an average of 35% of all interpreter activity against a 30% target.

CRITERION: Partnering with consumers in organisational design and governance (Actions 2.11 – 2.14)

Consumers are partners in the design and governance of the organisation.

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

Within WH's Best Care Framework, quality and safety systems that support our staff to provide Best Care are grouped under headings (or pillars), with 'Patient First' as the central pillar. Patient First has a strong focus on WH practices and improvement activity supporting partnering with consumer in the design and governance of the organisation.

WH practices include having meaningful positions for consumers on committees at multiple levels of governance and operations, maintaining and continually adding to a WH Consumer Register to support identification and engagement of consumers for a range of once-off and longer term activities, drawing on our large volunteer workforce (over 700 strong) to engage in and support consumer participation activity, providing multiple in-house and externally sponsored opportunities for consumers to provide feedback on best care at WH, and engaging consumers in service co-design and development activity. Structured support programs, including orientation and training existing for consumers engaged in the above practices.

In recognition of our diverse population, WH supports a Board level Community Advisory and Cultural Diversity Committee, and a Primary Care and Population Health Advisory Committee which includes representation from the North West Melbourne Primary Health Network (PHN). Our partnership with the PHN supports access to demographic and health data about our community.

Strategies to use patient stories within our organisation include inviting consumers and carers to present on their experiences as part of continuing education sessions eg disability awareness, interviewing patients and presenting stories at Best Care Committees, and using the voice of the patient and carer in events and forums.

WH 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 are reflected in WH's Aboriginal Health Plan led by the organisation's Aboriginal Health Unit, and overseen by the WH Aboriginal Health Steering Committee.

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

A number of systems support the measurement and review of organisational and clinical strategies for partnering with consumers in the design and governance of the organisation. Some are formal monitoring systems, eg incorporating patient feedback data into Best Care reporting. Others are informal, for example meeting face to face with consumers engaged in partnerships to gain feedback on support for their engagement.

Reporting against system activity covered by this criterion encompasses a number of operational and Best Care committee reporting lines. Consumer advisory committees play an important role, with specialist committees such as the Aboriginal Health Steering Committee, and Board level Advisory Committees. The Patient First Committee brings together the systems and improvement activity supporting partnering with consumers in health service design and governance, with WH's annual Quality Account publication supporting sharing of related activity and improvements.

Have improvements been implemented?

Strategies to enhance partnering with consumers in organisational design and governance are guided by a combination of proactive planning and response to monitoring activities, and are supported by the 'Live Best Care' approach for improvement and innovation.

In response to feedback from consumer members on WH Committees, gatherings have been organised for WH consumers to meet, support and learn with each other. WH has also collaborated with a number of healthcare and community health networks to organise annual education and networking events.

Capability of the organisation to engage consumers in design has been supported by opportunities to involve staff and consumers in external training projects covering collaborative pairs and co-design methodology. Collaborative pairs projects arising from this training include implementation of the state-based 'Sepsis Pathway' and 'Choosing Wisely' (appropriateness of patient tests). Co-design projects are now a routine consideration for improvement activity and have supported service design projects such as Intensive Care Unit Recovery Solutions and Engagement of Patients in Community Service Care Planning. WH's 2015-2018 Aboriginal Health Plan has supported resources, programs and the environment to be culturally appropriate for local Aboriginal and Torres Strait Islander communities. Aligned strategies include introduction of a 'Galinjera' Midwifery Program, an Aboriginal Health Unit that supports and informs patients about services within and external to WH, cultural competency training for staff, and incorporating cultural symbols and artwork within our hospitals. In consultation with the Aboriginal Community and the Department of Health and Human Services, WH have created a new Aboriginal Health Cultural Safety Plan for 2019-2021. This aims to advance both the cultural and clinical care of our Aboriginal patients and increase Aboriginal employment opportunities.

Provide examples of outcomes since the previous onsite assessment:

There has been an increased awareness of the importance and value of partnering with consumers in the design and governance of the organisation. This is reflected in the increased number of Best Care committees with consumer representation, and the 100+ people now on the WH Consumer Register. It is also reflected in improvement activities that incorporate an element of consumer collaboration and co-design. For the first time in 2020, consumers will also address the new medical interns during their orientation week.

79% of WH staff completing the 2019 'systems supporting best care' survey agreed that their area seeks and uses patient/customer feedback to improve care and service delivery.

The WH Patient Story Program has proven an effective mechanism to review and improve the way we partner with consumers and carers in the delivery of care. For example, patient stories have informed our 'Call for Help' program, the formation of a Bariatric Assessment Team (BAT) and our Quiet Hospital program.

Our Volunteer program is now 700+ members strong. Our Volunteers not only support consumer partnerships but are an invaluable resource to support the understanding and improvement of the patient experience.

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 as an award winner at the 2019 Victorian Public Healthcare Awards.