

# Monitoring the Quality of Care- Reform of Queensland Health

Dr Stephen Duckett  
Head, Queensland Health Reform  
Team

# Key elements for clinical governance framework

- Line management responsibility for patient safety and quality;
- Clinician and patient involvement;
- A just and open approach for managing adverse events;
- Responsibilities articulated for all levels of Queensland Health;
- Measurement of outcomes and performance;
- Transparency and accountability; and
- An emphasis on the need for Queensland Health to improve its performance in patient safety, quality and effectiveness.

# Themes

- Clinical governance involves:
  - Structures
  - Information
  - Processes

The Queensland Health clinical governance framework is the web of policies, processes and accountabilities which are directed at improving patient safety and the quality and effectiveness of Queensland Health services.

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- An emphasis on the need for Queensland Health to improve its performance in patient safety, quality and effectiveness.

## The aim:

- The right person, doing the right job
  - with the right skills
  - Working in high performance teams
  - Supported by effective organisational systems
- 
- Leading to Safer, higher quality patient care

# The right person, doing the right job...

- New credentialing processes
  - Area Credentials and Privileges Committees
  - Interim 3 month determinations by EDMS under delegation

## ... With the right skills

- New privileging processes
  - Specified so can be monitored (e.g. ICD10-AM)
  - Link to hospital role (Clinical Service Capability Framework)
- Strengthened performance appraisal
  - Required annually for medical staff
  - Including monitoring of clinical outcomes
  - Move toward 360° feedback

## ... Working in high performance teams

- Strong link between team performance, communication and safety
- Culture/climate survey
  - 25% of Queensland Health staff every 6 months
  - Includes questions about teamwork, team meetings
  - Resurveyed every 2 years
- Leadership workshops

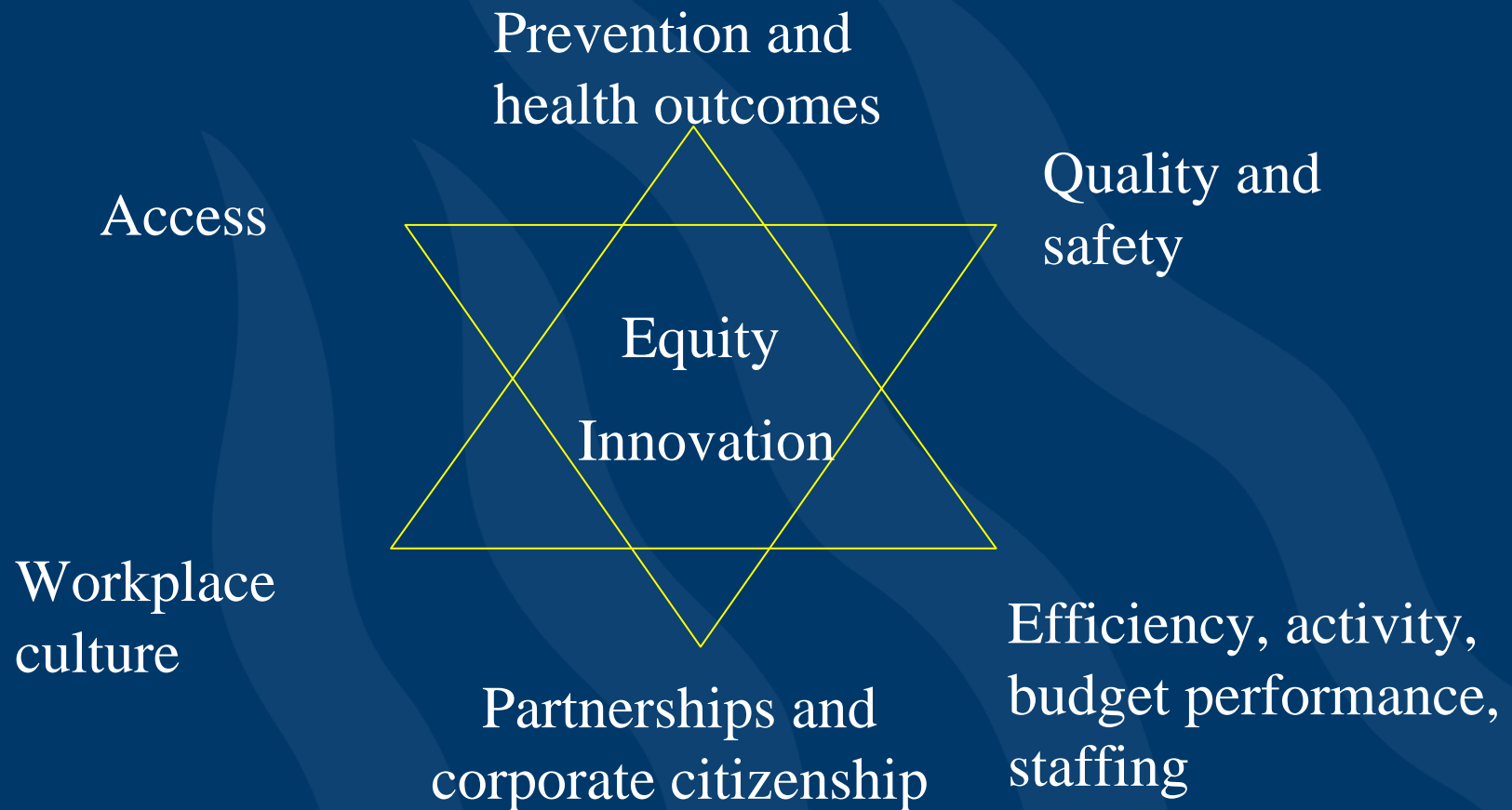
## ... Supported by effective organisational systems

- Improved planning processes
  - Volume-outcome relationship

# Supported by effective organisational systems

- Improved planning processes
  - Volume-outcome relationship
- Integrated reporting (aka balanced scorecard)

# Dimensions of integrated performance reporting



# Supported by effective organisational systems

- Improved planning processes
  - Volume-outcome relationship
- Integrated reporting (aka balanced scorecard)
- Improved transparency

Performance

- [Emergency Departments](#)
- [Emergency Waiting Times](#)
- [Quality Reports](#)

[Our Performance](#)

## Performance Reports

Reports are available in the following areas:

### Access

- [Hospital Emergency Departments](#) (updated daily)
- [Elective Surgery Waiting Times](#) (updated quarterly)

### Safety and Quality

- [Patient Satisfaction Survey](#)

### Staffing

- [Extra Staff Progress Report February 2006](#) (pdf) (updated monthly)
- [Ten Year Summary](#) (pdf) (updated annually)

### Hospital Activity

- [Detailed data from the last three years](#) (updated monthly)
- [Ten Year Summary](#) (pdf) (updated annually)

Last Updated: 28 February 2006  
Last Reviewed: 28 February 2006

| Hospital           | On Bypass | Last 5 weekdays |              |              |              |              |
|--------------------|-----------|-----------------|--------------|--------------|--------------|--------------|
|                    |           | Fri<br>03/03    | Thu<br>02/03 | Wed<br>01/03 | Tue<br>28/02 | Mon<br>27/02 |
| Bundaberg          | No        |                 |              |              |              |              |
| Caboolture         | Yes       |                 |              |              |              |              |
| Cairns             | No        |                 |              |              |              |              |
| Gladstone          | No        |                 |              |              |              |              |
| Gold Coast         | No        |                 |              |              |              |              |
| Gympie             | No        |                 |              |              |              |              |
| Hervey Bay         | No        |                 |              |              |              |              |
| Ipswich            | No        |                 |              |              |              |              |
| Logan              | No        |                 |              |              |              |              |
| Mackay             | No        |                 |              |              |              |              |
| Maryborough        | No        |                 |              |              |              |              |
| Mater Adult        | No        |                 |              |              |              |              |
| Mt Isa             | No        |                 |              |              |              |              |
| Nambour            | No        |                 |              |              |              |              |
| Prince Charles     | No        |                 |              |              |              |              |
| Princess Alexandra | No        |                 |              |              |              |              |
| Queen Elizabeth II | No        |                 |              |              |              |              |
| RBWH               | No        |                 |              |              |              |              |
| Redcliffe          | No        |                 |              |              |              |              |
| Redlands           | No        |                 |              |              |              |              |
| Rockhampton        | No        |                 |              |              |              |              |

### Emergency Department Strategies as at 10:00am, Monday, 6th March, 2006

| Facility           | Patients awaiting transfer | Strategies to accommodate patients waiting for beds  | Information last updated |
|--------------------|----------------------------|--|--------------------------|
| Bundaberg          | 0                          | N/A  | 10:00am                  |
| Caboolture         | 0                          | N/A  | 10:00am                  |
| Cairns             | 4                          | · Awaiting discharges, patients will be admitted to a bed as soon as possible  | 10:00am                  |
| Gladstone          | 0                          | N/A  | 10:00am                  |
| Gold Coast         | 0                          | N/A  | 10:00am                  |
| Gympie             | 3                          | · Awaiting discharges, patients will be admitted to a bed as soon as possible  | 10:00am                  |
| Hervey Bay         | 1                          | · Awaiting discharges, patients will be admitted to a bed as soon as possible  | 10:00am                  |
| Ipswich            | 1                          | · Awaiting discharges, patients will be admitted to a bed as soon as possible  | 10:00am                  |
| Logan              | 2                          | · Awaiting discharges, patients will be admitted to a bed as soon as possible  | 10:00am                  |
| Mackay             | 0                          | N/A  | 10:00am                  |
| Maryborough        | 0                          | N/A  | 10:00am                  |
| Mater Adult        | 6                          | · Ensure discharged patients awaiting transport home are transferred to a transit lounge to assist in clearing inpatient beds as early as possible.<br>· Patients waiting transfer to ward bed have been assigned beds and are currently awaiting medical and oncology discharges to acquire beds for patients | 10:00am                  |
| Mt Isa             | 0                          | N/A  | 10:00am                  |
| Nambour            | 3                          | · Awaiting discharges, patients will be admitted to a bed as soon as possible  | 10:00am                  |
| Prince Charles     | 0                          | N/A  | 10:00am                  |
| Princess Alexandra | 3                          | · Patients transferred from emergency department to a bed in the hospital as early as possible.<br>· Early morning review of inpatients by medical and nursing staff to assist in the discharge of patients.<br>· Ensure discharged patients awaiting transport home are                                       | 10:00am                  |

# Supported by effective organisational systems

- Improved planning processes
  - Volume-outcome relationship
- Integrated reporting (aka balanced scorecard)
- Improved transparency
- Enhanced consumer involvement
  - Consultation with District Health Council on:
    - Measures
    - Actions
  - Quarterly, annual reporting to District Health Councils
  - Creation of Queensland Consumer Health Council

# Supported by effective organisational systems

- Improved planning processes
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- Enhanced consumer involvement
- Improved incident management process

# Dealing with adverse events and error

- Adverse event: impact on outcome, treatment
  - Monitoring processes
- Error: mistake, near miss (may be no adverse event)
  - New Clinical incident management policy and Implementation standards
  - Just culture

# Supported by effective organisational systems

- Improved planning processes
  - Volume-outcome relationship
- Integrated reporting (aka balanced scorecard)
- Improved transparency
- Enhanced consumer involvement
- Improved incident management process
- New Clinical Governance Framework
  - Currently out for consultation
  - See [www.health.qld.gov.au/clinicalgov](http://www.health.qld.gov.au/clinicalgov)
- New Patient Safety and Quality Board
- Improved routine reporting

# Improved routine reporting

- 'C' codes: diagnoses which arose during the course of the admission
  - From 1 October 2006

# Lessons:

- Sometimes statisticians' methods are somewhat dubious
- Be wary of replicating them, even if you think you understand them

# Improved routine reporting

- 'C' codes: diagnoses which arose during the course of the admission
  - From 1 October 2006
- Quarterly/annual reporting from administrative data
  - For comparative benchmarking (ideally benchmarking would be national/international, but initially Queensland experience to be used)

# In-hospital mortality (%)

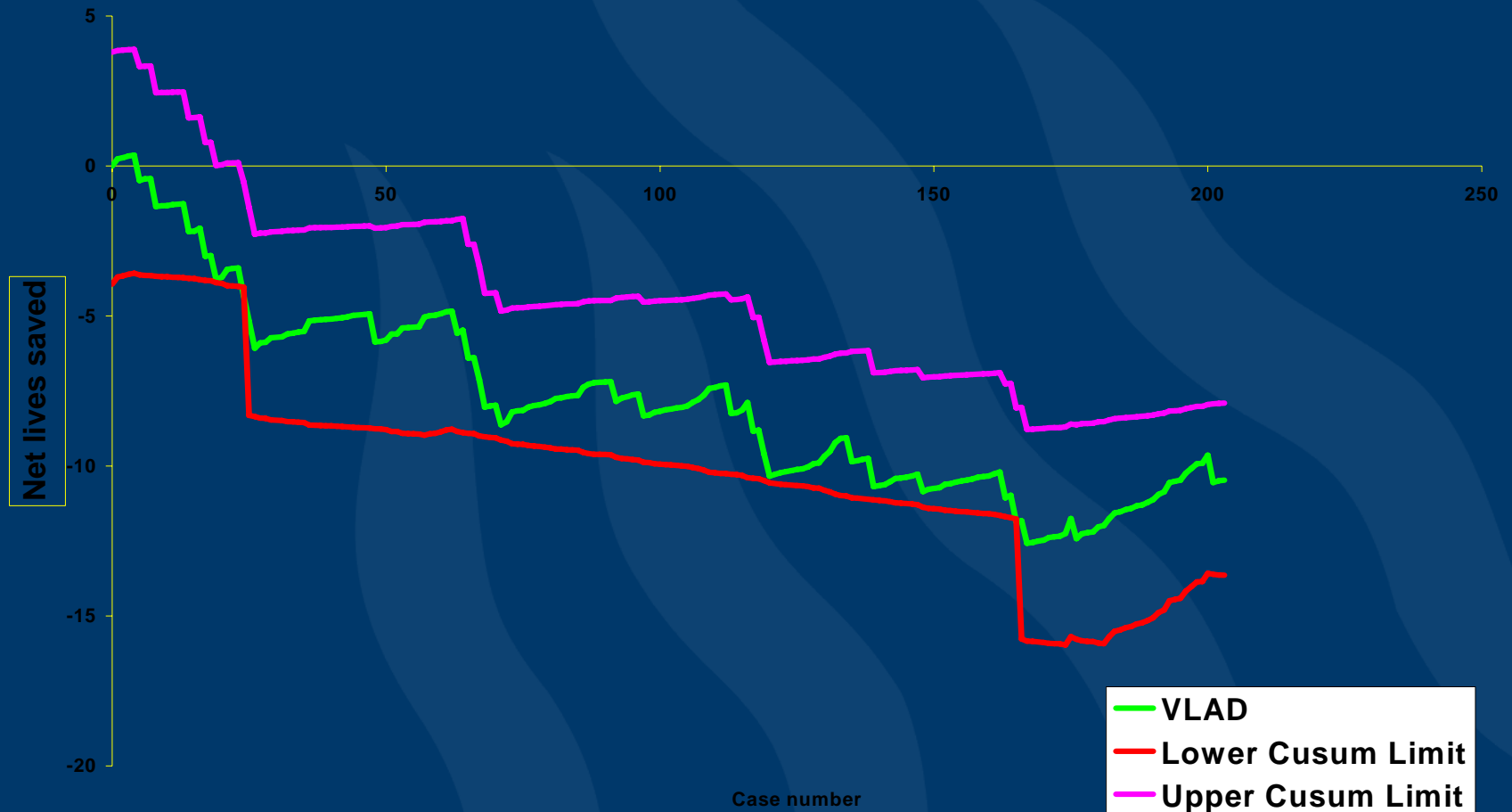
## Fractured neck of femur: RBWH



# Improved routine reporting

- 'C' codes: diagnoses which arose during the course of the admission
  - From 1 October 2006
- Quarterly/annual reporting from administrative data
  - For comparative benchmarking
- Monthly reporting from administrative data
  - Variable Life-Adjusted Display Charts (akin to CUSUM)
  - 1% chance of missing Bundberg Hospital
  - 10%, 5% of wasting time investigating

# Use of Variable Life-Adjusted Display (VLAD) Charts on monthly basis



# Improved routine reporting

- 'C' codes: diagnoses which arose during the course of the admission
- Quarterly/annual reporting from administrative data
- Monthly reporting from administrative data
- Regular reporting of clinical data (from clinical networks)

# Sample of data collected by cardiac rehabilitation network

- Program attendance
- Program participation rate
- Body mass index
- Weight loss
- Smoking
- Alteration in smoking
- Physical activity level
  - Sufficient
  - increase

# Information flows for Districts

|           | To Districts   | From Districts  |
|-----------|--|---|
| Monthly   | <ul style="list-style-type: none"> <li>• Routine data from QH</li> <li>• Data on request ('watch list')</li> </ul> | <ul style="list-style-type: none"> <li>• Urgent issues (or more frequently)</li> </ul>  |
| Quarterly | <ul style="list-style-type: none"> <li>• From QH</li> <li>• ? From other sources</li> </ul>                        | <ul style="list-style-type: none"> <li>• To Area               <ul style="list-style-type: none"> <li>– Monitoring by Patient Safety and Quality Board</li> </ul> </li> <li>• To District Health Council</li> </ul>                             |
| Annually  | <ul style="list-style-type: none"> <li>• From QH</li> </ul>  | <ul style="list-style-type: none"> <li>• To District Health Council</li> <li>• To public (web)               <ul style="list-style-type: none"> <li>– District outlier report</li> <li>– District's own report (if wish)</li> </ul> </li> </ul> |

# Information flows for Areas

|           | To Areas   | From Areas  |
|-----------|--|---|
| Monthly   | <ul style="list-style-type: none"><li>• From Districts as required</li></ul>   |   |
| Quarterly | <ul style="list-style-type: none"><li>• From QH<ul style="list-style-type: none"><li>– Area action reports</li></ul></li><li>• From Districts</li><li>• ? From other sources</li></ul> | <ul style="list-style-type: none"><li>• To Patient Safety and Quality Board<ul style="list-style-type: none"><li>– Lagged response to Area Action Reports</li><li>– Urgent issues</li></ul></li></ul> |

# Information flows for centre

|           |   |
|-----------|---|
| Monthly   | <ul style="list-style-type: none"><li>•To Districts</li><li>•To Resources Committee for performance monitoring of Districts</li><li>•To Patient Safety and Quality Board<ul style="list-style-type: none"><li>–Patterns and trends</li></ul></li></ul>  |
| Quarterly | <ul style="list-style-type: none"><li>•To Areas<ul style="list-style-type: none"><li>–Action Reports for monitoring Districts</li></ul></li><li>•To Patient Safety and Quality Board<ul style="list-style-type: none"><li>–Responses from Areas on previously identified issues</li><li>–State-wide Action Report</li></ul></li><li>•To clinical networks</li></ul> |
| Annually  | <ul style="list-style-type: none"><li>•To public (web) Hospital Performance report</li></ul>  |

# Supported by effective organisational systems

- Improved planning processes
- Integrated reporting (aka balanced scorecard)
- Improved transparency
- Enhanced consumer involvement
- Improved incident management process
- New Clinical Governance Framework
- New Patient Safety and Quality Board
- Improved routine reporting
- Aligning incentives

# Aligning incentives

- Queensland Resource Distribution Formula
  - Case-mix based
  - From 1 July 2006
  - Current consultation process
- Bonus and penalty framework
  - Access (waiting times, ambulance by-pass etc)
  - P4P options? e.g. moiety for adherence to Queensland Health-endorsed care paths
  - New data item from 1 July 2007, moiety from 1 January 2008?

# Unfinished business

- Implementation!!
- Revisit list of procedures monitored regularly
- Data matching (e.g. death data (30 day mortality), ?PBS)
- Identify monitoring strategies for Clinical Service Capability Framework
- ISO 9000 accreditation of system
- Training, templates for risk management plans
- ICT support
  - Credentialing
  - Monitoring reviews/audits