

# Quality of Care Summary: January to June 2024

## Between 1 January and 30 June 2024, South West HHS's key achievements included:

- ✓ Continuing to deliver high rates of performance against our key targets and measures.
- ✓ Driving forward opportunities to engage staff, communities and partners in development of key strategic priorities - including development of new [Quality and Safety](#), [Climate Sustainability](#) and [Digital](#) Strategies.
- ✓ 68% of our staff participated in our first Culture Compass survey, with our highest scoring attributes including workforce safety and gender equity.
- ✓ Ongoing meetings of the South West HHS First Nations Health Equity Committee, comprising Chief Executive Officers of our key partners, to drive forward [First Nations Health Equity commitments](#).
- ✓ Continued delivery of our [Clinician and Employee Engagement Strategy](#) and [Consumer and Community Engagement Strategy](#) - you can find six month progress updates at respective pages on our website.
- ✓ Continuing the work of the South West Queensland Primary Care Collaborative, Darling Downs-South West HHS Medical Pathway and other nursing, allied health and profession specific initiatives to enable our staff work to top of scope in a clinically safe and sustainable way.
- ✓ Alongside our key partners, continuing to provide a range of health, mental wellbeing and resilience promotion activities across South West communities.
- ✓ Progressed a range of key infrastructure projects, including additional staff accommodation at Mungindi, replacement of Community Clinic at Morven, new Community and Allied Health Service buildings at St George and Charleville.

## In keeping with other health providers, our challenges included:

- Ongoing demands on our staff, particularly within the context of national workforce pressures - including difficulties in securing external staffing and locums - which continue to be appropriately risk managed to ensure continuity of safe and effective services.
- Emergent capacity and equipment servicing issues, in addition to reduced sessions over holiday periods which impacted the full delivery of scheduled surgical services.
  - Despite these pressures, an additional elective surgery and Gastrointestinal Endoscopy (GIE) procedures were provided compared to 2022-2023.
  - There were also 395 more presentations treated at our Emergency Departments throughout the year - including 14 more Category 1 patients required to be seen within two minutes.

## Looking ahead for the next six months to 31 December 2024 we will:

- ❖ Progress First Nations Health Equity *Our Way – Together* commitments, including a of zero tolerance statement for racial discrimination and / or institutional racism, supporting communications and staff awareness activities and participating in a statewide review of Cultural Practice training.
- ❖ Local teams will progress Cultural Compass actions to further strengthen organisational culture.
- ❖ Continue to ensure models of care meet local needs in a sustainable manner.
- ❖ Further progress our commitments towards reducing historical health inequalities, promoting partnership working, improving our working environments and defining new models of service and care for the benefit of South West communities.
- ❖ Work with the Western Queensland Primary Health Network and partners to complete a Joint Regional Health Needs Assessment to further advocate for local health needs and services for the future.






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## Performance snapshot – as at 30 June 2024

During the six month period from 1 January 2024 to 30 June 2024, South West HHS continued to deliver strong levels of safe, effective, and equitable care against its performance expectations.

The following table below provides a summary of our performance against key performance indicators as at 30 June 2024 (unless otherwise indicated)

Key Performance Indicators		Why is this important?	Target	Our performance
<b>Emergency Presentations</b>				
	<b>Emergency Department (ED) length of stay: % of emergency stays within 4 hours (excl fever clinic)</b>	<i>Measures the timely transfer of emergency patients to an inpatient bed or discharged home - reflecting overall effectiveness of hospital patient flow processes from ED</i>	≥ 80.0%	<b>89%</b>
	<b>ED wait time by triage category</b>	<i>Time in minutes for each ED presentation to commencement of treatment - at 2 / 10 / 20 / 60 / 120mins - with Category (CAT) 1 being highest priority</i>	Cat 1: 100%	<b>100%</b>
			Cat 2: ≥ 80%	<b>99.7%</b>
Cat 3: ≥ 75%			<b>97.3%</b>	
Cat 4: ≥ 70%			<b>97.1%</b>	
Cat 5: ≥ 70%	<b>99.4%</b>			
<b>Patient Off Stretcher Time</b>	<i>Timely transfer of patient from an ambulance stretcher to ED bed within 30mins</i>	≥ 90%	<b>96.4%</b>	
<b>Surgical procedures<sup>1</sup></b>				
	<b>Elective surgery: category 1 patients (30 days)</b>	<i>Measures the percentage of patients who received their elective surgery within clinically recommended time with CAT 1 being the highest priority.</i>	CAT 1: ≥ 98%	<b>80.5%</b>
	<b>Elective surgery: category 2 and 3 patients (90 / 365 days)</b>		Cat 2: ≥ 95%	<b>93.5%</b>
	<b>Category 4 gastrointestinal endoscopy patients (GIE) treated within 30 days</b>		Cat 3: ≥ 95%	<b>98.2%</b>
		<b>Category 5 and 6 GIE treated within clinically recommended time (90/365 days)</b>	Cat 4: 98%	<b>63.8%</b>
		Cat 5: 95%	<b>76.8%</b>	
		Cat 6: 98%	<b>85.7%</b>	
<b>Dental Services</b>				
	<b>Access to oral health services</b>	<i>The percentage patients waiting less than two years for treatment</i>	≥85%	<b>100%</b>
	<b>Preventative Oral Health activity</b> (at 31 May 2024)	<i>A healthy mouth also has general health benefits. Preventive services delivered to public dental patients, help improve and maintain the health of teeth, gums and soft tissues</i>	17%	<b>21%</b>
	<b>Access to emergency dental care for adult public dental patients</b> (at 31 May 2024)	<i>Measures the percentage people who received emergency dental care with Code 1 being the highest priority</i>	Code 1 (1 day): 100%	<b>100%</b>
Code 2 (3 days): ≥95%			Nil patients	
Code 3a (5 days): ≥85%			<b>99%</b>	
Code 3bc (10 days): ≥80%			<b>98%</b>	
		Code 3d (31 days): ≥75%	<b>100%</b>	

<sup>1</sup> Ensuring all South West Elective Surgical and GIE patients received treatment within their clinically recommended timeframes has, at times, proved challenging during 2023-2024. However, to ensure as many people could be treated as possible, additional surgeries were scheduled during May/June 2024 - so that in total 13 additional elective surgeries and 214 GIE investigations were provided compared to the previous year (1 July 2022 – 30 June 2023). In addition, against a total target of treating at least 127 Category 1 Elective Surgery patients within 30 days, a total of 132 patients received care.

Access to Services				
	<b>Telehealth utilisation rates</b>	<i>To achieve a full year target of 5,534, approximately 461 occasions of service/mth are required.</i>	100%	<b>80%<sup>2</sup></b> 4,438 provided as at 30 June 2024
	<b>Smoking cessation clinical pathway – public hospital inpatients, dental clients and community mental health episodes</b>	<i>Supporting people who access our hospital, dental or mental health services who wish to quit smoking</i>	Inpt: ≥85%, with ≥60% completed	<b>93.5% / 83.5%</b> At 31 May 2024
			Dental: ≥80%, with ≥60% completed	<b>87.1% / 99.1%</b> At 31 May 2024
			Mental Health: ≥85%, with ≥60% completed	<b>96.8% / 94.3%</b> At 31 May 2024
	<b>Proportion of mental health service episodes with a documented care plan</b>	<i>Ensuring mental health clients have a current care plan</i>	≥85%	<b>73%<sup>3</sup></b>
Quality and Safety				
	<b>Hospital Acquired Complications</b>	<i>Total number of complications arising from care in a SW facility (across 14 categories)</i>	N/A	<b>33</b> As at 31 May 2024
	<b>National Sentinel events</b>	<i>Specific patient safety events that are wholly preventable and result in serious harm, or death (across 10 categories)</i>	Nil	<b>Nil</b>
	<b>SAC reporting</b>	<i>Completion of Severity Access Code 1 reviews within 90 days – incidents that have or could have caused serious harm or death</i>	≥ 70%	<b>33%<sup>4</sup></b> As at 31 December 2023
	<b>Healthcare-associated Staphylococcus Aureus (including MRSA) rates</b>	<i>Rate of healthcare associated infections per 10,000 acute public hospital patient.</i>	≤2 per 10,000 bed days	<b>Nil</b> As at 31 December 2023
	<b>Complaints resolved within 35 calendar days</b>	Percentage of submitted complaints within 35 days	≥ 80%	<b>94%</b> In total, 125 complaints and 227 compliments received between 1 July 2023 and 30 June 2024



Further information regarding our performance is also maintained on the [Queensland Health website](#)

If you require more information, or would like to suggest further measures for inclusion in this summary please contact us at: [SWHHS\\_Board@health.qld.gov.au](mailto:SWHHS_Board@health.qld.gov.au)

<sup>2</sup> To supplement community based face to face care, South West HHS continues to ensure as many people can benefit from the convenience of telehealth services as possible - particularly where this saves the need for longer distance travel.

With the 2023-2024 target informed by significantly higher primary care and COVID-19 levels of service in the first six months of the previous reporting period, SWHHS's target for 2023-2024 effectively increased by 1,300 occasions of service (+108/month) compared to the previous year. Ultimately this could not be achieved, due in part to more stable, face to face services in communities which reduced demand for telehealth use. However, for comparison, the 2023-2024 total of 4,438 is approximately 450 higher than the previous five year average of service.

<sup>3</sup> South West HHS continues to work towards progressively achieving the 85% target, with its current performance equivalent to the statewide average.

<sup>4</sup> Although all three reviews during the reporting period were fully completed within required timescales, administrative delay resulted in the outcomes of two matters not being formally provided to Queensland Health within 90 days. Internal procedures have since been refreshed.