Quality of Care Summary: July to December 2022

Overview

Between 1 July and 31 December 2022, South West HHS's key achievements included:

- Continuing to deliver high rates of performance against our key targets and measures.
- Publication and formal launch of <u>Our Way Together</u>, South West HHS First Nations Health Equity Strategy 2022-2025.
- Publication of South West HHS's inaugural <u>Local Area Needs Assessment</u> (LANA) to inform future workforce and strategic planning initiatives, including model of care development, for the wider benefit of South West communities.
- Launched a <u>new public website</u> with improved layout, navigation and wider functionality including a local service finder.
- Progressed the first six months of our new <u>Clinician and Employee Engagement Strategy</u> and <u>Consumer and Community Engagement Strategy</u> documents, both of which commenced effective 1 July 2022 - you can find six month progress updates at respective pages on our website.
- Facilitated a range of art workshops to promote wellbeing and connection in partnership with the Tackling Regional Adversity through Connected Communities (TRACC) program.
- Celebrated annual NAIDOC Week, *Hello, My Name Is...* day, Seniors Week and other dates of significance, including long service awards and monthly *#SWSpirit* staff recognition.
- Our *Birdie Calls Collaborative Project* was a worthy winner of the Mental Health and Wellbeing category of the *2022 Get Ready Queensland* Resilient Australia Awards.
- Hosting our annual Consumer Advisory Network (CAN) Forum, in Charleville during October.
- Alongside our key partners, continuing to provide a range of health, mental wellbeing and resilience promotion activities across South West communities.

In keeping with other health providers, our challenges included:

 Ongoing demands on our staff, due to COVID-19 and other pressures - including difficulties in securing external staffing and locums - which have been appropriately risk managed to ensure continuity of safe and effective services.

Looking ahead for the next six months to 30 June 2023 we will:

- Continue COVID-19 vigilance, in line with Queensland and national Public Health Directions.
- Prepare to implement statewide Voluntary Assisted Dying, from 1 January 2023.
- Complete co-design of implementation plans and governance structures to progress Our Way Together.
- Progressing 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 way.
- Continue to engage with our communities 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.



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Performance snapshot – as at 31 December 2022

During the six month period from 1 July 2022 to 31 December 2022, 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 31 December 2022 (unless otherwise indicated)

	Performance Indicators	Why is this important?	Target	Our performance
Emergenc	y Presentations			
*	Emergency Department (ED) length of stay: % of emergency stays within 4 hours (excl fever clinic)	Measures the timely transfer of emergency patients to an inpatient bed or discharged home - reflecting overall effectiveness of hospital patient flow processes from ED	≥ 80.0%	90.1%
	ED wait time by triage category	Time in minutes for each ED presentation to commencement of treatment - at 2 / 10 / 20 / 60 / 120mins - with Category (CAT) 1 being highest priority	Cat 1: 100%	100%
			Cat 2: ≥ 80%	99.5%
			Cat 3: ≥ 75%	97.7%
			Cat 4: ≥ 70%	97.4%
			Cat 5: ≥ 70%	98.1%
	Patient Off Stretcher Time	Timely transfer of patient from an ambulance stretcher to ED bed within 30mins	≥ 90%	95.1%
Surgical p				
	Elective surgery: category 1 patients (30 days)	Measures the percentage of patients who received their elective surgery within clinically recommended time with CAT 1 being the highest priority.	CAT 1: ≥ 98%	99%
	Elective surgery:		Cat 2: ≥ 95%	98%
	category 2 and 3 patients (90 / 365 days)		Cat 3: ≥ 95%	99%
	Category 4 gastrointestinal endoscopy patients (GIE) treated within 30 days	Percentage of patients who received their GIE within clinically recommended times with CAT 4 being the highest priority.	Cat 4: 98%	100%
	Category 5 and 6 GIE		Cat 5: 95%	95%
	treated within clinically recommended time (90 / 365 days)		Cat 6: 98%	100%
Dental Ser				
	Access to oral health services	The percentage patients waiting less than two years for treatment	≥85%	100%
	Preventative Oral Health activity	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	17%	18%
	Access to emergency dental care for adult public dental patients	Measures the percentage people who received emergency dental care with Code 1 being the highest priority	Code 1 (1 day): 100%	95.3% ¹
			Code 2 (3 days): ≥95%	Nil patients
			Code 3a	92%
			(5 days): ≥85% Code 3bc	90%
			(10 days) ≥80% Code 3d	
			(31 days): ≥75%	99%

¹ x1 Code 1 Emergency patient was seen in 1.5 days, with patient declining the offered appointment within the required time and requesting an alternative time outside of target.



Access to	Services			
	Telehealth utilisation rates	To achieve a full year target of 4,234, approximately 353 occasions of service/mth are required.	100%	152.9% 3,236 provided
	Smoking cessation clinical pathway – public hospital inpatients, dental clients and community mental health episodes	Supporting people who access our hospital, dental or mental health services who wish to quit smoking	Inpt: ≥85%, with ≥60% completed	98.1% / 87.2%
			Dental: ≥80%, with ≥60% completed	93.5% / 100%
			Mental Health: ≥85%, with ≥60% completed	98.0% / 95.1%
<u>Ļ</u>	Proportion of mental health service episodes with a documented care plan	Ensuring mental health clients have a current care plan	≥85%	71%²
Quality ar	nd Safety			
×X	Hospital Acquired Complications	Total number of complications arising from care in a SW facility (across 14 categories)	N/A	13 2 less than Dec-202
	National Sentinel events	Specific patient safety events that are wholly preventable and result in serious harm, or death (across 10 categories)	Nil	Nil
	SAC reporting	Completion of Severity Access Code 1 reviews within 90 days – incidents that have or could have caused serious harm or death	≥ 70%	50 % ³
	Healthcare-associated Staphylococcus Aureus (including MRSA) rates	Rate of healthcare associated infections per 10,000 acute public hospital patient.	≤2 per 10,000 bed days	Nil



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: <u>SWHHS_Board@health.qld.gov.au</u>

target by 30 June 2023. For comparative purposes, South West HHS's performance as at 31 December 2021 was 69% (target: 65%).

Two (2) SAC 1 incidents occurred during the reporting period, one of these reviews was completed within the required 90 day timescale. The second was formally closed on Day 96, due to the availability of the required external clinical reviewer to sign required documentation prior to completion.



² With this statewide target increasing by 20% compared to the previous financial year (2021-2022), South West HHS continues to work towards progressively achieving the 85%