Connecting for Health
Strategy for inclusive engagement, involvement and partnerships 2016–18
A Putting People First Initiative of Metro North Hospital and Health Service
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Introduction</strong></td>
<td>4</td>
</tr>
<tr>
<td><strong>Summary of achievements 2016-2018</strong></td>
<td>5</td>
</tr>
<tr>
<td>Case studies involving co-design</td>
<td>8</td>
</tr>
<tr>
<td><strong>Highlights 2018</strong></td>
<td>11</td>
</tr>
<tr>
<td><strong>Lead a continuously improving consumer-centred culture</strong></td>
<td>11</td>
</tr>
<tr>
<td>Awards for consumer engagement</td>
<td>12</td>
</tr>
<tr>
<td>Conference presentations</td>
<td>13</td>
</tr>
<tr>
<td>Continuous review and evaluation of engagement</td>
<td>14</td>
</tr>
<tr>
<td><strong>Include a diversity of people and voices</strong></td>
<td>16</td>
</tr>
<tr>
<td>Reconciliation Action Plan</td>
<td>16</td>
</tr>
<tr>
<td>Accurate indigenous identification campaign</td>
<td>16</td>
</tr>
<tr>
<td>Oral Health “Brush your teeth so you’re looking good” video</td>
<td>17</td>
</tr>
<tr>
<td>NAIDOC week “Conversations with Metro North”</td>
<td>18</td>
</tr>
<tr>
<td>Cultural diversity health needs assessment</td>
<td>18</td>
</tr>
<tr>
<td>Celebrating diversity</td>
<td>19</td>
</tr>
<tr>
<td>Alcohol and Drug Services’ first Client Advisory Committee</td>
<td>20</td>
</tr>
<tr>
<td>Improve how we respond to consumer experiences and expertise</td>
<td>21</td>
</tr>
<tr>
<td>Patient experience surveying</td>
<td>21</td>
</tr>
<tr>
<td>Service improvements initiated in response to feedback</td>
<td>22</td>
</tr>
<tr>
<td>Continuous monitoring of feedback</td>
<td>24</td>
</tr>
<tr>
<td>Integrate for a seamless care experience for individuals, families and communities in Metro North</td>
<td>25</td>
</tr>
<tr>
<td>LINK (Leading Innovation through Networking and Knowledge-Sharing) Funding</td>
<td>25</td>
</tr>
<tr>
<td>Health Alliance</td>
<td>25</td>
</tr>
<tr>
<td>Community forums and expos</td>
<td>26</td>
</tr>
<tr>
<td>Development of Connecting for Health 2019-2021</td>
<td>28</td>
</tr>
<tr>
<td><strong>Conclusion</strong></td>
<td>28</td>
</tr>
<tr>
<td><strong>Appendix 1</strong></td>
<td>29</td>
</tr>
</tbody>
</table>
Introduction

Metro North Hospital and Health Service's (Metro North) three-year strategy for consumer and community engagement concluded in 2018. This report reflects our advancement in consumer and community engagement over three years. Effective partnerships take time. Mutual respect and trust are critical for successful partnerships. Metro North has committed to continuously improve engagement processes to nurture trust and mutual respect with our diverse communities. We have engaged consumers in new areas and employed creative engagement methods to improve patient care and outcomes.

The Quality of Care 2017-2018 Report highlights many initiatives involving consumers. This report details more examples of consumer engagement in action under the priority objectives for Connecting for Health 2016-18:

- **Lead** a continuously improving consumer-centred culture
- **Include** a diversity of people and voices
- Improve how we **respond** to consumer experiences and expertise
- **Integrate** for a seamless care experience for individuals, families and communities in Metro North.
Summary of achievements
2016-2018

This report reflects our engagement journey demonstrating the importance of continuing to strengthen relationships and refresh processes for engaging consumers, carers, community and partners. In 2016 we began growing our network of consumers involved in service improvements. By 2017 we were partnering with more than 100 consumers and this number remained constant in 2018. Staff are realising the benefits of partnering with consumers and sharing their engagement journey with their peers to increase their skills and confidence in consumer engagement.

Table 1 summarises aspects of care that consumers and community have influenced. We also highlight two case studies which demonstrate the evolution of engagement and co-design and its importance in influencing outcomes.

Table 1

<table>
<thead>
<tr>
<th>Consumer and community influence</th>
<th>Examples</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Engagement review and evaluation</strong></td>
<td>Mental Health Consumer and Carer Engagement Group with Mental Health Executive Leadership Team</td>
<td>Ensures engagement is dynamic, relevant, purposeful and contributes to improved patient care and outcomes</td>
</tr>
<tr>
<td></td>
<td>Community Board Advisory Group with Metro North Board</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Staff and consumer information, resources and tools to support engagement activities</td>
<td></td>
</tr>
<tr>
<td><strong>Strategy and planning</strong></td>
<td>Connecting for Health Strategy</td>
<td>Services are planned in response to community, consumer and carer needs and preferences</td>
</tr>
<tr>
<td></td>
<td>Emergency Department Plan</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Oral Health Services Plan</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kidney Health Services Plan</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mental Health Clinical Services Plan</td>
<td></td>
</tr>
<tr>
<td><strong>Funding decisions – innovation and research</strong></td>
<td>Consumer appointed to panel determining LINK innovation funding</td>
<td>Person-centred research and innovation through partnerships</td>
</tr>
<tr>
<td></td>
<td>Consumer appointed to Metro North Research Grants Committee</td>
<td></td>
</tr>
<tr>
<td><strong>Major infrastructure projects</strong></td>
<td>Surgical, Treatment and Rehabilitation Service (STARS) (Quality of Care Report, page 12)</td>
<td>Building design and new models of care incorporating the needs of patients, carers and families</td>
</tr>
<tr>
<td></td>
<td>Caboolture Hospital expansion and redevelopment</td>
<td></td>
</tr>
<tr>
<td><strong>Service review and redesign</strong></td>
<td>Review of long stay residential care, Community and Oral Health (Quality of Care Report, page 8)</td>
<td>Residents, families and carers involved in making residential care more person-centred, ‘home-like’ and culturally appropriate and safe</td>
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<td></td>
<td></td>
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Table 1 (continued)

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<thead>
<tr>
<th>Consumer and community influence</th>
<th>Examples</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service improvement</td>
<td>Hands Up for Hand Hygiene Project, Cancer Care, Royal Brisbane and Women's Hospital</td>
<td>The service moved into the top ten national hospitals for hand hygiene. 100% compliance for hand hygiene was achieved for three consecutive months in 2018</td>
</tr>
<tr>
<td>Peer-led partnerships</td>
<td>Taking the Lead – Peer Delivery of Point of Care Testing for Sexually Transmitted Infections (STIs) in Community Setting, Queensland Positive People in partnership with Public Health Unit, Sexual Health and HIV Service</td>
<td>Significant increases in testing for STIs with at risk populations and referral for follow up and treatment</td>
</tr>
<tr>
<td></td>
<td>Caboolture Young Mothers for Young Women Program, Caboolture Hospital and Micah Projects</td>
<td>Peer and professional support is available to young, pregnant and parenting women, 25 years and under, along with their children and families</td>
</tr>
<tr>
<td></td>
<td>Men's Shed and Brighton Health Campus partnership (Quality of Care Report, page 40)</td>
<td>Facilitates positive connections and experiences for men involved in the shed as well as residents and patients at Brighton</td>
</tr>
<tr>
<td>Staff recruitment, orientation and education</td>
<td>Recruitment and selection such as: • Executive Director of Community and Oral Health • Administration Officer, Metro North Engage • Consumer Liaison Officer, The Prince Charles Hospital</td>
<td>Staff recruited who put Metro North values into action</td>
</tr>
<tr>
<td></td>
<td>Consumers sharing their experiences during orientation of new medical interns, Caboolture Hospital</td>
<td>Staff equipped with knowledge and skills to support, advocate for and empower patient involvement in care</td>
</tr>
<tr>
<td></td>
<td><strong>NEW</strong> Consumers and carers sharing their experience in staff education on transitioning to National Disability Insurance Scheme (NDIS)</td>
<td>Increased staff awareness, empathy and compassion when supporting families to transition to NDIS</td>
</tr>
<tr>
<td></td>
<td><strong>NEW</strong> “Coming to terms” video for Alcohol and Drug Service staff education</td>
<td>Frontline workers stop and think about how and what they are saying to clients. A lot of staff have changed the way they talk to clients to improve two-way communication</td>
</tr>
<tr>
<td>Closing the Gap with Aboriginal and Torres Strait Islander Communities</td>
<td><strong>NEW</strong> Reconciliation Action Plan (RAP), Community and Oral Health</td>
<td>First for a Queensland hospital and health service. Plan addresses opportunities for Aboriginal and Torres Strait Islander employment and improvements in care and health outcomes.</td>
</tr>
<tr>
<td></td>
<td>Lighthouse project, The Prince Charles Hospital (Quality of Care Report, page 19)</td>
<td>Improving care and outcomes for Aboriginal and Torres Strait Islander people with coronary heart disease</td>
</tr>
<tr>
<td>Responding to Culturally and Linguistically Diverse Communities</td>
<td><strong>NEW</strong> Cultural diversity health needs assessment</td>
<td>Greater knowledge and understanding of people from culturally diverse backgrounds accessing services</td>
</tr>
<tr>
<td>Consumer and community influence</td>
<td>Examples</td>
<td>Outcomes</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------</td>
<td>----------</td>
</tr>
</tbody>
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| Celebrating diversity          | Closing the Gap Day  
National reconciliation week  
NAIDOC week  
Harmony Day  
**NEW** Multicultural month | Embracing the benefits of diversity within our communities and workforce |
| Expanding opportunities to listen to consumer voices | **NEW** Alcohol and Drug Client Advisory Committee  
**NEW** Health Equity Advisory and Liaison Group  
Compassion Cafe (*Quality of Care Report*, page 25) | Safe and supportive environments for conversations with consumers and carers about how we can improve care |
| Improving patient experiences  | **NEW** Health literacy project  
**NEW** Welcome video for Children's Ward, Caboolture Hospital (*Quality of Care Report*, page 23)  
Adult Intensive Care Empathy Project, The Prince Charles Hospital  
**NEW** Quick Flow project | Consumers are better able to participate in decision-making and are confident managing their health  
Supporting parents and families with children admitted to hospital  
Improved person-centred and compassionate care for patients, carers and families  
Improvements in communication and experiences in outpatient departments |
| Information technology         | Planning for an integrated electronic medical record | Information technology solutions designed around patient needs and priorities |
Case studies involving co-design

LINK funding (Leading Innovation through Networking and Knowledge-Sharing), now in its fourth year, has been pivotal in enabling a number of successful consumer and community partnerships. The Community Board Advisory Group (CBAG), a sub-committee of Metro North Board, initially proposed the concept of funding for innovation projects through partnerships. Metro North introduced LINK funding in 2015 with advice from CBAG.

The following two LINK projects showcase the iterative nature of engagement and improvements in access and care that are being sustained through co-design and peer-led partnerships.

Hands Up for Hand Hygiene

Prior to this project, Royal Brisbane Women’s Hospital Cancer Care had a poor Staphylococcus aureus bacteraemias infection rate in comparison to other Hospitals in Queensland and Australia.

A partnership was developed with Queensland University of Technology Creative Industries to use their interactive booth, the “InstaBooth”, to develop a solution that was co-designed and meaningful to both consumers and staff.

An initial workshop was held in 2017 with consumers and staff to identify issues and inform the development of interactions and content for the InstaBooth. A further workshop was held to analyse data collected over the InstaBooth installation and the group themed responses to develop actions and a broader hand hygiene strategy.

Based on this, a suite of resources was developed, including consumers sharing their stories on video which has been embedded into staff training.

As a result of the project, there was a reduction in infection and improvement in hand hygiene. Royal Brisbane and Women’s Hospital moved to the top ten in Australian hospitals. Cancer Care achieved 100% compliance in the hand hygiene audits during April, May and June 2018. This compliance had not been seen consistently across the service previously. A mini-InstaBooth was replicated and rotated around the wards to maintain engagement and momentum with both consumers and staff.

Interviews were conducted with staff and consumers at completion of the project to gain feedback. The feedback was very positive. Consumers emphasised that diversity in perspectives was key and ensured they were working together to solve the problem.

“Staff are as committed as we are... I find that when you work with staff, and you hear their stories and their challenges, that often they are as passionate as we are for the change... they're actually trying to make changes and make things better for future patients and people.”

JOHN MICHAEL
Taking the Lead: Peer Delivery of Point of Care Testing for Sexually Transmitted Infections within a Community Setting

Strategies for the control of HIV and other sexually transmissible infections prioritise the need for encouraging greater testing amongst populations considered more at risk. Knowing one’s infection status facilitates early access to treatment, protective behaviour change and the interruption of ongoing infection.

Community based testing services create client-focussed environments that are accessible, acceptable, and appropriate for those who are most likely at risk but less likely to test.

There is currently point-of-care testing for HIV and Syphilis within community settings through the RAPID Community Testing Service, conducted through the auspices of Queensland Positive People, a peer-led community organisation. However, feedback from clients identified a need for offering more comprehensive sexually transmissible infection testing, including for the two most common infections, chlamydia trachomatis and neisseria gonorrhoea.

Through LINK funding, RAPID, with the assistance of the University of Queensland School of Public Health, Metro North Public Health Unit and Sexual Health & HIV Service, became the first urban community based service in Australia to trial the use of the new, therapeutics goods association approved GeneXpert assay for the point-of-care detection of chlamydia and gonorrhoea. The ease of handling allowed this testing system to be wholly managed by non-clinical peer health workers, enabling a testing service led by trained lay providers. This has resulted in a significant increase in “at risk” populations testing for infections as indicated in Figure 1.
Of the 1,091 clients detected with Chlamydia and/or Gonorrhoea infections, 1,078 (98.80%) were notified of infection and referred for treatment. Unsuccessful but continued contact attempts accounted for 2 (0.18%) clients. 11 (1.00%) clients were considered lost to follow up.

The project successfully demonstrated the capacity for a peer operated community health service to deliver chlamydia and gonorrhoea point-of-care testing with responsive follow-up strategies. Clients reported great satisfaction with the service and increases in health literacy were particularly notable.

Most importantly, the demonstrated successful outcomes have resulted in three years of additional funding by Queensland Department of Health to maintain this service until 2021.

The service has been ongoing since the conclusion of LINK funding. Clients have indicated a strong preference for on-site treatment, creating a “one-stop shop” that addresses all aspects of sexual health care. Metro North is assisting Queensland Positive People and RAPID to negotiate the complexity of developing an on-site treatment service enabling a reduction in time for treatment after diagnosis, rather than referral to external agencies which may increase the risk of lost to follow-up and onward transmission.

From 2017-2018 the tests for sexually transmitted infections totalled (note that some clients tested for multiple infections while others did not):

- 8,730 tests for HIV
- 8,061 tests for Syphilis
- 7,429 tests for Chlamydia and Gonorrhoea

Of the tests conducted, the following detections were made for Chlamydia and Gonorrhoea infections:

- 675 Chlamydia detections (prevalence being 9.08%)
- 416 Gonorrhoea detections (prevalence 5.59%)
Highlights 2018

We focussed on consolidating the quality of relationships with consumers, carers and community and expanding the diversity of opportunities to improve patient care and outcomes.

The second annual Consumer Engagement Showcase was held at the end of the year to celebrate consumer partnerships and thank everyone who has contributed to our achievements.

For the first time a consumer, Carolyn Wharton, performed the Master of Ceremonies. Carolyn reflected on her experience being involved in the co-design of Caboolture Hospital expansion and redevelopment.

“It gives the chance to share my lived experience with people and staff and then be able to dissect and converse about those experiences to improve the care for future patients”.

Priority: Lead a continuously improving consumer-centred culture

With the foundations in place to support effective partnerships, Metro North is leading a culture of continuous improvement. Each year brings a new iteration of engagement activities. We routinely review and evaluate processes to ensure engagement remains relevant, meaningful, mutually beneficial and effective. Metro North has showcased consumer engagement initiatives at state and national conferences. Many achievements have also been commended through awards.
Awards for consumer engagement

Engagement success recognised through local, state and national awards for consumer partnerships:

**Health Consumers Queensland Inaugural State-wide Partnership Award**

Suzanne and Carolyn received the award on behalf of Caboolture Hospital for establishing an effective partnership between a consumer and health service.

*Suzanne said, “It was an honour to work with consumers every day and learn from their experiences to improve the care we provide to our community.”*  
“*We are going from strength to strength and it is fantastic to be acknowledged for it,*” she said.

**Metro North Staff Excellence Awards**

- Adult Intensive Care EMPATHY Project, The Prince Charles Hospital

**Health Roundtable, Innovation Award**

- Fit Fab Cab – staff wellbeing and the impact on patient outcomes at Caboolture Hospital

**Royal Brisbane and Women’s Hospital Quality Awards Recognising Remarkable Initiative and Excellence in Service (QuARRIES)**

- Compassion in Action at the Compassion Café, Medical Services
- Cancer Information Hub, Cancer Care Services
- Hands up for hand hygiene, Cancer Care Services

**Oral Health Services Staff Excellence Awards**

- Supporting consumer engagement, Fiona Comber, consumer with Oral Health Services
Conference presentations

Metro North partnered with consumers to share, with others, the benefits and outcomes of consumer involvement. Below are presentations delivered with consumers at regional, state and national gatherings.

Health Consumers Queensland Annual Forum

- Men’s Shed, residents, patients and staff creating wonderful opportunities and experiences, Danielle Grant-Cross and Peter Lumsdale, Community and Oral Health
- Cancer Information Hub: Helping you take control of your cancer journey, Alison Alexander, Gary Power and Anita McGrath, Cancer Care
- Co-designed and situated consumer engagement: the hand hygiene instabooth project, Nicole Gavin and John-Michael Barrie, Cancer Care
- Bridging cultural barriers: designing breastscreening health literacy resources through consumer engagement, Anna Voloschenko and Rose Karlo, BreastScreen Queensland.

Metro North Health Forum

- Workshop of sector leaders creating a better health system for older people, Health sector leaders with Laurel Scott and residents from Keperra Sanctuary Retirement Village

Blood 2018 Conference

- LINK Hands Up for Hand Hygiene Project, Nicole Gavin, Shelley Kulperger and Belinda Barrie

Queensland Clinical Senate

- Transformational Change, Suzanne Michaels and Carolyn Wharton

Men’s Shed presentation at Health Consumers Queensland Annual Forum
Continuous review and evaluation of engagement

Mental Health Consumer and Carer Engagement Group review

This review was undertaken following issues raised by consumers and staff regarding the overall function of the group, communication and decision-making.

The review was an opportunity to clarify the group’s role and value ensuring it is operating with clear purpose, plan and visible outcomes and a strong consumer and carer voice.

Metro North Engage conducted individual interviews with all group members and staff involved. The Director of Governance and Quality Management undertook a separate governance review. A report was presented to the Mental Health Executive Leadership Team with four options for moving forward. These were:

- Do nothing and continue with the Group in current format
- Re-design the existing model
- Cease the Group and create a new advisory model through co-design
- Cease the Group and look at an alternative investment.

After considering all stakeholder perspectives, the Executive decided to cease the group and co-design a new engagement model with group members.

A meeting was held with group members in December to inform them of the decision. Members were given time to discuss the findings and outcome. Overall, members were satisfied with the evaluation process and many expressed interest in being part of the co-design for developing a new engagement model.

The following feedback was received after the meeting:

“Many thanks... for your graceful and considerate handling... everyone felt heard and valued for their input and skill-set, and strengths and weaknesses of both the group and Mental Health (staff) were acknowledged, with a very positive plan for going forward.”

Community Board Advisory Group evaluation

The Community Board Advisory Group was established in 2013 and consists of organisations who represent a broad range of consumers, communities and community partners. This evaluation was undertaken to explore the relevance and effectiveness of the group in continuing to guide strategies for consumer and community engagement.

The evaluation process involved interviews with 32 members and other stakeholders; a desktop review of the group’s activities and identifying engagement mechanisms other large health services in Australia have in place.

The evaluation concluded that the following aspects of the group could be strengthened:

- a collaborative relationship with the board
- clarity of purpose and scope
- an annual workplan developed by members and aligned with the board’s priorities; and
- increased communication and visibility within the wider network of consumer and community organisations.

The board considered the evaluation report at its December meeting and supported the continuation of a board sub-committee for consumer and community engagement. The board will determine the role, composition and responsibilities of this committee in early 2019.
Improving resources to support staff and consumer partnerships

Resources and tools tailored to the organisational environment in Metro North, have enabled both staff and consumer collaborations to flourish and have helped maintain consistently high standards for our engagement processes. This has minimised tokenism. Feedback from consumers suggests that these have helped support their involvement as active participants.

We introduced a webpage (password protected) for consumers. This webpage can be accessed any time and contains information, resources, forms and support services available to consumers who partner with Metro North. In response to consumer requests for training, we also delivered a tailored training session to support consumer involvement in staff recruitment.

Resources and tools for staff were evaluated. This evaluation found that staff use a range of internal and external resources to support engagement. Engagement leads noted a number of internal resources that they utilise regularly and share with others. Tools such as Consultation Hub, our online survey platform, are increasing in popularity and there is now an active network of superusers with expertise in online surveying to support newcomers.

Consultation Hub

Usage of Consultation Hub demonstrates the value in having a shared online platform for conducting surveys.

There were 425 surveys conducted in Consultation Hub in 2018 with 12,508 responses.

Consultation Hub was primarily used for staff surveys with 74% of all surveys for staff.

540 staff are registered to use the tool to create surveys (Figure 2). Super users were introduced in 2017 to enable greater staff access, support and control to the survey tool. Support for super users from Metro North Engage continued in 2018.

Figure 2: Consultation Hub users and super users
Priority: Include a diversity of people and voices

Metro North progressed significantly in creating more opportunities for involvement by Aboriginal and Torres Strait Islander communities and multicultural communities and these are highlighted in this section. The Alcohol and Drug Service formalised opportunities for client involvement through an inaugural Client Advisory Committee.

Reconciliation Action Plan

Community and Oral Health launched a Reconciliation Action Plan in June for community based services. It is the first reconciliation action plan for a hospital and health service in Queensland. Aboriginal and Torres Strait Islander Elders, consumers, community and staff gathered on June 4 to witness the launch as part of National Reconciliation Week celebrations.

The plan provides a blueprint to enhance the health journey of Aboriginal and Torres Strait Islander peoples and improve employment and economic outcomes.

It provides a framework for building stronger and more respectful relationships with Aboriginal and Torres Strait Islander peoples and communities to progress reconciliation in Australia, both within the workplace and the community that we serve.

Accurate indigenous identification campaign

The Accurate Indigenous Identification Campaign was launched in 2016 and highlights the importance of Aboriginal and Torres Strait Islander patients identifying when accessing health services.

The 2018 iteration of the campaign focused on staff ambassadors to champion the message. Representatives from the public health unit, oral health, mental health and allied health are actively taking part in the campaign. Champions wear identification shirts on clinic days and patient admission areas to promote the message.

The consumer-focused campaign continued with over 70 Aboriginal and Torres Strait Islander consumers filmed at the NAIDOC Family Fun Day, expressing why they are proud to identify their cultural links to community.

“It’s important for us, as healthcare professionals to cater to those needs specifically of Aboriginal and Torres Strait Islander patients. We’re here to provide the best medical service in order to close the gap further and further so that everyone is equal in terms of healthcare here in Australia.”

STAFF AMBASSADOR HUGO RIBEIRO
 Oral Health “Brush your teeth so you’re looking good” video

The Tullawong State School dental van staff noticed a significant drop in the number of indigenous children attending dental appointments.

Concerns were raised with Tullawong State School’s Principal who invited staff to attend Gaiar-Bau community health forum, which addresses health and social issues faced by Aboriginal and Torres Strait Islander people. Staff connected with Noonukul local Redcliffe elder and our Cultural Capability Officer, Uncle Gene Blow who proposed developing a dance video with students to the “Strong Teeth” theme song.

The local community was approached to contribute to the lyrics and traditional dance routines. With the extensive support and in-kind contributions of the community and staff “Brush Your Teeth So You’re Looking Good” video was produced.

Tullawong State School consists of 17.4% Indigenous children. Prior to the project there was approximately 42% rate of dental appointments not being attended. Following the project, this decreased to 12%.

Recently it has been noted that the failure to attend rate is starting to increase, signalling the importance of ongoing engagement.

The project also provided education to staff to ensure Child and Adolescent Oral Health Services are culturally appropriate and inclusive and support ongoing engagement with the indigenous community. Staff are encouraged and supported to attend community events to improve face-to-face connections.

Watch the video here: https://www.youtube.com/watch?v=1XT07h8daKg
NAIDOC week “Conversations with Metro North”

National Aborigines and Islanders Day Observance Committee (NAIDOC) week is a time to celebrate Aboriginal and Torres Strait Islander history, culture and achievements. Metro North celebrates NAIDOC week each year.

The Aboriginal and Torres Strait Islander Health Unit hosted a NAIDOC Family Fun Day at St Columban’s School in Caboolture in July. This year’s event included a World Café engagement session, “Conversations with Metro North”. This allowed staff to connect directly with Aboriginal and Torres Strait Islander consumers, families and communities and listen to their experiences while identifying opportunities for improvement. A graphic artist was engaged to capture the conversation.

The session focused on three key questions of
1. What was your experience like?
2. What can we do to improve?
3. What solutions can we provide?

Cultural diversity health needs assessment

A Cultural Diversity Coordinator role was established to coordinate strategic action and improve outcomes for culturally and linguistically diverse consumers and communities.

First we sought to understand the current environment through review and analysis of the most recent data sources available – both within existing hospitals (episodes, admissions, inpatient and interpreter data) as well as state and national population health and census data sources. Analyses of these provided a picture of the community profile in Metro North and forms the basis for further consultation, action planning and prioritisation.

We are now embedding the Queensland Health Organisational Cultural Competency Framework to meet community needs with a focus on health equity and rights. This ensures a focus on the interrelated historical, personal, economic, social and cultural factors of health and experiences related to migration, asylum-seeking, settlement, and acculturation. It also helps identify and strengthen work that is already occurring. The framework will support staff to respond to emerging and different needs within and across communities, sensitive to those most vulnerable and at-risk.

The adoption of the framework has led to the development of the Health Equity Advisory & Liaison (HEAL) group to help co-design Metro North’s approach and response to the health needs identified. This group is comprised of community, clinical leaders and champions of multicultural health.
Celebrating diversity

Bright colours and traditional performers from across the world filled the Royal Brisbane and Women's Hospital Atrium in March for annual Harmony Day celebrations.

Harmony Day celebrates Australian multiculturalism and reinforces the importance of inclusiveness for all Australians.

The month of August was Queensland’s largest multicultural event and staff took the opportunity to come together to ‘celebrate our diversity and celebrate each other’.

The celebrations were an opportunity to share, taste, listen, learn and acknowledge the many diverse cultures in our workforce.

Cultural Diversity Coordinator David Yohan said “multiculturalism is what makes Australia great and what brings humanity together. Our workforce is very diverse, as are the people we care for. We need to celebrate our diversity”.

Harmony Day celebrations at Royal Brisbane and Women’s Hospital
Alcohol and Drug Services’ first Client Advisory Committee

The Committee enables clients to have input into service planning, development and evaluation. The team planned and developed the group using Metro North’s suite of engagement resources and tools. Expressions of interest for membership were sought from existing and past clients of the service as identified by staff.

Six current and past clients were selected. They were orientated to the service and committee and have been meeting on a monthly basis since June.

Some of the items tabled at the Client Advisory Committee include:

• Reviewing the client satisfaction survey results and helping design the results poster to report back to clients
• Co-designing and providing feedback on clinical resources for use in treatment with clients
• Providing advice and suggestion on the content of “What you can expect?” brochure
• Providing input on group treatment development
• Sharing their stories and experiences in workforce development training packages for alcohol and other drug sector state-wide service.

The Alcohol and Drug Service has highly valued and appreciated client involvement in improving access and services for clients.
Priority: Improve how we respond to consumer experiences and expertise

Metro North proactively seeks feedback from consumers and community to improve quality of care and patient experiences. We collect feedback via online and face-to-face surveys, website portals, focus groups, workshops and interviews. In response to consumer feedback we have initiated a significant number of service improvements in partnership with consumers. Some of these are featured in this section.

Patient experience surveying

We conducted the following surveys and audits on patient experiences:

- CaRE Survey (a standardised Metro North patient experience survey co-designed with consumers)
- Service specific patient experience surveys
- Queensland bedside audit
- Clinical weekly audits
- Statewide patient experience survey for general surgery.

CaRE and service specific patient surveys

Redcliffe Hospital surveyed patients using the CaRE survey for the first time. Community and Oral Health and Caboolture Hospital continued to carry out the survey with patients and clients regularly. Figure 4 shows the number of patients undertaking the CaRE survey. Figure 5 shows response rates for service specific patient experience surveys.

Figure 4: CaRE patient experience survey responses by hospital/service

Figure 5: Patient experience survey responses by clinical/project areas
Service improvements initiated in response to feedback

Health literacy project

A Health Literacy Project was initiated in February with the formation of a Health Literacy Steering Committee to oversee the project. The project aims to empower consumers to be active partners in their healthcare and to increase staff capacity and capability in conveying health information through two-way communication with consumers and carers.

Since its inception, the project has engaged consumers, carers and the workforce in determining opportunities for improvement. A Health Literacy Approach was developed to facilitate proactive, coordinated actions to improve health literacy experiences for consumers.

Services closer to home

Telehealth enables care to be delivered remotely via telecommunications and digital communication technologies so patients can receive care and treatment at home or closer to home. This is particularly important for regional and rural patients requiring access to specialist services.

Consultation Hub, our online survey platform, was used to survey patients and staff to gain their feedback on telehealth services. Patients using telehealth were surveyed prior to their appointment and then again after to explore their experiences. Clinicians and administration staff were also surveyed.

The feedback found patients think telehealth services are amazing because they allow patients to save time and money travelling. Health professionals reported issues such as interrupted clinic flow. As a result, the Telehealth Team provided additional support and training to staff which has supported a steady growth in the uptake of telehealth by staff to improve patient experiences.

Surgical patient journey improvement - Caboolture Hospital

Patients accessing surgery at Caboolture had made a number of complaints and suggestions for improvement. The Director of Surgery committed to improving the patient journey. The project commenced with a workshop with 70 staff and included a consumer who had a recent experience.

Following the workshop, several working groups were established to improve aspects of the patient journey including:

• trialling a wound clinic, meaning patients can be seen at Caboolture instead of having to travel for wound care to Royal Brisbane and Women’s Hospital
• introduction of Surgical Patient Power Pack (a pack given to patients at the start of their journey to complement their discharge summary and used to record information such as tests and treatments, record questions and responses and take home with them on discharge)
• improvements to patient information on the website
• surgical team conducting multi-disciplinary team meetings every morning minimising miscommunication
• surgical patient journey video is being developed and be available to patients in 2019.

The project resulted in significant changes that have been widely accepted by staff and consumers.
**Quick Flow project**

Nearly one and a half million people received care as an outpatient in Metro North in 2017/2018. There is no unified approach to outpatient flow management with a mixture of manual and limited automation systems in use. This has led to challenges including poor patient experiences, long queues to check in, long waits for appointments and poor clinic room utilisation.

The “Quick Flow” project aims to deliver an integrated technology solution. Given the project will impact staff, patients, carers, visitors and volunteers, it was critical that these people are engaged throughout the project to help plan, design and test the solution.

Extensive stakeholder consultation was undertaken to guide the design and planning stages. Over 900 staff, consumers and carers shared their experiences, including the challenges and what is working well. This included seven focus groups, one-on-one consultations with patients in waiting areas, observational studies of patients in more than 50 outpatient clinics, recording several in depth patient stories and mapping of patient journeys.

Four main themes were identified and validated by patients. These were:

- Physical comfort and access including getting to the hospital or facility and then the clinic and comfort of the waiting room
- Access to information including appointments, procedures, services and support
- Being informed of wait times
- Engagement and interactions with staff

Feedback was used to design and adapt the solution, ensuring the four themes remained a priority.

The project will focus on the implementation phase in 2019 and several consumers and carers will provide more in-depth input including validation and testing of the solution.

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**Adult Intensive Care Unit EMPATHY project - The Prince Charles Hospital**

A stay in the Intensive Care Unit (ICU) can be an extremely stressful time for patients and families. An End of Life Management Planning and the Hard Yards (EMPATHY) project was formed with a focus on creating a more peaceful and therapeutic environment to improve experiences during complex critical illness and at the end of life.

After assessing the needs of patients, families and nursing staff, the team identified four areas for enhanced care:

1. End of life care
2. Delirium treatment and prevention
3. Long-term patient care
4. Compassionate care of staff

We engaged with long-term patients and their families, both in the ICU and after discharge to the ward, to ask how they felt we could improve and how we could try to ‘normalise’ their stay. Patients and families identified they would like more control over their daily care plan and that they often felt anxious about losing the one-on-one nursing care after leaving ICU. To enhance their stay, we introduced the following:

- a long-term patient portfolio was co-created with patients and families with weekly schedules, personalised daily care plans and communication tools using resources such as the sunflower tool (a tool beside the bed for families to record information about the patient to share with staff)
- additional televisions and speakers were purchased and a “Spotify” music account to enable music to be played at the bedside
• “compassion quilts” donated by Charlie's Angels volunteers to brighten the patients’ area
• refurbishing the balcony and setting up processes to allow patients’ pet dogs to visit as well as having weekly visits from a volunteer therapy dog from Delta Dogs Society
• discharge planning was incorporated into the step down of patients, including tours for the patient and family of the ward that they would be moving to.

Continuous monitoring of feedback
This section shows how services continue to use and monitor patient feedback and implement improvements. There are some changes that we can implement straight away and others that may take time.

Alcohol and Drug Service

<table>
<thead>
<tr>
<th>What we heard</th>
<th>What we are doing to respond</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overwhelming positive feedback</td>
<td>Positive feedback was shared with all staff.</td>
</tr>
<tr>
<td>Needle and syringe program specific feedback</td>
<td>Nursing Director and Nurse Unit Managers of Biala and Redcliffe/Caboolture are considering client requests for access to free wheel filters and water, butterflies access after hours in vending machines and increase to the amount of equipment available per contact.</td>
</tr>
<tr>
<td>Stigma and judgement</td>
<td>This seemed to occur in situations where communication about issues was less clear (e.g. why takeaway doses were not provided or why a dose has not changed). We will develop a process for reminding staff about values and perceptions and clearer communication between staff and clients in challenging situations.</td>
</tr>
<tr>
<td>Facilities and environment</td>
<td>This included temperature, noise and feeling welcomed in waiting rooms. It was recommended for all teams of the Alcohol and Drug Service review all client wait rooms with aim to improve comfort and atmosphere.</td>
</tr>
</tbody>
</table>

Cancer Care

<table>
<thead>
<tr>
<th>What we heard</th>
<th>What we are doing to respond</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uncomfortable mattresses</td>
<td>Completed an audit on mattresses and implemented a replacement program for those needing to be replaced.</td>
</tr>
<tr>
<td>Food needs improving</td>
<td>Feedback relating to food and dietary requirements was forwarded to Nutrition and Dietetics team to review.</td>
</tr>
<tr>
<td>Uncomfortable chairs in waiting rooms</td>
<td>Redesigned the waiting room at the Royal Brisbane and Women's Hospital ward 4A and added reclining chairs for patient comfort. We will continue to monitor feedback across all cancer care waiting areas</td>
</tr>
<tr>
<td>Delays to appointments</td>
<td>Working with the Quick Flow Project to address this issue</td>
</tr>
<tr>
<td>Patients want more information provided while waiting</td>
<td>Developing information for TVs in waiting areas including information on support services and groups, pharmacy, clinical trials, Cancer Information Hub and much more.</td>
</tr>
</tbody>
</table>
Oral Health

<table>
<thead>
<tr>
<th>What we heard</th>
<th>What we are doing to respond</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limited parking at the Oral Health Centre</td>
<td>Clearer communication has been provided informing patient’s of parking and transport options prior to their appointment.</td>
</tr>
<tr>
<td>Poor understanding of clinical handover on referral and waiting times</td>
<td>Improve communication with patients about referral processes through use of guidelines contained in the specialist referral procedure. Inform patients that there could be a wait involved for access to specialist care.</td>
</tr>
<tr>
<td>Phone contact is difficult</td>
<td>Call back options were reviewed and a phone number provided for patients wanting to talk to a staff member.</td>
</tr>
</tbody>
</table>

Priority: Integrate for a seamless care experience for individuals, families and communities in Metro North

Metro North collaborated with many community partners to better understand gaps and facilitate more connected care. This section highlights a sample of these activities.

LINK (Leading Innovation through Networking and Knowledge-Sharing) Funding

LINK funding is an opportunity for Metro North to build stronger relationships with community partners to deliver more integrated care. Five new LINK partnership projects were funded in 2017-2018:

- **BISCUT**: Better Individualised Stroke Care Using Technology
- **CLIC**: Community Links in Caboolture
- **SAFE SPACES**: Redcliffe and Caboolture community based safe space alternatives
- **SPRINGBOARD**: Youth alcohol and other drugs day program: Community based dual diagnosis day program for young people (18-25)
- **FUTURE ICU**: Innovation evidence based design and technology improving the patient experience by decreasing the cognitive burden of admission to the Intensive Care Unit (ICU).

A consumer was involved on the panel selecting these projects. For further information visit our website.

Health Alliance

The Health Alliance, a partnership between Metro North and Brisbane North PHN, continued progressing its three priority areas:

- Frail older people
- Emergency Department frequent presenters (those with high psychosocial needs)
- Children of Caboolture.

The focus of the Health Alliance for frail older people is to trial new ways of caring for people over 75 years living in the community and in residential aged care in The Prince Charles Hospital catchment.

A convergence event in October for the Ageing Well Initiative, brought together more than 80 stakeholders from health and aged care sectors to review, validate and consolidate information gathered from previous engagement processes.
The convergence highlighted ‘big ideas’ requiring significant change, not only in health, but in other sectors:

- Changing the “story” about older people
- Forming care teams around the older person and their family
- Reimagining residential aged care
- Building the capacity and capability of community-based services.

The Health Alliance is consolidating the ‘do it now’ actions prioritised at the convergence event. A deeper dive into the feasibility, viability and desirability of these actions and initiatives will be the next focus with guidance from consumers.

For further information visit the website.

Community forums and expos

Community forums and expos continued to bring together community partners and consumers to explore opportunities for improving the healthcare journey.

Metro North Health Forum

The fifth annual Metro North Health Forum, a joint initiative between Metro North and Brisbane North PHN, focussed on ‘Connecting for the future’. Attendance exceeded 400 and included a breakfast for general practitioners and practice nurses. For the first time, a consumer, Natasha Malmstrom, facilitated one of the forum topics – Connecting People.

Brighton Health Expo

The third annual Healthy Ageing Expo was held during seniors’ week in August at the Brighton Health Campus. The expo connects consumers, their carers and families, community, volunteers and staff, to help people live the best life they can as they grow older.

The Expo included the opening of the new wellbeing garden.
Wellbeing garden
The wellbeing garden was funded and supported Sandbag Incorporated through the Skilling Queenslander for Work Program. Patients, residents and their families, staff and students from Sandgate High School connected to work together on the design and development of garden. This included the students and one Indigenous resident painting the area and refurbished gazebo.
Since the garden opening, more people are accessing the waterfront via the new path, including local mums and their children who are accessing the Café on campus and the fenced playground, promoting intergenerational opportunities for our residents and patients.
The wellbeing garden assists with improving the wellbeing of residents, patients, carers and families on campus making a more harmonious environment for all. Creating indigenous artwork in the garden provides a sense of connection to the land respecting diversity and culture. The garden has also created a positive and welcoming workplace for staff and volunteers to access the waterfront during breaks, improving psychological wellbeing and connection amongst staff and teams.

Mental Health Expo
The ninth annual Brisbane Mental Health Expo themed ‘Head, Heart, Health’ was held in October and saw Reddacliff Place in Brisbane City transformed into a colourful, interactive hub of activity to raise mental health awareness within the local community.
The Expo was co-ordinated by a committee of local not-for-profit and government health services. It was the second year that Metro North and Metro South and Primary Health Networks partnered to provide a large scale Expo.
The event provided information, connected people with support options, reduced stigma and promoted awareness of positive mental health. The Expo included live music, a virtual reality experience, pop-up safe space, free food and coffee, arts space/activities. There were over 40 interactive information stalls and approximately 4,500 people attended.
Development of *Connecting for Health 2019-2021*

*Connecting for Health* 2016-2018 has provided the foundation for consumers and community to contribute to service planning, design and improvements across Metro North.

In 2018, we worked with staff consumers, community and partners to revise the strategy and set new targets to strengthen engagement into the future. An annual action plan for 2019 will be developed and progress monitored. The Board will continue to be briefed on progress annually.

Conclusion

This report demonstrates that across our organisation we are building a culture of consumer-centred care. The *Connecting for Health Strategy* guided our progress and many of the targets we set have been met or exceeded over the last three years. We aim for consumer engagement to advance under the guidance of the new strategy, *Connecting for Health 2019 – 2021* and look forward to further collaboration to deliver high quality care and outcomes for the communities we serve.
### Appendix 1 –
### Progress towards target actions for 2016-18

In 2015 we proposed to carry out a series of actions to implement the *Connecting for Health Strategy*. The table below summarises our perception of progress to undertaking these actions.

**Priority: Lead a continuously improving consumer-centred culture**

<table>
<thead>
<tr>
<th>Action</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 Develop organisation key performance indicators (KPIs) for partnering with consumers.</td>
<td>Some progress</td>
</tr>
<tr>
<td>1.1.1 Develop executive KPIs for partnering with consumers.</td>
<td>Some progress</td>
</tr>
<tr>
<td>1.2 Metro North peer network of consumer and community advisors established.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>1.2.1 Continue to support and develop capability and leadership amongst consumer advisors to embed consumer engagement in decision-making processes across directorates and clinical streams.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>1.2.2 Facilitate engagement with consumer advisors matched to areas of expertise and clinical areas.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>1.3 Continue to develop capability amongst Metro North leaders to collaborate with consumers through coordination, leadership and support in system-wide networks, directorate and clinical stream operations.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>1.3.1 Monitor, evaluate and improve existing policies, procedures and guidelines to facilitate and support partnerships with consumers.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>1.4 Each directorate to nominate engagement leaders and committees that will have responsibility for developing and implementing local action plans aligned with Connecting for Health.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>1.5 Review staff recruitment practices including role statements to incorporate greater focus on staff selection based on attributes of empathy, collaboration, responsiveness and openness.</td>
<td>Some progress</td>
</tr>
<tr>
<td>1.5.1 Leadership positions that require significant consumer engagement will have consumers on selection panels.</td>
<td>Exceeding target</td>
</tr>
<tr>
<td>1.5.2 Offer professional development opportunities (conference/webinars) for leaders in consumer engagement through universities or organisations recognised for their expertise in consumer engagement and consumer-centred care.</td>
<td>Significant progress</td>
</tr>
</tbody>
</table>
## Priority: Include a diversity of people and voices

<table>
<thead>
<tr>
<th>Actions</th>
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</tr>
</thead>
<tbody>
<tr>
<td>2.1 Expand the reach to consumers and community groups not currently engaged to support participation and access by all those who want to engage.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>2.1.1 Targeted strategies for Aboriginal and Torres Strait Islander communities.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>2.1.2 Targeted strategies for Culturally and Linguistically Diverse (CALD) communities.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>2.1.3 Targeted strategies for all people with disabilities.</td>
<td>Some progress</td>
</tr>
<tr>
<td>2.2 Build understanding and capability of staff to undertake tailored strategies for reaching diverse consumer and community groups.</td>
<td>Some progress</td>
</tr>
<tr>
<td>2.3 Review current systems to develop and communicate consumer information in a format that all consumers can understand.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>2.4 Engage with peak organisations on policy and health service reform agendas at local, state and national level, to advocate for consumer engagement sector development needs.</td>
<td>Some progress</td>
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</table>

## Priority: Improve how we respond to consumer experiences and expertise

<table>
<thead>
<tr>
<th>Actions</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Develop systems and processes to deliver staff training and orientation in partnering with consumers.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>3.2 Review and revise current organisational approach to collection, analysis and use of consumer feedback to improve quality, safety and performance.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>3.3 Invest in innovative systems that make it easy for consumers to provide feedback in a manner that allows them to tell us about their experiences both at the point of care as well as after care.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>3.4 Use a set of guidelines at system level for considering consumer feedback to enable appropriate and timely responses to feedback. For example, use consumer feedback, to monitor how Metro North is performing in relation to dimensions of consumer-centred care and Charter of Health care Rights.</td>
<td>Some progress</td>
</tr>
<tr>
<td>3.5 Develop and trial multiple methods of inquiry, survey tools and questions to improve the systematic collection, analysis and reporting of data (qualitative and quantitative) provided by consumers.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>3.6 Facilitate consumer involvement in co-designing care in Metro North.</td>
<td>Some progress</td>
</tr>
<tr>
<td>3.7 Use multiple forums to showcase examples of improvements in health care derived through consumer feedback.</td>
<td>Significant progress</td>
</tr>
</tbody>
</table>
## Priority: Integrate for a seamless care experience for individuals, families and communities in Metro North

<table>
<thead>
<tr>
<th>Actions</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 Partner with Community Board Advisory Group (CBAG) to guide consumer and community involvement in:</td>
<td>Significant progress</td>
</tr>
<tr>
<td>• Collaborative health needs assessments and service planning.</td>
<td></td>
</tr>
<tr>
<td>• Monitoring and evaluation of Metro North Strategic Plan and Health Service Strategy.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>• Innovative hospital avoidance, demand reduction and continuity of care initiatives.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>• Other initiatives identified through partnerships between Metro North staff and community partners, for example, LINK (Leading Innovation through Networking and Knowledge-sharing) projects.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>4.2 In partnership with Brisbane North PHN, facilitate communication and networking opportunities amongst acute, primary care and community sectors that generate opportunities for collaboration.</td>
<td>Significant progress</td>
</tr>
<tr>
<td>4.2.1 Strengthen information sharing with consumers to help with navigating the services in Metro North.</td>
<td>Some progress</td>
</tr>
<tr>
<td>4.3 Hold an inaugural consumer and community health check forum to evaluate consumer and community interactions with services in Metro North and determine how these interactions and integration could be improved.</td>
<td>Significant progress</td>
</tr>
</tbody>
</table>