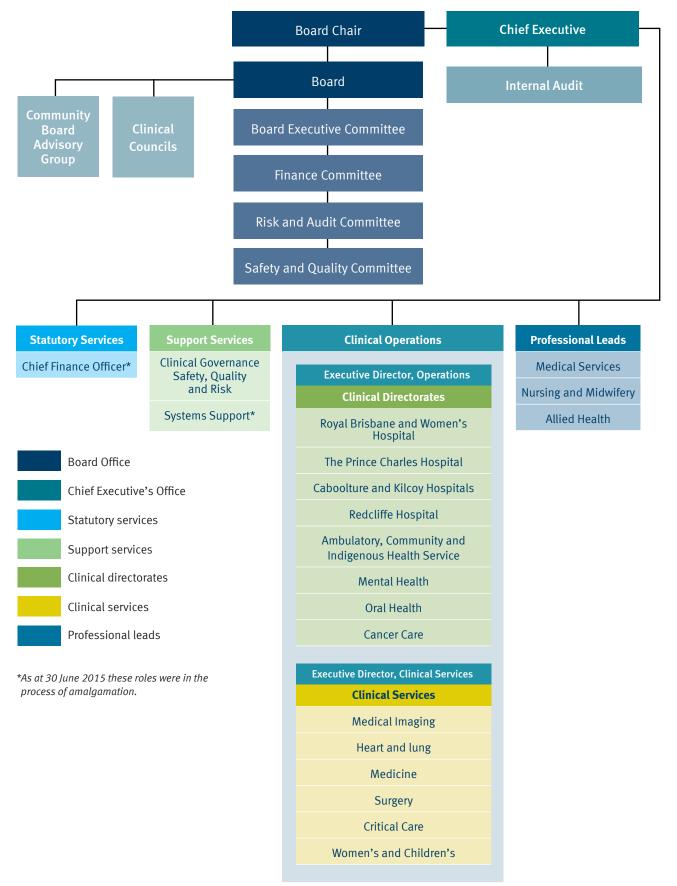
4.0 GOVERNANCE – MANAGEMENT AND STRUCTURE

4.1 Organisational structure



SPECIALIST DIABETES SERVICE FOR CHILDREN LAUNCHED

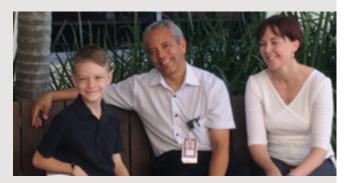
An initiative at North Lakes Health Precinct is a welcome relief for parents of children with Type 1 diabetes.

North Lakes Diabetes Service and Redcliffe Hospital Paediatric Ward have teamed up to give families the option to access services at North Lakes Health Precinct within the first day of diagnosis.

This new collaboration will see the number of days a child is admitted to Redcliffe Hospital with Type 1 diabetes significantly reduced.

Speaking at the launch of the service in March, Clinical Diabetes Nurse Practitioner Robyn Mallett said families now had an opportunity to receive specialised care from the multidisciplinary diabetes team at the North Lakes Health Precinct instead of staying in hospital.

"Children newly diagnosed with Type 1 Diabetes Mellitus could stay in hospital for up to seven days," Ms Mallett said.



Mitchell Rix, Dr Marlon Radcliffe and Robyn Mallett at the launch of the diabetes service initiative.

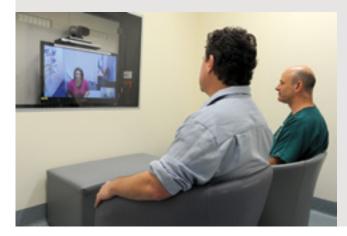
"This option allows the child to stay with their family in the comfort of their own home but receive the same high level of care from the Diabetes Team at North Lakes as they would have received if they had been admitted to the Redcliffe Children's Ward.

"We want to empower families when dealing with a new diagnosis not just by treating the symptoms but through ongoing care, support, education and collaboration about the condition," she said.

TELEHEALTH TECHNOLOGY PUTTING RURAL PATIENTS FIRST

Kilcoy Hospital has been working with other Metro North Hospital and Health Service (MNHHS) facilities to improve access to specialist outpatient services through the use of telehealth technology.

Telehealth delivers real-time health consultations online by providing specialist healthcare via video link up.



Kilcoy Hospital Director of Nursing and Facility Manager, Lyndie Best, said telehealth services give patients living in rural, remote and outer metropolitan locations greater access to a range of specialist consultations.

"Telehealth is increasing the capacity to offer outpatient sessions to the community of Kilcoy and surrounds for specialist appointments that occur in Brisbane, Redcliffe and Caboolture," Ms Best said.

Kilcoy Hospital provides blood tests prior to telehealth sessions, which are then made accessible to the specialist. Plain X-rays can also be performed if required by Nursing Operators at Kilcoy.

"We are also holding a separate mobile telehealth, unit which is able to connect to the Fracture Clinic appointments at Redcliffe Hospital for the patients who are non-weight bearing for a period of time, and are unsafe to travel home," Ms Best said.

"X-rays can also be performed prior to these scheduled sessions and any other information such as physiotherapy updates can be provided.

"Telehealth prevents a rather long and sometimes uncomfortable trip, for some, from Kilcoy to Redcliffe Hospital."

Other uses being explored with telehealth extend to working with other disciplines such as physiotherapists, occupational therapists and psychologists over distance.

4.2 The Board

The Board is appointed by the Governor in Council on the recommendation of the State Minister for Health and is responsible for the governance activities of the organisation, deriving its authority from the *Hospital and Health Boards Act 2011* and the *Hospital and Health Boards Regulation 2012*.

The functions of the Board include:

- Developing the strategic direction and priorities for the operation of MNHHS
- Monitoring compliance and performance
- Ensuring safety and quality systems are in place which are focused on the patient experience, quality outcomes, evidence-based practice, education and research
- Developing plans, strategies and budgets to ensure the accountable provision of health services
- Ensuring risk management systems are in place and overseeing the operation of systems for compliance and risk management reporting to stakeholders
- Establishing and maintaining effective systems to ensure that the health services meet the needs of the community.

The Board are all independent members who reside in the local catchment area, strengthening local decision making and accountability for health policies, programs and services within MNHHS. Each of the Board Members brings a wealth of experience and knowledge in public, private and not-for-profit sector with a range of clinical, health and business experience. The following committees support the functions of the Board, each operates with terms of reference describing the purpose, role, responsibilities, composition, structure and membership. An external review of Board and committee governance arrangements was undertaken by Emeritus Professor Geoff Kiel between September and November 2014.

Executive Committee

The role of the Executive Committee is to support the Board by working with the Chief Executive to progress strategic issues and ensure accountability in the delivery of services within MNHHS. The committee oversees the development of the Strategic Plan and monitors performance, the development of the clinician, consumer and community engagement strategies and the primary healthcare protocol, and works with the Chief Executive in responding to critical and emergent issues.

Finance Committee

The role of the Finance Committee is to oversee the financial performance, systems, risk and requirements of MNHHS. The committee reviews the financial strategy, financial policies, annual operating plans and capital budgets, cash flows and business plans to ensure alignment with key strategic priorities and performance objectives.

Risk and Audit Committee

The role of the Risk and Audit Committee is to oversee the internal and external audit function and matters relating to risk and compliance for financial, accounting and legislative requirements. The committee provides independent assurance and assistance to the Board on the risk, control and compliance frameworks and external accountability responsibilities as prescribed in the *Financial Accountability Act 2009, Auditor-General Act 2009, Financial Accountability Regulation 2009* and *Financial and Performance Management Standard 2009.*

Safety and Quality Committee

The role of the Safety and Quality Committee is to provide strategic leadership in relation to clinical governance. The committee oversees the safety, quality and effectiveness of health services and monitors compliance with plans and strategies, while promoting improvement and innovation for the safety and quality of services within MNHHS.

SCHOLARSHIPS HELP BUILD KNOWLEDGE AND SKILLS

Metro North Hospital and Health Service Chairman's Scholarship is designed to build knowledge and skills needed to position Metro North as a world-class academic health science centre.

The scholarship program is funded by the MNHHS Board.

The 2014-2015 recipients are Acting Professor Sue Patterson, Principal Research Fellow, Mental Health at Royal Brisbane and Women's Hospital (RBWH) and Caboolture Hospital (pictured below), and Satyan Chari, an Occupational Therapist and PhD Candidate, Metro North Safety and Quality Unit at RBWH.

Sue's work and studies will be in the area of consumer and community engagement and embedding research within health services. She is completing placements with two world-leading institutions committed to application of patient experience to quality improvement and integration of research and practice. Upon completion of the scholarship period, Sue will use the ideas, knowledge, and networks gained through this experience to facilitate a growing culture of innovation across mental health clinical teams.

Satyan leads the inpatient fall prevention program at RBWH. He is undertaking immersive residencies in world renowned healthcare institutions in the United States.

Upon completion of the scholarship period, Satyan will leverage the ideas, knowledge, and networks gained through this experience to facilitate a growing culture of innovation using HSE methods across Metro North clinical teams.





Dr Paul Alexander AO Board Chair

Dr Paul Alexander is a general practitioner with over 30 years experience in private practice and clinical executive posts. Paul has held board positions in military, private practice, commercial and not-for-profit organisations.

For more than 15 years, Paul has worked as a general practitioner in Morayfield. He is also a medico-legal consultant, providing education and support to the medical profession throughout Queensland. Paul is the Independent Health Advisor for the Department of Immigration and Border Protection and Chair of The University of Queensland Healthcare Board.

Paul has had an extensive career in the Australian Defence Force, joining the Army in 1976 and completing his medical training at the University of Melbourne in 1978. He has undertaken a varied number of command, management and clinical positions within Defence including postgraduate medical training in the UK in Sports Medicine and Tropical Medicine, commanding both field medical units and military hospitals.

In 2000, Paul took up full-time clinical practice in Brisbane in a large group medical practice where he undertook the role of Managing Partner. Paul was promoted to Brigadier in January 2004 and assumed the position of Assistant Surgeon General Australian Defence Force – Army. In 2011, Paul was made an Officer in the Military Division of the Order of Australia for distinguished service to Defence in the field of health. Paul completed his tenure as Commander Joint Health and Surgeon General Australian Defence Force in 2012, where he was responsible for the provision of healthcare to the Australian Defence Force.

Paul has qualifications from the Interagency Institute for Health Care Executives (George Washington University) and the INSEAD International Directors Program. He is a Fellow of the Royal Australasian College of Medical Administrators, a Fellow of the Australasian College of Legal Medicine and a Fellow of the Australasian College of Tropical Medicine.



Mr Vaughan Howell Deputy Board Chair Chair, Finance Committee

Mr Vaughan Howell has a career spanning more than 30 years working in the health service industry, managing organisations in the public, private and not-for profit sectors in Australia and the UK. His key success has been leading organisations through difficult and critical periods focussing on strategy and implementing major service redesign that has produced effective, efficient and economic, patient focussed services.

His leadership and commitment to excellence has been recognised by organisations such as the Australian Quality Council, The Australian Human Resources Institute, and the Australian Institute of Marketing, Australian Private Hospitals Association and Baxter Healthcare.

Vaughan is an experienced Board Member having served on health and welfare boards in Australia and the UK. Vaughan is a graduate of the University of Queensland with major interests, apart from health service redesign, in incorporating the innovative use of technologies, in bioethics, research ethics, knowledge and skills transference. He has served on committees and taskforces that have considered the impacts of bioethics on the philosophy of service delivery. He currently undertakes interesting esoteric management consulting assignments.



Mr Leonard (Len) Scanlan Chair, Risk and Audit Committee

Mr Lenard (Len) Scanlan is a former Auditor-General of Queensland and has been appointed a National Fellow of the Institute of Public Administration Australia for his outstanding contribution to the practice of public administration.

Len is a graduate of the Queensland Institute (now University) of Technology, with a Bachelor of Business (Accy), and the University of Queensland with a Bachelor of Arts (Government) and a Masters of Public Administration.

Len now operates a consultancy business focussing on audit committees, governance and boards for both the private and public sectors and is an Adjunct Professor at the University of Queensland. Among his business interests Len is a non-executive director of Queensland Urban Utilities, Queensland Building and Construction Commission, and Chairman of Ganes Ltd. He chairs the Metro North Risk and Audit Committee, and the Audit Committee for the Royal National Association. Len was a non-executive director of the Medical Benevolent Association of Queensland Ltd (resigning in May 2015). He has received a number of awards, including the Centenary Medal Award.



Dr Kim Forrester Chair, Safety and Quality Committee

Dr Kim Forrester is a registered nurse and barrister at law, her clinical background includes intensive and coronary care nursing. She is a member of the Australian College of Nursing.

Kim established the Masters in Emergency Nursing program at Griffith University and was a foundation academic in the School of Medicine. She currently holds an academic appointment as Associate Professor in the Faculty of Health Sciences and Medicine at Bond University.

Kim's areas of legal practice include coroner's inquests, professional regulation and child protection. She held the position of Assistant Commissioner (legal) on the Queensland Health Quality and Complaints Commission from 2006 to 2009 and is a member of the Queensland Law Society's Elder Law, and Health and Disability Law Committees. Kim publishes extensively in the area of health law. She is editor of the Nursing Column in the 'Journal of Law and Medicine', and co-author of the texts 'Essentials of Law for Health Professionals', 'Australian Pharmacy Law and Practice' and 'Essentials of Law for Medical Practitioners'.



Professor Helen Edwards OAM Member

Professor Helen Edwards is Assistant Dean (International and Engagement), Faculty of Health, Queensland University of Technology (QUT) in Brisbane and a member of the Institute of Health and Biomedical Innovation. Helen is a Program Leader for the Wound Management Innovation Cooperative Research Centre and was involved in establishing this \$110 million centre, the largest wound research initiative globally. It focusses on development of cost effective and practical wound therapies, diagnostics and interventions.

Helen is also internationally recognised for her work in ageing and chronic disease. Her research is focussed on evaluating models of care for people with chronic wounds and self-management of chronic disease. She leads the wound management research team in the Faculty of Health at QUT and works with multidisciplinary teams and in partnership with industry. Professor Edwards is also a Board Member of the Australian Nursing and Midwifery Accreditation Council.



Professor Nicholas Fisk Member

Professor Nicholas Fisk is Executive Dean of the Faculty of Medicine and Biomedical Sciences at the University of Queensland with responsibility across population health, preclinical and clinical medicine and four hospital-based research institutes. He practices as a maternal-fetal specialist at Royal Brisbane and Women's Hospital.

Nicholas was Director of the University of Queensland's Centre for Clinical Research (UQCCR), before becoming Executive Dean in 2010. From 1992 to 2007, he was Professor of Obstetrics and Gynaecology at Imperial College and Hammersmith Hospitals, London. His research interests lie in stem cell biology, multiple pregnancy and clinical obstetrics and he has published over 400 papers, reviews and editorials, including in prestigious periodicals such as Lancet, JAMA and New England Journal of Medicine.

Nicholas is a member of editorial boards including PLOS Medicine and Stem Cells Translational Medicine, and holds a visiting professorship at the National University of Singapore. He Chairs the Deans of Medicine Committee for the Group of Eight Universities in Australia and is a member of the Association of Academic Health Centres International Steering Committee. His current professional affiliations include Fellowship of the Academy of Health and Medical Sciences and Board Member, Brisbane Diamantina Health Partners.



PROVIDING A LINK TO BETTER CARE

Metro North Hospital and Health Service continues to work with community partners to drive improvements in health service delivery.

The \$1 million Leading Innovation through Networking and Knowledgesharing (LINK) initiative, launched in May, aims to further improve patient experiences, outcomes, continuity and quality of care by collaboratively addressing hospital admission and discharge practices, and avoidance of unnecessary hospital admissions and readmissions.

It's all about integrated and connected care and ensuring MNHHS works in partnership to deliver the right care, at the right place, at the right time.



Associate Professor Cliff Pollard AM Member

Associate Professor Cliff Pollard AM is a retired general surgeon. He undertook his surgical training in Queensland and obtained post Fellowship experience in the United Kingdom. Cliff has been a staff surgeon and visiting medical officer at Redcliffe Hospital, prior to moving to the Royal Brisbane and Women's Hospital in 2008 as the inaugural Director of the Trauma Service, retiring in 2012. As a member of the Royal Australian Army Medical Corps, he deployed to Bougainville and East Timor.

Cliff has a major interest in all aspects of trauma management in both pre-hospital and hospital environments and he has presented widely on the topic both nationally and internationally. More recently Cliff was the Chair of the Statewide Trauma Clinical Network. Cliff has been an examiner in general surgery for the Royal Australasian College of Surgeons and currently teaches anatomy in the Advanced Clinical Anatomy Course. Cliff holds an Adjunct Associate Professor position in the School of Medicine, University of Oueensland.



Dr Margaret Steinberg AM Member and Sponsor, Community Board Advisory Group (CBAG)

Dr Margaret Steinberg AM has expertise in governance and ethical decision making, as well as experience as a clinician, health administrator, academic and director of public, private and third sector organisations. Margaret is a former Commissioner of the Criminal Justice and Crime and Misconduct Commissions, and Chair of their Audit and Governance Committees. She was Foundation Deputy President of the Guardianship and Administration Tribunal, Assistant Commissioner of the Health Quality and Complaints Commission and Chair of its Consumer Advisory Committee.

Margaret has a special interest in governance, public and community health and currently sits on a number of professional disciplinary and regulatory Tribunals as well as being Patron, Governor or Director of third sector organisations. Margaret has a PhD (Child Health and Education) and Masters of Physiotherapy. Her awards include a Churchill Fellowship (disability), NHMRC/ PHRDC Travelling Fellowship (telemedicine) and WHO study (HIV/AIDS).

Margaret was made a Member of the Order of Australia in 2003 in recognition of her service to public health and welfare policy through research in the areas of ageing, disability and social justice.

COMMUNITY AND CONSUMER ENGAGEMENT HIGHLIGHT

The Metro North Hospital and Health Service (MNHHS) Community Board Advisory Group (CBAG) was established in October 2013 to drive partnerships and engagement with consumers and communities.

CBAG comprises representatives from consumer and community organisations who partner with MNHHS to improve quality of life for our community and to support people with chronic conditions, hard to reach populations and those with special health needs to access hospital and health services. The Metro North Brisbane Medicare Local (now PHN) also provided valuable representation.

Engagement priorities

- Form meaningful partnerships to support innovation and ensure that patients, carers and families are at the centre of care
- Connect MNHHS with the wider care provider system so people can access integrated care from the right care provider at the right time and in the right place
- Enable equity of access to MNHHS services, particularly for hard to reach populations and those with special health needs

Achievements

- Instrumental in developing the LINK (Leading Innovation through Networking and Knowledge-sharing) initiative for partnerships in continuity of care
- Contributed to the development of major strategic work, including the inaugural Health Service Strategy, the revised MNHHS Strategic Plan, and the Putting People First Strategy
- Provided community perspective in the implementation of these key strategies
- Involved in the Metro North Health
 Forum on Reform held in June 2015 a
 collaboration between Metro North
 Brisbane Medicare Local and Metro North
 Hospital and Health Service
- Reviewed MNHHS consumer and community engagement and partnership policies
- Identified emergent community engagement priorities for MNHHS.

4.3 Executive Management

The Board appoints the Health Service Chief Executive (HSCE) and delegates the administrative function of MNHHS to the HSCE and those officers to whom management is delegated. The HSCE responsibilities are:

- Managing the performance and activity outcomes for MNHHS
- Providing strategic leadership and direction for the delivery of public sector health services in the HHS
- Promoting the effective and efficient use of available resources in the delivery of public sector health services in the HHS
- Developing service plans, workforce plans and capital works plans
- Managing the reporting processes for performance review by the Board
- Liaising with the executive team and receiving committee reports as they apply to established development objectives
- The HSCE may delegate the Chief Executive's functions under the Hospital and Health Boards Act 2011 to an appropriately qualified health executive or employee.

Health Service Chief Executive

Mr Ken Whelan

As Chief Executive, Metro North Hospital and Health Service (MNHHS) Ken Whelan is responsible for the day to day management of Australia's largest public health authority.

Prior to his commencement with MNHHS, Ken was the Deputy Director General, System Purchasing and Performance Division for New South Wales Ministry of Health.

Ken's career originated from a nursing background but has been in Senior Management for the past 23 years. For 15 of those years, he has held the position of Chief Executive in both New Zealand and Australia.

Ken has led provincial district health boards and metro district health boards in New Zealand and led a tertiary facility in Queensland as well as a regional Queensland health district.

Ken has brought strong strategic and operational experience to MNHHS and is committed to working with health facilities to ensure they provide sustainable health services that meet the needs of the populations they serve. During 2014/2015 financial year, Mr Malcolm Stamp was employed as the MNHHS Chief Executive until 8 September 2014. Ms Kerrie Mahon was appointed as the Interim Chief Executive from 8 September 2014 until 10 November 2014. Mr Terry Mehan was appointed to act in the role from 10 November 2014 until 8 May 2015 and Mr Ken Whelan commenced in the role on 13 May 2015.

The following Senior Executive Leadership Team positions support the HSCE in the development and execution of the MNHHS strategy as approved by the Board. List includes the names of incumbent as at 30 June 2015.

Executive Director Operations

Mr Shaun Drummond

Chief Finance Officer

Mr Robert Dubery

Executive Director Clinical Governance, Safety, Quality and Risk Ms Linda Hardy

Executive Director Clinical Services Dr Elizabeth Whiting

Executive Director System Support Mr Brian Howell

Professional Leads

Executive Director Medical Services Dr Judy Graves

Executive Director Nursing and Midwifery Services Adj Assoc Professor Alanna Geary

Executive Director Allied Health Mr Mark Butterworth

Directorate Executive Directors

Executive Director RBWH Dr Judy Graves

Executive Director TPCH Mr Anthony Williams

Executive Director Redcliffe Hospital Ms Lexie Spehr

Executive Director Caboolture and Kilcoy Hospitals Dr Lance Le Ray

Executive Director Ambulatory, Community, & Indigenous Health Service Ms Mary Slattery

Executive Director Oral Health Services Dr Katie Tran

Executive Director Mental Health Services Assoc Professor Brett Emmerson

Executive Director Medical Imaging Ms Vanessa Clarke

Clinical Stream Executive Directors

Executive Director Medicine Dr Elizabeth Whiting

Executive Director Surgery Dr Jason Jenkins

Executive Director Critical Care Dr Colin Myers

Executive Director Cancer Care Dr Amanda Dines

Executive Director Women's and Children's Ms Tami Photinos

Executive Director Heart and Lung Professor Darren Walters



The announcement to establish two Intensive Care beds at Caboolture Hospital was welcomed by staff, pictured here with the Metro North Board Chair Dr Paul Alexander (far right) and the then, Acting Chief Executive Terry Mehan (second from left).

NEW MODEL BOOSTS INTENSIVE CARE SERVICES IN THE NORTH

Metro North Hospital and Health Service is delivering on its commitment to place resources on the frontline where they are needed most.

Following the release of the Health Service Strategy 2015 – 2020 it was announced that Redcliffe and Caboolture hospitals would each receive two ICU beds.

Clinicians from Redcliffe and Caboolture Hospitals and hospital Executive Directors collaborated to develop a joint model for intensive care service delivery and establish a Caboolture Redcliffe Intensive Care Unit (CRICU).

This innovative model will enable a team of clinicians to deliver an ICU service across the two hospitals, supported by smart use of ICT and technology.



Metro North Hospital and Health Board Chair, Dr Paul Alexander AO, and Director of ICU at Redcliffe Hospital Dr Hamish Pollock (at right) share the good news about the increase in ICU beds with hospital staff.

IMPROVING MEDICAL IMAGING INFORMATION SHARING

Medical Imaging has embarked on an ambitious information technology (IT) transformation program to ensure seamless information sharing across Metro North Hospital and Health Service facilities.

Medical Imaging is the visualisation of body parts, tissues or organs for use in clinical diagnosis, treatment and disease monitoring, such as X-rays and ultrasound scans.

The ability to make all imaging studies available between facilities will allow both treating and reporting clinicians to access a patient's entire medical imaging history, regardless of their treatment location.

The availability of this information will provide:

- improved treatment of patients with clinicians being able to access entire patient imaging record
- reduction of imaging examinations as previous imaging from another department may provide the information required, and
- improved imaging reporting as reporting clinicians will have access to more information regarding their patient.

4.4 Public Sector Ethics Act 1994

MNHHS is committed to upholding the values and standards outlined in the Code of Conduct for the Queensland Public Service, which was developed in accordance with the four core principles contained in the Public Sector Ethics Act 1994: Integrity and impartiality; Promoting the public good; Commitment to the system of government; Accountability and transparency.

Each principle is strengthened by a set of values and standards of conduct, describing behaviour that will demonstrate that principle.

All staff employed in MNHHS are required to undertake training in the Code of Conduct for the Queensland Public Service during their orientation, and re-familiarise themselves with the Code at regular intervals. During 2014–15, the orientation program was updated to ensure conflict of interest, fraud and bullying and harassment are clearly addressed to ensure all staff have a good understanding of their requirements under the Code of Conduct for the Queensland Public Service.

Communications relating to the standard of practice are regularly repeated.

4.5 Queensland Public Sector Values

The values of the Queensland Public Sector are demonstrated in the work of Metro North's more than 13,000 employees delivering services from the north of the Brisbane River to the north of Kilcoy.

Customers first – delivering responsive, integrated and connected care to local communities and providing speciality services for patients throughout Queensland, Northern New South Wales and the Northern Territory.

Ideas into action – improving healthcare outcomes through innovative programs such as the Support, Explore, Excel & Deliver (SEED) program which is delivering 15 innovative healthcare projects.

Unleash potential – creating a culture of leadership and innovation across all hospitals and health sites where excellence in patient-centred care is the number one priority.

Be courageous – working with our partners across the healthcare, community, research and government sectors in a collaborative and transparent way to deliver better and more integrated services to patients.

Empower people – delivering excellent care particularly during periods of high demand (e.g. flu season).



AeHRC and CSIRO Scientists – project leader Dr Qing Zhang, team leader Dr Mohan Karunanithi, Post Doctoral Fellow Marlien Varnfieldk and research scientist Dr Hang Ding.

MOBILE HEALTH APP WINS NATIONAL INNOVATION AWARD

Technology is allowing the home delivery of hospital care to patients with chronic disease across Metro North.

The Mobile Technology Enabled Rehabilitation (MoTER) platform innovation won the health category at the national iAwards, which recognise Australian-based information and communication technologies which have the potential to have or are already having a positive impact on the community.

The MoTER platform is the result of an ongoing collaboration between The Prince Charles Hospital (TPCH) and Subacute and Ambulatory Care Services (SaAS) of MNHHS, Australian e-Health Research Centre (AeHRC) and CSIRO. It was developed to help manage rehabilitation services for chronic diseases including cardiac diseases, chronic obstructive pulmonary disease (COPD) and diabetes.

The platform consists of a smartphone application that can be tailored to a patient's individual medical profile, and an internet application that updates the progress of their rehabilitation and ongoing care from home.

Patients use the MoTER application on their smartphone to measure physiological data such as intensity and speed of walking, gather vital sign measurements from medical devices, and make health entries of their wellbeing.

Education is delivered via audio and video content on the phone and daily motivational and educational text messages are sent to the patient's phone. Specialised clinicians set personalised goals and give feedback at weekly phone or video calls.