



Person-centred care

Person-centred care is a way of thinking and doing things, an approach which helps Metro North provide accessible, responsive and flexible services that meet the diverse needs and preferences of people in our community.



Value-based healthcare

When we think of value in healthcare, we often think of making the most of our financial resources. A new project in Metro North is turning that idea on its head, looking at value and cost from the patient perspective.

Project officers Dr Simon Bugden and Jodie Gordon said value-based healthcare is a global movement aimed at focusing on things that are important to the patient in terms of health outcomes.

“Value-based healthcare looks at the longitudinal effect on the patient, not just the immediate patient outcome. As an emergency doctor, I can stitch someone up, but I don’t know if I’m helping them to do what they want,” Simon said.

“This is not about financial costs at all, but the interesting thing about high performance organisations is that when they focus on improving the value for patients, cost goes down.”

The idea of value-based healthcare is to recognise that everyone’s definition of good quality of life is different. For some it may be the ability to return to peak physical fitness, whereas for others it could be the ability to play with their children.

Jodie and Simon are working with teams across Metro North’s hospitals and health services to help staff recognise opportunities for value-based healthcare decisions.

“We have been given permission to give people permission,” Jodie said. “People already have the concept in their head, but may not feel empowered to make a different decision. We ask them what they need, and encourage innovation to improve the quality of life from the patient’s perspective.”

Value-based healthcare in Metro North

Some examples of value-based healthcare projects across Metro North include:



- **Year of the Frail Older Person** – a focus on changing the way we treat older patients.
- **Choosing Wisely at RBWH** – reducing duplication and unnecessary tests and treatments.
- **LINK and SEED grants** – demonstrating how projects will improve value for patients.
- **Redcliffe low-value healthcare initiative** – a pilot project to reduce interventions and tests that may not be necessary.
- **CISS high-value healthcare initiative** – a pilot implementation of Patient Reported Outcome Measures (PROMs).



New support for new mums

Being a first time mother can be a scary and exciting experience, as you learn how to care for your new baby and cope with hormonal and physical body changes. A new program at Redcliffe Hospital is helping new mothers prepare emotionally for parenthood.

The program is a collaboration between Redcliffe Hospital's Maternity Services and Mental Health, supported by the Queensland Centre for Perinatal and Infant Mental Health. It involves midwives and consumers from Redcliffe Hospital's Maternity Service working closely together to deliver an emotional preparation class for expectant parents.

Redcliffe Hospital Nursing Director of Critical Care, Women's and Children's Service, Russell Reilly said women are more vulnerable to experiencing mental illness during and after pregnancy than any other time in their life.

"The challenges of pregnancy and new parenthood can also exacerbate an existing mental illness," Mr Reilly said.

"However, these issues are not well-recognised or understood in the community and parents may not recognise their signs and symptoms, or may blame or denigrate themselves for the emotions they are experiencing, and may therefore be reluctant to seek help."

The program involves consumers with lived experience of mental illness during and after birth co-designing and co-presenting parenting classes which has changed the dynamic and receptiveness to learning within the class. The content of the class was developed through a team approach and has evolved based on feedback.

"The content suddenly becomes real, and expecting parents willingly engaged with the concepts and strategies offered to improve early detection and intervention for emotional challenges during the perinatal period," Mr Reilly said.

"Consumers co-delivering the class has enabled role-modelling of positive help-seeking behaviours, hope for recovery, honest and open relationships between parents and clinicians, as well as providing partners with much needed support."

Participants have reported that the classes provide them a platform to begin a conversation about their emotions. For midwives, the class has improved their confidence in discussing healthy transitions to parenthood and supports available in the community for parents. It has also improved staff understanding of perinatal mental illness, and their ability to provide empathetic and comprehensive family-centred care.

If this information has caused concerns, please call Lifeline on 13 11 14.

Pictured above: Debbie Spink and Helen Funk.



- Suicide is the leading cause of maternal death in Queensland during pregnancy and for 12 months following pregnancy (*QMPQC, 2015*)
- 16% of women will experience post-natal depression (*Beyond Blue, 2011*)
- 10% of men will experience post-natal depression (*Beyond Blue, 2011*)

Working together to shape quality of care and patient-focused outcomes

Approximately 200 clinicians, clinical support staff and consumers are working together to inform and enhance patient care and health outcomes through the delivery of health services at what will become Metro North's newest health facility – a state-of-the-art specialist rehabilitation and ambulatory care centre. The facility forms part of the Herston Quarter redevelopment, adjacent to the RBWH campus.

Functional elements of this health facility – from patient admissions to surgical and rehabilitation spaces to discharge – are being worked through by over 60 user groups and reference groups as part of a 12-month comprehensive and interactive clinical design process. When completed, this new health facility will comprise 100 rehabilitation beds, special purpose rehabilitation support areas and a surgical and endoscopic centre including a 32-bed surgical inpatient unit, seven operating theatres, three endoscopy rooms and associated recovery spaces, and medical imaging services.

The first phase of the clinical design process, which involved testing the layout of floor plans, and patient flows and coming up with improvements and solutions together, is now complete. The second phase got underway in June and will build on outcomes from the first phase and begin to bring floor plans to life as the detailed design is developed for each room and space within the building.

Working together

Metro North's Community Board Advisory Group (CBAG) is a vital mechanism that ensures we are accountable and outward-looking in our consumer and community engagement.

CBAG provides a platform for connection and collaboration to ensure consumer and community groups, particularly those who may experience access barriers or have more complex health needs, have a voice in Metro North. CBAG is actively involved in shaping Metro North's Health Service Strategy and in evaluating programs such as LINK innovation funding.

CBAG membership includes three members of the Metro North Board: Professor Mary-Louise Fleming, Professor Helen Edwards OAM, and founding Board sponsor Dr Margaret Steinberg AM. This year the role of CBAG Chair transitioned to an external community partner with the Heart Foundation Queensland's Health Director, Ms Rachelle Foreman, taking on the role.

Metro North Executive Director of Clinical Services Dr Elizabeth Whiting is also a member of CBAG which provides a strong relationship between community-based organisations and partners and Metro North Clinical Streams.

During 2017 CBAG and the Brisbane North PHN agreed to bring their separate consumer and community advisory committees together on shared agendas. The joint PHN Consumer Advisory Committee and CBAG meetings will focus on improving the consumer journey across the continuum of care, and providing an opportunity for consumer and community partners to contribute to the integration of services across sectors, and for all consumers in Brisbane North.

Shaping the future of hospital food

For some of our most vulnerable patients, coming to hospital can result in rapid loss of condition and malnutrition following a decreased appetite and poor intake of food.

Metro North Patient Food Services and Nutrition and Dietetics is introducing moulded meals across the Health Service, to improve the health outcomes and experiences for patients who require soft food. Moulded meals are pureed food shaped into its usual appearance, such as pureed corn shaped into a cob.

Moulded meals were originally trialled at The Prince Charles Hospital (TPCH) in 2015 and received positive feedback and outcomes. TPCH became one of the first public hospitals in Queensland to introduce the moulded meals as a regular item. TPCH currently serves around 90 moulded meals each day.

TPCH Food Services Dietitian Bianca Neaves said introducing moulded meals into the hospital came from patient dissatisfaction about appearance and taste and a belief that Food Services could provide a more appetising alternative.

“The moulded meals taste great! It tastes like the food should and patients love the appearance. Patient satisfaction has improved and patients are eating more than they were,” Ms Neaves said.

Metro North Patient Food Services Manager Simon Whelan said the moulded meals are beneficial for nutritional outcomes and patient health.

“Nutrition plays such an important part in the healing process,” Mr Whelan said. “Everyone eats with their eyes and when we give patients moulded meals that look like real food, the chance of them eating and enjoying it is a lot higher, reducing their length of stay and increasing their appetite.”

Redcliffe was our second hospital to implement moulded meals, and they will soon be introduced at Royal Brisbane and Women’s Hospital.

“We want to implement this initiative throughout the whole health service,” Mr Whelan said.



ALL MEALS

Facility	Meals per year
Metro North	2.7 million
RBWH	1.26 million
TPCH	768,000
Caboolture	290,000
Redcliffe	300,000
CISS	430,000
Kilcoy Hospital and surrounding services	43,160

MOULDED MEALS

Facility	Meals per day
TPCH	90 meals a day
Redcliffe	75 meals a day
RBWH (predicted)	135 meals a day

Pictured above: TPCH patient Lorna Duffy thanked Patient Food Services Cook Sierra Murray for her care.

Therapy programs provide connection

More than 300 patients and consumers at Brighton Health Campus are benefiting from meaningful and therapeutic group activities.



The psychosocial therapy program includes music therapy, group activities, and visits from therapy dogs and offers residents and inpatients opportunities for social interaction, mutual support and the benefits of being in a group.

Director of Social Work for Community, Indigenous and Subacute Services Louise Lynch said participants experience

improved mental health and adjust better to new circumstances resulting from changes in their health.

“About 340 patients have attended one or more groups and are providing positive feedback regarding the impact on their mental health and wellbeing, with around 87 per cent of participants rating the groups from good to excellent through patient evaluation surveys,” said Ms Lynch.

Therapy groups for inpatients focus on a range of topics supporting the emotional journey through transition care and rehabilitation, including reminiscence and life review, goal setting, laughter therapy and mindfulness and relaxation activities.

Data collected from participants of Brighton’s music therapy group, provided in each Brighton unit weekly, has shown significant changes in mood and energy and some mild improvements in pain and anxiety as a result of participation.

Patients are also reaping the benefits of a partnership with Delta Therapy Dogs, with two dogs currently visiting all Brighton units twice weekly to interact with patients in their room or common areas.

Pictured above: Special guest therapist from Delta Dogs

Designing services for better access

Metro North’s Community, Indigenous and Subacute Services (CISS) are reshaping and simplifying services to provide patients with the right care, at the right time and in the right place.

CISS by Design is an intensive, patient-centred project to make it easier to refer, connect, care and empower CISS clients and services by creating a responsive and integrated end-to-end service model that starts in the community and ends in the community.

The service redesign encompasses a new patient-centred ‘Hand of Care’ model, defining the five streams of service CISS will prioritise pressing forward towards a more patient-focused future:

- Referral, Assessment, and Navigation
- Home Hospital
- Extended Care
- Rehabilitation
- Specialist Residential

CISS Executive Director Chris Seiboth said the project would streamline access to CISS services from acute facilities and the wider Metro North community while maintaining provision of safe, effective, reliable and culturally-appropriate care which is both innovative and sustainable.

“CISS by Design will refocus our services to create a seamless connected care journey for patients and a more effective service that makes it easier for our staff to deliver the best possible care for our patients, wherever they are in our community,” he said.

Mr Seiboth said the project also reflects the priorities of the Metro North Health Service Strategy 2015-2020, which include expanding services to better meet the needs of a growing population and to empower patients to be at the centre of their care.





Sarah and Chevy Moffat with the feeding clinic team

Clinic helps little Chevy shine

A new children's clinic at Caboolture is proving to be a godsend for new mothers like Sarah Moffat whose baby experienced feeding difficulties.

OF 259 VISITS:

Nutrition/ Dietetics	Occupational Therapy	Social Work	Speech Pathology
78	31	31	119

Meeting the needs of babies and families

Almost one in five babies born at Caboolture Hospital each year has difficulty swallowing or feeding due to low birth weight or prematurity.

Caboolture Hospital Director of Speech Pathology and Audiology Brooke Cowie said if unmanaged, feeding and swallowing difficulty in children can lead to a range of medical, developmental and behavioural problems.

"The new Paediatric Feeding and Swallowing Service is here to support families through education, early intervention plans, treatment and support," Mrs Cowie said.

In its first seven months, the Paediatric Feeding and Swallowing Service supported 60 families with new babies. The clinic also supports families to transition to longer term community based care if needed when their baby leaves the clinic.

Sarah, a first-time mum from the Glasshouse Mountains, gave birth to son Chevy 10 weeks early. She has welcomed the guidance and support she received from the Paediatric Feeding and Swallowing Service to help her son feed properly and consistently gain weight.

"The service was important to me as I learnt a lot. It made a big difference and without it I would have been lost," Sarah said.

"Chevy has become a really good feeder now, he has maintained his weight and I am no longer worried that he will go backwards."

Caboolture and Kilcoy Hospitals Executive Director Dr Lance Le Ray said it was important for the hospital to continue to introduce services that would make a significant difference, especially to our young patients and their families.

"As demand grows, so has the need to enhance our children's inpatient services to better identify and support newborns and kids who are experiencing feeding and swallowing difficulty (dysphagia)," Dr Le Ray said.

"These conditions if undetected and untreated can have a significant impact on the health and wellbeing as children grow and develop."

As part of the new service, a team of allied health professionals has been assembled to identify and assess newborns, infants and young children at risk of dysphagia and clinical malnutrition at the hospital.

Dr Le Ray said it was very important to offer paediatric services closer to home to all of our patients.

The Paediatric Feeding and Swallowing Service will benefit around 200 local patients of the hospital each year.

Indigenous identification improves care

Letting healthcare staff know if you are an Aboriginal or Torres Strait Islander person can help improve your health outcomes.

A new Effort Tracker tool is being used by Indigenous health services across Metro North to ensure people who identify as Aboriginal or Torres Strait Islander origin receive culturally appropriate and relevant care.

Director of the Aboriginal and Torres Strait Islander Health Unit Paul Drahm said data is captured for all Indigenous presentations and admissions within the unit's services.

"Correct identification of Indigenous Status is fundamental to understanding and measuring their personal health needs, service monitoring, evaluation and planning in a culturally appropriate manner," Mr Drahm said.

The Effort Tracker is one of the ways Metro North is working to close the health gap between Indigenous and non-Indigenous Australians.

Metro North has also introduced a procedure for all staff to identify Aboriginal and/or Torres Strait Islander patients accessing their hospital and facilities in an effort to close the gap on health outcomes.

By recording accurate on the spot accurate, relevant and timely data about the healthcare journey of Aboriginal and Torres Strait Islander patients, we can ensure people are being checked for chronic diseases which reduce quality of life.

Why identify?

Mother of eight Melanie Kielly, a proud Baradah Gabalburra woman, supports the identification campaign.

When her son Mohma was admitted to hospital with pneumonia, his doctors asked whether the family identifies as Indigenous and where their communities are.



"By asking this question he was able to identify the communities in Cairns and the Cape and where exactly my son got the pneumonia from. I now understand the importance of identifying to gain the full health history and for closing the gap purposes," Melanie said.

"From a health planning perspective it's important to identify the needs of our people and also to see the main reasons for admission in hospital.

"I've had a number of my children admitted into hospital and the question at intake has been do you identify as Aboriginal and or Torres Strait Islander origin."

Melanie encourages the whole family to identify as Aboriginal and or Torres Strait Islander when accessing Metro North health services to ensure the care and services they receive are both clinically and culturally responsive.

Pictured left: Melanie and Mohma Kelly – by identifying as Aboriginal and/or Torres Strait Islander, Mohma's doctor was able to identify the cause of his pneumonia and provide the appropriate care plan.

Preserving precious resources

Antibiotic use

The medical community has long known the risk antibiotic overuse posed to healthcare, both locally and globally.

The issue has come to the foreground the past few decades, as much-publicised ‘superbugs’ have emerged, immune to the once incomparable treatment that are modern antibiotics.

A new Centre for Redefining Antimicrobial Use to Reduce Resistance (CRE REDUCE) at Royal Brisbane and Women’s Hospital (RBWH) uses research to combat antibiotic resistance, and is a major step forward in discovering new ways to prevent, detect and contain antimicrobial resistance.

The Centre is run by RBWH pharmacist Professor Jason Roberts and Director of Intensive Care Services Professor Jeffrey Lipman.

The centre is designed to provide support for teams of researchers to pursue collaborative research—and Prof Lipman’s most recent study is doing just that.

The BLING III study compares continuous dosing and bolus dosing of beta lactam antibiotics in over 7000 patients worldwide, and holds the potential to significantly improve patient outcomes by altering traditional practice.

“Antibiotic resistance is the biggest challenge facing modern medicine today,” Prof Lipman said.

“While Australia’s practices may be improving to reduce this risk, international travel bringing resistant organisms to Australia really means that this is a challenge we fight right across the world.”

Currently, around 39 per cent of inpatients are on an antibiotic at any given time at RBWH.

In an attempt to reduce this number locally, decrease the duration of prescriptions and find the most appropriate antibiotic to reduce the likelihood of resistance down the track, a number of initiatives have taken off across RBWH.

This includes antibiotic prophylaxis in orthopaedic surgery and extension of the antimicrobial stewardship system to the neonatal intensive care unit.

By creating guidelines to standardise antibiotic use, and the length of time patients should be prescribed preventative antibiotics, a reduction in antibiotic resistance is built by creating consistency and best practice.

Blood products

Blood products are a vital and precious resource. Metro North is committed to using blood efficiently and reducing the amount of blood products discarded.

BLOOD PRODUCTS USED

In 2016-17, across our hospitals we used:

 **29,717** units of fresh blood products

 **31,353** units of blood plasma

 **4759** patients received blood product transfusions

DISCARDED BLOOD PRODUCTS

RED CELLS

Metro North	1.1%
Queensland	2.3%
National	2.3%



PLATELETS

Metro North	6.1%
Queensland	12.0%
National	12.3%

METRO NORTH RECEIVED



3568 units

of red blood cells from other Queensland facilities to be recycled or to reduce discards through expiry.



More options now available for Caboolture mums-to-be

Caboolture mums-to-be now have access to more local maternity options thanks to a partnership between Caboolture Hospital and two private midwifery-led group practices.

Caboolture Hospital Director of Nursing and Midwifery Anne Clayton said for the first time women now have the option to be admitted to Caboolture Hospital as a private patient to be cared for by their chosen private midwife.

“Midwives from Coast Life Midwifery and My Midwives Brisbane North are now using our facilities and accessing our birthing suites, maternity rooms and equipment,” Ms Clayton said.

“These private practice midwives are supporting local mums and their families through their pregnancy, birth and postnatal care at the hospital.”

The Eligible Private Practice Midwives groups (EPPMs) add to the four existing public midwifery group practices available to women at the hospital.

At Caboolture Hospital, more than 40 per cent of mothers who give birth prefer the continuity of care model where they are cared for by a midwife or group of midwives throughout their pregnancy. Each year Caboolture Hospital delivers about 2000 babies.

15 Steps provides preview of care

A person can tell what kind of healthcare they will receive within 15 steps of walking in to a ward, making positive first impressions crucial for success of any health service.

The 15 Steps Challenge - an initiative of England’s National Health Service - is a tool designed to help staff, patients and others to work together to identify improvements that will enhance the patient experience. It revolves around seeing the care given from a patient’s perspective.

The Challenge is delivered by a 15 Steps Challenge team consisting of patients, carers, staff or Board members conducting a walk-around at random in a service and reporting their initial impressions of the care they believe they could expect from that ward or unit.

Members of the Challenge team also engage in additional conversations with patients regarding what is working well and where there is room for improvement.

The Challenge team feeds results back to teams and senior leaders in the organisation. Feedback focuses on building continuous improvement with the patient’s voice at the heart of the process.

Challenges have been conducted almost weekly in inpatient and residential settings at Brighton Health Campus sites since the initiative’s implementation late last year with the objective of improving patient experience, satisfaction and engagement and bolstering safety and quality improvement strategy.

Community, Indigenous and Subacute Services (CISS) is also in the process of transferring the 15 Steps Challenge to home visiting services, with the development and implementation of the processes to be coordinated by the CISS Consumer Engagement Community of Practice.

Helping you stay informed

Metro North is committed to providing information that enables people to understand the health services they need in order to make appropriate decisions and manage conditions.

In 2016-17 we have been redeveloping our hospital and community services websites to be more accessible and user-friendly for patients. This project includes significant consultation with staff, visitors and consumers to ensure information is easy to find and understand.

Frequent languages interpreted across facilities – 1 Jul 16 – 30 Jun 17			
RBWH	Mandarin (1257)	Arabic (1063)	Total (10343)
TPCH	Farsi (321)	Italian (300)	Total (2948)
Redcliffe	Auslan (169)	Mandarin (62)	Total (657)
Caboolture	Mandarin (77)	Vietnamese (63)	Total (471)
Kilcoy	Auslan (3)	Mandarin (2)	Total (6)
CISS	Arabic (313)	Karen (104)	Total (984)



Top three surveys by response

'A Better Choice – food and drink options at RBWH' staff and consumer survey

546
RESPONSES

RBWH Outpatient administrative practices consumer survey

491
RESPONSES

Alcohol and other drugs client satisfaction survey

363
RESPONSES



Consultation Hub

During 2016-17, we conducted a number of staff and consumer surveys on a range of topics and received 7235 responses. There were:

105 STAFF SURVEYS WITH
3278 RESPONSES

39 CONSUMER SURVEYS WITH
3201 RESPONSES

9 STAFF AND CONSUMER SURVEYS WITH
756 RESPONSES

