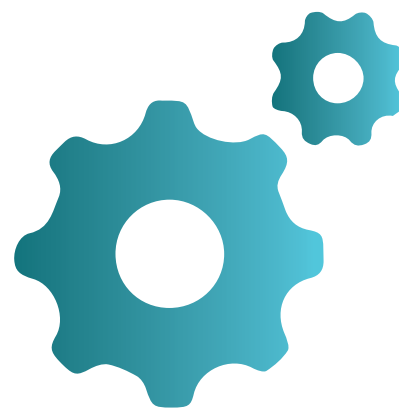




Clinical care provided is based on the best available knowledge and evidence to reduce preventable harm, and apply research that will improve safety and quality.



**Highly reliable
care**



160,000 cancer services delivered

With more than 160,000 cancer treatments, consultations, procedures and other services carried out in a single year, it's no wonder Cancer Care Services at the Royal Brisbane and Women's Hospital (RBWH) is constantly striving to improve the patient experience.

A number of initiatives have been implemented in the department over the past 12 months, and more are on the way.

North Lakes Cancer Care Services have been expanded to four days a week, including Medical Oncology and Radiation Oncology from March 2017.

Technology has been embraced, with telehealth consultations with North Lakes Health Precinct and Kilcoy Hospital now under way, and telehealth chemotherapy treatments within the same facilities commencing in August 2017.

Cancer Care Services has worked closely with the RBWH Department of Emergency Medicine (DEM) on the combined DEM Avoidance Project, aimed at reducing avoidable presentations and hospital admissions by instead utilising the Cancer Care Outpatients department where appropriate.





CISS researchers Paul Bew and Melanie Carter with the InMotion robotic device used in post-stroke upper limb rehabilitation.

Robot 30 times more effective for stroke rehab

Every 10 minutes someone in Australia suffers a stroke, and 80 per cent of those who do will experience some degree of arm weakness afterwards.

Of these people, 50 per cent regain no useful function in that arm and many stroke survivors have very little or no movement return, typically leaving them reliant on assistance from therapists, families and carers.

But physiotherapists and occupational therapists in Community, Indigenous and Subacute Services (CISS) are forging a brighter future for these patients through a series of research projects exploring solutions with the help of new exercise devices.

The InMotion robotics project at Brighton Health Campus, in collaboration with Australian Catholic University, involves implementation and evaluation of an upper limb robotic device in the management of upper limb weakness following stroke. The device has never before been used in a clinical setting in Australia.

While optimal upper limb recovery requires intensive, repetitive practice of around 300 movement repetitions per session, research shows patients are independently completing around 30 repetitions per session. However patients independently exercising using the InMotion device are now achieving 845 repetitions per session (an average of 33 minutes exercise time).

Around three to four patients are now using the device every day for up to 60 minutes each, unlocking potentially faster recovery.

Other stroke rehabilitation patients are similarly benefiting from using a customised, dynamic splint to assist weak muscles and allow completion of more repetitions independently, with case studies showing patients achieving around 200 repetitions per session with the splint compared to around 30 repetitions without.

Current and planned research projects aim to identify the combination of clinical rehabilitation protocols and modes of delivery that will optimise upper limb recovery for stroke survivors across CISS.

Lowering oral health barriers for the homeless

Oral Health staff have taken a unique approach to reducing barriers to dental care for socially disadvantaged people, partnering with The Big Issue to reach those in need.

Metro North Oral Health Services (MNOHS) Nurse Manager Safety and Quality Jan Anderson said what began as a visit to a weekly soccer game in New Farm Park led to dental appointments over the past year for 106 people experiencing homelessness, economic hardship, drug and alcohol addiction or mental health issues.

“We initially approached the group intending to provide them with information but we soon learned that’s not what they wanted; they wanted help!” Jan said.

The MNOHS team came prepared with brushes, toothpaste and information but refocused when learning most of the group required assistance making appointments for dental care.

“Some of this group have no address; others may have no credit on their phones or no phone to make the appointment. Once we gained the group’s trust, we found the best way to assist was to sit down and arrange to make appointments for them,” Jan said.

“Occasionally we make appointments on the spot for those who have no other means of contact. More recently we have been working with non-government organisations and healthcare workers who have assisted us to get appointments for individuals.”

Jan said this ensured the patients had a time and place for their treatment arranged without them having to negotiate the appointment process or find a phone or phone credit to do it themselves.

From this initial partnership with a vital partner, MNOHS is now building its network and expanding its outreach to engage with groups such as Queensland Injectors Health Network, Salvation Army and Wesley Mission. MNOHS also attended Homeless Connect Day and is reaching out to people in caravan parks.

The majority of the appointments required some form of dental intervention including restoration, extraction and/or construction or repair of dentures.



Oral health technician Zoe Johnston with Ronnie Beadman who was provided with dentures through the outreach program.

New teeth give Ronnie a new perspective

Ronnie Beadman has every reason to smile thanks to the Metro North Oral Health Services team (MNOHS) outreach program.

After meeting the MNOHS team through The Big Issue soccer games at New Farm Park, Ronnie was provided with a new set of teeth – and the result has been life-changing.

He travelled to Scotland as part of the Australian team for the Homeless World Cup in July. Since then, Ronnie has continued kicking goals with a new-found confidence helping him turn his life around.

Ronnie said his improved appearance had allowed him to socialise without embarrassment and inspired him to give back. He supports his peers at the Salvation Army’s Moonyah centre and continues to promote good oral health.

Ronnie has reconnected with his family and is also working towards completion of a Certificate III in security services.

Interim care cuts 3700 days from hospital stays

More than 380 people have moved from a hospital bed to an aged care facility faster thanks to Metro North's new interim care service.

Community, Indigenous and Subacute Services (CISS) launched the interim care in 2016 as a temporary suitable care alternative to hospital, specifically for older patients, to help relieve the increased pressure faced by acute settings over flu season.

However, due to the service's success in reducing length of stay for older patients it is now operating as a 28-bed capacity service caring for those who no longer require care in a hospital but are unable to return to their own home and need support to move to an aged care home.

Project lead Kate Schultz, who helped develop the model of care, said the service is now discharging or transferring around 40 patients each month, with patients spending about 25 days on average in interim care.

More than 70 per cent of people admitted to interim care have been discharged to a residential care service and more than 13 per cent have transferred from the service to other hospitals.



Around five per cent of patients have moved on to other healthcare accommodation and around another five per cent of patients have shifted from the service back to home or their usual residence.

"Not only has this service contributed to reducing pressure on the acute sector, it has also offered a pleasant, safe and suitable environment that provides the necessary support and resources to properly care for patients in that interim period until alternative accommodation can be found," said Ms Schultz.

In total, the service has resulted in patients spending about 3700 fewer days in hospital than they likely would have while awaiting a nursing home placement.



Healthy smiles for Kilcoy locals

In its first year, more than 340 patients have now accessed the new adult oral health clinic at Kilcoy Hospital.

Kilcoy Hospital Nursing Director Lyndie Best said locals in Kilcoy, Woodford and the Somerset region no longer need to travel to Caboolture or further afield to access free, high-quality dental care.

"We know that the elderly are at higher risk of gum disease and are more likely to have untreated tooth decay," Ms Best said.

"This new service will not only make a great difference to residents' smiles, but it will deliver better health outcomes for the community."

The clinic offers a range of preventative dental care including fillings, as well as denture work and emergency procedures to eligible adults with pensioner and senior's cards.

It builds on the network of oral health facilities and community outreach services across the Metro North Hospital and Health Service, which provides more than 50,000 free dental appointments each year.



Metro North HHS, Brisbane North PHN and Queensland Ambulance Service staff with the refreshed Yellow Envelope at Redcliffe Hospital.

Yellow envelope improves continuity of care

Aged care facility residents can be assured of receiving the right follow up care with a simple clinical handover tool.

The Yellow Envelope is exactly what the name suggests—an envelope used by healthcare staff to ensure relevant medical information stays with the patient as they move between hospital, their general practitioner, ambulance and their residential aged care facility.

The tool has been refreshed through a partnership between Metro North Hospital and Health Service, Brisbane North PHN and Queensland Ambulance Service as part of Metro North’s Innovation Alliances in 2016.

Metro North Director of Clinical Operations Strategy Implementation unit Elizabeth Davis said the Yellow Envelope was a simple tool that could make a big difference.

Working together allows us to provide holistic, integrated and responsive care

“The Innovation Alliances were set up to manage winter bed pressures. One of these alliances was the Primary Care to Emergency Alliance which identified handover of residents’ care from residential aged care facilities as a concern and gave us the opportunity to refresh the Yellow Envelope and reintroduce it to our clinicians,” Ms Davis said.

The Yellow Envelope provides information about the patient’s medical history to allow clinicians to continue the right care. The Yellow Envelope has been successfully re-implemented at Redcliffe Hospital and will be refreshed across Metro North.

“Working together on projects such as the Yellow Envelope allows us to provide holistic, integrated and responsive care to achieve the best outcomes possible for our frail older patients,” Ms Davis said.

This clinical handover tool also aligns with Metro North’s Year of the Frail Older Person campaign, helping to respond to the challenges of caring for an ageing population by improving communication between all providers of care.

Physiotherapy service helping women access care sooner

Redcliffe mums are avoiding surgery for pregnancy related continence issues with the introduction of a gynaecology physiotherapy screening clinic at Redcliffe Hospital.

The clinic, which runs in conjunction with Redcliffe Hospital's Department of Gynaecology, supports women experiencing a range of pelvic health and continence issues, reducing the need for invasive surgery.

Redcliffe Hospital's Acting Director Physiotherapy, Cate Carter said the new clinic will significantly speed up treatment for a range of gynaecology conditions for women who don't require surgery.

"Traditional models of care meant that women who were assessed as having a non-urgent condition would have to wait significant periods of time to attend an outpatient appointment with a gynaecologist, and then be referred to a physiotherapist as needed, resulting in extra waiting," Ms Carter said.

"For some patients, this prolonged waiting period provides the potential for their condition to deteriorate, and increase the risk of further complications which many in fact require surgical intervention in the future."

Previously patients waited up to for 18 months for treatment, but under the new model of care eligible women can be seen within a month of referral to the clinic.

"If suitable for conservative management (non-surgical) patients will then see a treating physiotherapist and or a continence nurse advisor for a course of treatment," Ms Carter said.

"We are able to discharge some patients, while other patients who need to will remain on the wait list to see a gynaecologist. Evidence shows that there is a higher chance of success with surgery if patients have first completed conservative therapy.

"Many people are surprised to learn that muscles in their pelvic floor can become weak and contribute to symptoms. The physiotherapists utilise a range of treatments to help maximise pelvic floor function, which can help to improve the quality of life of our patients."

The clinic receives positive feedback from women who feel like they now have the tools to return to living a normal life.

Since its introduction in September 2016, the Category 3 Gynaecology wait list has reduced by 36 per cent, enabling earlier access for patients appropriate for surgical review. Almost a quarter of patients require no further gynaecologist follow up after treatment through the physiotherapy clinic.



LINK for Innovation

Improving quality of care through integrated partnership projects drives the Metro North's LINK funding program which provides staff opportunities to test ideas and build sustainable community partnerships to better care for our patients.

A successfully implemented LINK funded project, the Multiple Sclerosis (MS) Connect project is a partnership between MS Queensland and Royal Brisbane and Women's Hospital (RBWH) MS Clinic.

The MS Connect project has introduced an MS care coordinator at the RBWH Clinic who provides recently diagnosed patients or patients with a worsening condition with an opportunity to discuss a range of issues and concerns, and to work out a plan of care.

Through a coordinated approach, the MS care coordinator liaises with employers, family members, and other services to support the patient in returning to home and work, and ensure they are supported in adapting and managing their health.

This project, like many other LINK funded projects, has improved the quality of life for patients by ensuring people receive the help they require in a seamless, efficient way.

Since 2015, LINK has funded 21 projects with \$2 million dollars. LINK has received 67 applications for partnership funding since commencement.