

Metro North Hospital and Health Service

QUALITY OF CARE 2017-2018 Putting people first



#### VISION

Changing the face of healthcare through compassion, commitment, innovation and connection.

#### PURPOSE

Create, connect and apply knowledge to deliver high quality health services.

#### VALUES

RESPECT • TEAMWORK • COMPASSION • HIGH PERFORMANCE • INTEGRITY

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### **Community foreword**

#### English

The purpose of the Metro North Quality of Care report is to inform consumers, carers and our community about our quality and safety performance and what we are doing to improve our services.

#### Chinese

Metro North医院服务质量报告 旨在让消费者、护理人和我们的 社区了解医院在质量和安全方面的表现 以及为改善服务正在采取的行动。

#### Burmese

Metro North တောင့်ရှောက်ရေး အရည်အသွေး ဆစ်ရင်နံစာ၏ ရည်ရွယ်ရက်မှာ သုံးစွဲသူများ၊ တောင့်ရောက်သူများနှင့် ကျွန်ုပ်တို့၏ လူမှုအသိုင်းအစိုင်းအား ကျွန်ုပ်တို့၏ အရည်အသွေးနှင့် ဘေးကင်းလုံဖြံ့ရေး ဆောင်ရွက်မှုနှင့်တကွ ကျွန်ုပ်တို့ ဘာကိုဆောင်ရွက်နေသည် ထိုးတက်အောင် ကျွန်ုပ်တို့ ဘာကိုဆောင်ရွက်နေသည် ဆိုသည့်အကြောင်းကို အသိပေးရန်ဖြစ်ပါသည်။

#### Arabic

إن غرض تقرير "جودة الرعاية بشمال العاصمة" هو إعلام المستهلكين ومقدمي الرعاية ومجتمعنا ككل بأداننا المتميز بالجودة والسلامة، وما نقوم به لتحسين الخدمات التي نقدمها.

#### Korean

Metro North Quality Care에서 발간한 보고서는 저희가 갖추고 있는 안전하고 질적인 서비스 수행 능력과 서비스를 향상시키기 위하여 저희가 어떤 일을 하고 있는지에 대해 소비자와 케어러 그리고 우리 지역사회에 알리고자 하는 데 그 목적이 있습니다.

#### Vietnamese

Mục đích của báo cáo Chất lượng Chăm sóc (Quality of Care) Metro North là để thông báo cho người sử dụng, người chăm sóc và cộng đồng chúng ta biết về chất lượng và hiệu năng an toàn của chúng tối và những gi chúng tối đang, thực hiện để cải thiện dịch vụ của chúng tối.

#### Italian

Lo scopo del rapporto di Metro North Quality of Care è di informare gli utenti, i badanti e tutta la comunità sulle nostre prestazioni di qualità e di sicurezza e su ciò che facciamo per migliorare i nostri servizi.

#### Persian

هدف از گزارش کیفیت مراقبت مترونورث مطلع کردن مصرف کنندگان، مراقبت کنندگان و جامعه محلی از عملکرد کیفی و ایمنی ما و اقدامات ما برای بهبود خدمات می باشد.

#### Spanish

El propósito del informe de Calidad de Atención de Metro North es informar a los consumidores, los cuidadores y nuestra comunidad acerca de nuestro rendimiento de calidad y seguridad y lo que estamos haciendo para mejorar nuestros servicios.

#### HEALTH SERVICE STRATEGY 🗸

Throughout the report this icon indicates programs that are delivering on our Health Service Strategy

### Welcome

On behalf of Metro North Hospital and Health Service, we are proud to present the Quality of Care report for 2017-18.

Metro North has a responsibility to provide compassionate, high quality and reliable care that responds to the needs of our growing community. By providing care that focuses on safety and quality, overcomes healthcare challenges and seizes opportunities, we can improve the lives of patients.

The Quality of Care report is our chance to show patients, partners, consumers and carers, a snapshot of our services and achievements. It features stories and initiatives that demonstrate how safe high-quality care improves lives. It also highlights our culture of cutting-edge innovation that is driving continual improvement to the way we deliver person-centred care.

The way we use our values in everyday situations also affects the quality of our care. With over one million local and state-wide patients in our catchment, our staff are committed to working with compassion, respect and integrity to deliver a positive healthcare experience and the best possible outcomes for every patient.

Quality and safety will always remain our priority. We are proud of how far we have come in the past year and are excited to see what the next year brings. We'd like to thank our many volunteers and partners in the community who enable us to deliver care that puts patients at the centre of everything we do.

We hope this report is informative and captures the many facets of our health service. We look forward to hearing your thoughts and feedback on what you would like to see included in the future. Please contact us via metronorthengage@health.qld.gov.au.

**Dr Robert Stable AM** Chair, Metro North Hospital and Health Board

Shaun Drummond Chief Executive Metro North Hospital and Health Service

#### Tell us what you think

Our 2017–2018 Quality of Care Report is our commitment to you patients, consumers, carers, families and community members - to keep you up-to-date with how we are doing at Metro North. We have specifically covered the quality and safety of our services, and what we are doing to continuously improve the standard of care we provide. We have also highlighted some innovations that will make a difference to your care. We would love to hear what you think of the report and of your experiences at Metro North.

Maroochydore

Caloundra

## Your local health service

Metro North Hospital and Health Service is Australia's largest and most diverse public hospital and health service.

Kilcoy

Hospital

We provide care to a catchment of more than one million people in the northern Brisbane region. Our 18,500 staff work across five hospitals, 14 community and residential care centres, 15 mental health centres and 27 oral health facilities.

Our diverse health services include surgery, cancer care, maternity, trauma, medicine, mental health and more than 30 subspecialities and superspecialities such as heart and lung transplantation and burns. We care for people at all stages of life.

The Quality of Care report is part of our commitment to continually improve our services and to provide high quality healthcare through compassion, commitment, innovation and connection.

Disclaimer: This publication is intended only as a general guide to services provided by Metro North Hospital and Health Service. It does not substitute health advice from an individual's medical specialist, general practitioner or other health professional.

#### Woodford Caboolture Hospital Bongaree Deception Bay Deception Bay Redcliffe Hospital Deception Bay Deception

Glass House

Mountains

#### Contact us

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### About Metro North Hospital and Health Service

Metro North Hospital and Health Service is the public hospital and health service for the north side of Brisbane.



#### Our services include:

#### Royal Brisbane and Women's Hospital (RBWH)

The largest tertiary referral hospital in Queensland with a number of specialities including medicine, surgery, orthopaedics, psychiatry, oncology, trauma, and women's and newborn services. RBWH fulfils a significant teaching and research role with links to Queensland's major tertiary institutions.

#### The Prince Charles Hospital (TPCH)

The major tertiary level cardiothoracic referral hospital for Queensland, the largest such service in Australia, and one of the largest services of its type in the world. The hospital also provides emergency, general medical and surgical services, orthopaedics, and rehabilitation services, as well as outreach specialist services throughout Queensland.

#### **Redcliffe Hospital**

Key facility servicing a fast-growing population. Services include emergency, medical, surgical, orthopaedics, maternity, paediatrics, rehabilitation, and specialised outpatient clinics.

#### Caboolture and Kilcoy Hospitals and Woodford Corrections Health Service

Key facilities servicing fast-growing populations. Services include emergency, medical, surgical, orthopaedics, maternity, paediatrics, rehabilitation, and specialised outpatient clinics. Kilcoy is a rural hospital providing emergency, general medicine, and postnatal care.

#### **Mental Health**

Provides services across the age spectrum from perinatal, child and adolescent, adult to older persons and including a range of specialist services such as consultation liaison, forensic, addiction, eating disorders, and community mental health including an inner city homelessness team.

#### **Community and Oral Health**

Offers a broad range of quality community-based healthcare and support services to help people improve and maintain their wellbeing and independence, as well as specialised aged and residential care, Indigenous health, and services delivered from many sites including the Brighton Health Campus, and mobile service teams. One of the largest providers of public oral health services in Australia.

#### **Clinical Support Services**

Providing state of the art medical imaging services for our hospitals as well as protective services, food services, porterage, cleaning, and administration and compliance services.

As well as service delivery, Metro North is also committed to education and training. In particular, our focus on excellence ensures a thriving culture of research that delivers continuous service improvement and evidence-based care.

### Vital expansion provides big benefits for NeoRESQ Service

Every day our specialist neonatal retrieval service, NeoRESQ, reaches out across rural Queensland to save the lives of our tiniest patients.



A \$3 million expansion will provide NeoRESQ with two additional clinical rooms and a world class simulation centre that will function as a vital telehealth centre to assist patients in regional hospitals, where nearly 20 per cent of admissions come from.

Supporting maternity departments in regional hospitals to determine the best method of care for premature babies, and aid in antenatal counselling ultimately means we can keep tiny babies, and their parents, closer to home.

Royal Brisbane and Women's Hospital (RBWH) Director of Neonatology Dr Pieter Koorts said he looked forward to the increasing support across regional and rural hospitals.

"In the past 12 months, more than 470 babies have been retrieved by NeoRESQ from around the state," Dr Koorts said.

"Our team is very privileged to have been able to help so many parents and their babies with this service and we are thrilled to be able to help so many more.

"At the end of the day, all we care about is saving little lives, and this is going to help us do just that."

NeoRESQ is a collaboration between RBWH and the Mater Mother's Hospital.



Jacquie and Melissa are part of the NeoRESQ team, transporting premature or critically ill babies across Queensland to life-saving treatment.

# Pharmacists improving patient care

Changes to medication management at Redcliffe Hospital are improving patient safety, experience and satisfaction.

Earlier this year the hospital introduced its Medication Management Service (MMS), which provides patients with one-on-one consultations with a pharmacist before they leave the hospital's care.

Redcliffe Hospital's Director of Pharmacy Geoff Grima said during these consultations pharmacists reviewed the patient's medications and talked openly with patients in a private and supportive environment.

"We use this consultation to resolve any concerns, confusion, or problems that a patient may have with taking their medications when they go home," Mr Grima said.

"We reinforce the need for medications to be taken as directed, and we can also refer the patient to additional outpatient services where needed."

The MMS was initiated after research at Redcliffe Hospital showed some patients were presenting to the emergency

department after discharge because of problems with their medications. The MMS now complements the advice pharmacists provide patients in the ward environment.

Mr Grima said the MMS had seen more than 1,300 patients, and consumer satisfaction surveys showed patients were finding the service helpful and were feeling more confident about their medications.

Another program, the Opioid Stewardship Service, began at Redcliffe Hospital last year aimed at improving the way prescription opioids were being prescribed to inpatients, and to patients after they had been discharged.



- 8,130 Redcliffe Hospital patients had a medication review during an outpatient clinic
- 83% of inpatients had their medication history documented
- 75% of patients who stayed overnight received a medication list on discharge



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"Since we began the service the hospital had seen a reduction in the quantity of opioids being prescribed through the hospital," Mr Grima said.

"The benefits have extended beyond the hospital as well, with the service providing education and awareness to the broader health community."

The success of the Opioid Stewardship Service has recently been recognised nationally with a Health Roundtable Innovation Award and a Metro North Collaborative for Allied Health Research, Learning and Innovation (CAHRLI) *Translation to Practice* award.

**Pictured above:** Redcliffe Hospital Pharmacy Director Geoff Grima with Opioid Stewardship Service Pharmacist Benita Suckling.

#### HEALTH SERVICE STRATEGY

### Review leads to improved personcentred care for residents

Making the residential care we provide more home-like and personcentred is one of the ongoing successes of the recent Residential Long Stay Review conducted by Metro North Hospital and Health Service.



A dining experience was part of several personcentred care initiatives delivered across our residential facilities as part of a broader review of services. Residents Margery (left) and Helen (far right) joined staff in a special Chinese New Year celebration at Gannet House.

Acting Executive Director Community and Oral Health Directorate (COH) Tami Photinos said as healthcare providers, it is vital we strive to always provide the best possible care.

"Last year, a team of experts came together to review long stay residential care services across Metro North, following an unfavourable review from the Aged Care Accreditation Agency and some concerns raised by families," Ms Photinos said.

"The aim was to listen to residents, families and carers, and ensure that we were meeting their needs but also exceeding the required standards to ensure a high quality residential environment for our residents, their families and our staff members."

The Residential Long Stay Review focused on some key areas including person-centred care, resident lifestyle, environment and experience, performance improvement, clinical practice and information sharing, communication and engagement.

"We undertook improvement initiatives at our facilities with the aim of making our facilities more home-like, culturally appropriate, comfortable and safe for our residents," Ms Photinos said.

"The improvement initiatives implemented have also addressed safety concerns with security incidents falling from an average of 52 per month to an average of two per month.

"It also led to Cooinda House successfully achieving full accreditation from the Aged Care Accreditation Agency."

An Aged Care Ambassador trial was also completed at Cooinda House, where an Ambassador proactively engaged with care recipients to de-escalate aggressive behaviour, divert and interact when matters or situations emerged.

"The Ambassador role, which has now become permanent due to its success, reduced the number of incidents six-fold," Ms Photinos said.

"Staff, care recipients and families report feelings of increased safety, reduced anxiety and enhanced environment with the ambassador in the facility."

At the Halwyn Centre, initiatives continue to enhance the care and environment in which our residents live and this has led to the centre being successfully accredited by SAI Global according to the Human Services Standards.

In recent months, additional recreational and social events have been scheduled into the annual calendar for residents including the COH Commonwealth Games, and unique dining experiences at Jacana, Cooinda House and Gannet House.

The 'Year of the Dog' Chinese New Year celebrations which were held at Gannet House were part of a collaborative event coordinated by the recreational officers, food services and nursing staff and volunteers.

COH Food Services Site Coordinator Francis McDonnell said the concept of providing a special themed meal stemmed from requests by residents to provide more variety in terms of the food and the dining experience.

"It is rare for our residents to 'dine out' so Food Services' aim was to create a restaurant experience 'dining in'," Francis said.

Ms Photinos said additional initiatives were planned to respond to and support person-centred care.

### New menu system makes meal times safer

#### HEALTH SERVICE STRATEGY

A new menu system at The Prince Charles Hospital is making patient meal selections faster and safer.

The CBORD menu system is an online system that allows food services staff to take patient meal selections at the bedside using laptops or tablets.

Food Services Team Leader Bianca Neaves said the new system allowed staff to quickly and easily select a patient's meal choices at the bedside, which significantly reduced the risk for human error compared with paper-based menu systems.

"Staff can log patient food choices in real time, which means there is no delay in conveying patient meal requests to the kitchen," Bianca said.

"With the former system, staff could spend hours taking patient meal orders via paper-based menus and then typing those selections into the computer."

CBORD also provides staff with real-time access to a patient's current diet codes and allergy information that helps determine suitable meal choices.

"The availability of real time information means that our menu monitor staff have access to a patient's latest nutritional status and are alerted to any changes that may occur," Bianca said.

"This information is critical as a patient's dietary requirements and allowances can change suddenly depending on their clinical treatment.

"It means that our staff can be assured of offering patients meal options that are appropriate and safe."

A key feature of the upgraded system is the ability for patients to be offered the full range of meal items previously not available via the paper-based menu system.

"Making the full range of menu options available to patients means they are more likely to find an item that is preferred and eat more of their meals," Bianca said.

"This is important for a patient's nutritional health, which can directly impact on their recovery and length of hospital stay." Since the CBORD upgrade was introduced, there has been a notable reduction in the amount of meal wastage due to decreased default meals, indicating that more patients are selecting their meals. Patients who can choose their meals eat 18 per cent more than patients who receive a standard meal tray.

The time savings resulting from the new menu version have been wisely used to further improve the quality and safety of services provided by the Food Services department.

Department staff conduct meal quality audits every eight days with a trial meal sent to a ward for multidisciplinary staff to assess.

"These types of activities help to ensure that we are maintaining a patient-centred service when it comes to food service delivery, and includes involvement of our clinical staff in menu item feedback," Bianca said.



#### MEALS SERVED ACROSS METRO NORTH IN 2017-18

Directorate	Meals	Moulded meals
RBWH	1,220,000	22,000
ТРСН	771,699	10,920
Redcliffe	336,800	10,950
CISS	399,930	13,468
Caboolture	315,750	2,500

## Volunteers great contributors to community-based care

Volunteers are an important part of our healthcare family, especially to the residential care we provide at our long-stay facilities at Brighton Health Campus.

At Community and Oral Health(COH), the volunteer program has been designed to enhance patients' and residents' quality of life during their stay.

Gannet House resident John Aitkin, who has been a resident at Brighton Health Campus since 2005, said residents would be 'lost' without volunteers.

"The volunteers visit me almost every day; sit down with me and help me do the crossword," John said. "They read out the crossword clues -I provide the answer and they fill out the word in the crossword for me.

"I enjoy the singalong every second Monday as they play my era of music; I like the ballads but not the rock and roll."

Joyce Summers is another resident at Gannet House who looks forward to seeing the volunteers. She particularly enjoys the social outings they support and the regular bingo and knitting activities.

"The volunteers make you feel great and they make you feel like you are in your own home and not in an institution," Joyce said.



COH Community Connections Officer Leanne Delaney works closely with our health professionals to deliver activity programs by matching appropriately skilled volunteers to support these activities.

"Our volunteers work alongside our healthcare staff to provide support, companionship and care for patients and residents, and their loved ones," she said.

"They help to create a more comfortable and enjoyable health care experience through social and recreational support to patients, residents and families.

"Our volunteers actively support our staff to deliver fun and interactive games and activities, special themed celebrations and meals, and great social gatherings with music, poetry and storytelling."

Ms Delaney said the volunteer numbers continue to grow rapidly with an extra ten new volunteers joining the COH Volunteer Program this year bringing the total number to 57.

"Importantly, our volunteers come from a variety of backgrounds and cultures, which is helping to enrich the lives of our residents and patients," she said.

Volunteer Ambassadors recently have been introduced across COH to act as a point of contact and support for volunteers across our Brisbane north community-based facilities.

COH Volunteer Ambassador and staff member Malani Barby said it was great to work with our volunteers who are lovely people and who importantly give up their time to help others.

"I really appreciate the work they do and am happy to support them as a Volunteer Ambassador, I know they make the residents and patients happy."

The COH volunteer program is supported by St John Ambulance Queensland who assist with volunteer uniforms, volunteer recruitment, training and matching roles that utilise the volunteers' skills.

Volunteers like Michael and Meg provide inspirational support and comfort to our residents at Metro North residential facilities. Gannet House resident Joyce Summers couldn't be happier with their visits.

### Fluoride Varnish Program tackles tooth decay

Socially disadvantaged children in Caboolture and Redcliffe are now receiving vital preventative dental treatment through Metro North Oral Health's Fluoride Varnish program.

"We know that by the time they reach school age young children living in the Caboolture and Redcliffe area have more than three times the odds of experiencing dental decay than children living in more advantaged areas," said Oral Health Therapist Consultant Alison Dickinson who initiated the program.

"Evidence shows that a community-based Fluoride Varnish Program is a cost effective preventative measure that can reduce decay rates in children by up to 37 per cent.

The Fluoride Varnish program commenced at Morayfield East State School in 2015 and now targets children enrolled in Prep to Year 6 in more than 16 schools who have limited access to preventative oral care and are at risk of poor dental behaviours.

"We needed to shift the focus from treatment to preventative measures. The evidence shows that applying fluoride varnish to young children's teeth is safe and it works," Alison said.

The Fluoride Varnish Program doesn't require children to attend a dental clinic. Instead, a multidisciplinary team of dental therapists, oral health therapists and dental assistants visit the children at their school.

"We see the kids where they learn and play to provide them with oral health education and apply the varnish to their teeth. They are seen in groups in their own environment where they are comfortable. They are with their friends and because minimal dental equipment is needed the littlies don't get frightened," Alison said.

"They also learn how to brush their teeth properly. As well as improving their brushing skills, they get a toothbrush and fluoride toothpaste to take home."

"The program provides a dental referral pathway to public sector oral health care facilities, and we welcome any other children in the family to attend with their sibling.

"We want to provide family-centred care where mum and dad can bring all their children for check-ups and receive any necessary treatment. Hopefully it makes it a bit easier, saving them time and reducing the number of appointments they need to attend.

"This program also helps us to reach out to a bigger audience. It has introduced us to a lot of children that we hadn't seen before and we have found some cases where children had urgent need for referral."

While continuing to provide dental care to children across the Metro North region, the team is now reviewing the effectiveness of the program in targeting different stages of dental development in kids.

ATEG)

### Telehealth improving access to services for Queenslanders

Queensland's vast distances are no longer an issue for patients accessing telehealth services, saving time and the costs of travel. A new telehealth swallow assessment model has been developed and evaluated by speech pathologists at Royal Brisbane and Women's Hospital (RBWH) in partnership with researchers from The University of Queensland, ensuring it is as safe and effective as standard face-to-face care.

Speech pathologist Dr Clare Burns said once validated, the team planned to implement it into routine clinical practice. Speech pathology services in Metro North, Sunshine Coast, Wide Bay, South West and Cairns and Hinterland HHS are interested in establishing the new model of care.

The telehealth service provides regional, rural, and remote patients with the option of accessing swallowing assessments at their local health facility via video conferencing rather than waiting for the speech pathologist to attend their service or travelling for the appointment.

As part of the research study, Dr Burns and Professor Liz Ward from Queensland Health's Centre for Functioning and Health Research and The University of Queensland, supported facilities to establish the telehealth speech pathology service and examined the outcomes of the sessions provided.

"The clinicians value it because they can deliver services efficiently from their local facility without the need for additional travel or the inconvenience of needing to reschedule appointments," Dr Burns said.

"The patients were happy with the telehealth sessions and some provided suggestions of other areas of their speech pathology care that they'd like to explore via telehealth."

The research has earned Clare and her team the National Foundation of Swallowing Disorders Award at the Dysphagia Research Society Meeting in the United States earlier this year.

## Engaging patients in new specialist centre design

Clinical planning for Metro North's new specialist public health facility has been guided by the rehabilitation and surgical needs of patients and consumers.

The new 184-bed specialist facility is under construction on the Herston Health Precinct and will help meet the future healthcare needs and demand for specialist rehabilitation services in Queensland.

The centre will provide a patient-centric model of care designed to improve patient outcomes. Following consultation with consumers and healthcare staff, an additional 52 beds will be available and new, consolidated and expanded rehabilitation services will be delivered at the new facility. Once complete, the new centre will provide specialist care for patients requiring specialist rehabilitation, short-stay elective surgery, endoscopy and a range of outpatient services. It will boast special purpose rehabilitation areas, seven operating theatres and three endoscopy rooms, helping to reduce waiting lists and improve efficiency.

The specialist public health facility will be the first health building delivered as part of the \$1.1 billion Herston Quarter Redevelopment.

### **Blood Clock preserves precious resource**

In the event of a serious trauma, the Emergency and Trauma Centre (ED) at the Royal Brisbane and Women's Hospital (RBWH) can pump through a significant supply of blood bags provided by the Blood Bank.

O-negative blood is used because it can be transfused to any patient of any type, but with only 9 per cent of the population donating this resource, stocks are precious.

This blood has a short window of time for use before it must be returned to the blood bank, but in the demands of trauma the bags can sometimes be left too long.

A simple idea surrounding the use of a cheap timer, dubbed 'The Blood Clock', is reducing this wastage thanks to RBWH Nurse Practitioner Candidate Matilda Schmidt.

"When patients are brought to the ED in times of trauma, we noticed that a lot of O-negative blood was getting wasted in the flurry of a big trauma because it wasn't returned to the Blood Bank within the two-hour time limit," Matilda said.

"We put a cheap timer on the Esky that the blood comes in, and it alerts staff when the blood must be returned. This has reduced wastage in the emergency department dramatically." The timer is attached to all Medevac blood boxes and a two-hour time is dialled and set up. The timer is activated when blood leaves the Blood Bank. The alarm provides a warning and a clinical decision must be made by the trauma team to either



Matilda Schmidt won the Innovation award at the 2017 Staff Excellence Awards for 'The Blood Clock.'

transfuse the blood or send the box back to the Blood Bank within the necessary time window to ensure it is not wasted if not used.

"It's a very simple solution to a long-term problem involving waste of valuable blood products in a high complexity work environment," she said.

Matilda's initiative earned her an Innovation award at the 2017 Metro North Staff Excellence Awards and she is continuing to work on another project auditing another precious blood product, Anti-D.



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 2017–18, across our hospitals we used:

Ø 29,717 ≗ of fresh blood products

#### **DISCARDED BLOOD PRODUCTS**

RED CELLS Metro North 1.0% Queensland 2.1% National 2.2%



Metro North		
Queensland		
National		

PI ATFI FTS

6.2% 10.7% 11.8%

### METRO NORTH 5,238

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



### **Telehealth heart beats out west**

### Queenslanders in regional areas can see a heart specialist without travelling to Brisbane, thanks to a new telehealth service.

Royal Brisbane and Women's Hospital's (RBWH) Tele-Cardiac Investigation service is enabling patients to access highquality cardiology testing and connect with metropolitan clinicians through live audio and video links and health monitoring devices without travelling extreme distances.

RBWH Director of Cardiac Sciences Adjunct Professor Adam Scott championed the program.

"The fact that some of these people had to drive 1000kms to get a procedure done is unacceptable, we focussed our efforts to create a solution that results in Queenslanders being able to access the same level of healthcare regardless of their geographic location," he said.

Currently, rural and remote Queenslanders have a 25 per cent higher death rate than people living in metropolitan areas. The new program allows people to access cardiac exercise stress testing at their local hospital and 24-hour holter monitoring with real time support from specialists in Brisbane. "This Tele-Cardiac Investigation service is all about taking the city to the country and making healthcare equitable and accessible," Adj Prof Scott said.

The program has also enabled rapid access to test reporting, with a signed cardiology report from an RBWH specialist completed within 27 minutes of a test.

The program was started as a pilot study with Longreach hospital in 2016, and later received \$1.6 million over three years from the state government to provide a state-wide solution.

Tele-cardiac investigation services are now provided at 16 locations across rural and remote parts of Queensland, as far north as Mornington Island and Normanton.

Further planning is currently underway with the Royal Flying Doctors Service to broaden the range of service provision to towns such as Jundah, Camooweal and Boulia.

## **GPwSI** partnership no headache for patients

Enhanced connections with general practitioners are enabling patients with primary headache disorders to access faster and more comprehensive care.

The Metro North Headache General Practitioner with Special Interest (GPwSI) Clinic works with specialist neurology staff from the Royal Brisbane and Women's Hospital to provide highly specialised advice and treatment for headache patients.

The clinic gives patients the tools and education they need to manage their condition, with the clinic's goal to restore maximal function and improve the patient's quality of life.

While improving access to services, the clinic also aims to reduce long waiting headache patients and improve patient reported outcomes and experience.





### New pathway for breaks and strains

### People with simple fractures and muscle injuries can now avoid a trip to hospital.

A new partnership between Brisbane GPs and Metro North is helping patients access care closer to home rather than attending a busy hospital fracture clinic.

Thirteen GP practices across the Brisbane and Moreton Bay region have received training to offer more options for follow up care when patients present to the Emergency Department with musculoskeletal injuries.

Metro North's Musculoskeletal Primary Care Pathway Project Officer Bridgette Chapman said this includes some types of fractures.

"The pathway releases existing clinical time in Orthopaedic outpatient clinics by ensuring GPs have access to the necessary advice and support from the orthopaedic team to treat these minor fractures," she said.

The new program started in May 2018 and has already made a difference by allowing care closer to home.

"Patient surveys have revealed their satisfaction with the program and they have always felt confident in the treatment and care they have received," Ms Chapman said.

The success of the program to date has led to the recruitment of additional GP clinics and greater partnership across the region.

### **Making blood count**

A specialised patient blood management program at The Prince Charles Hospital (TPCH) is supporting the health of surgical patients by managing anaemia and minimising blood loss.

The preoperative anaemia management element of the program was a Metro North Hospital and Health Service SEED (Support, Explore, Excel, Deliver) funded project established to ensure patients are receiving evidenced based care recommended by the Australian National Blood Authority Patient Blood Management Guidelines. These Guidelines state that anaemia is a contraindication for elective surgery.

TPCH Anaemia Management Clinical Nurse Consultant Kylie Hobson said the hospital sees many patients who are unaware they have anaemia, or don't realise their anaemia is as severe as it is.

"Anaemia can be a significant issue for patients who are about to have major surgery, such as cardiac or joint surgery, where large amounts of blood loss are involved," Kylie said.

Before their surgery patients go through a screening process to determine if they are anaemic or if the level of iron in the blood is deficient. Identified patients are followed up through the anaemia blood management program, which involves collaboration with the patient's GP, a TPCH Haematologist and the Anaemia Management CNC to determine the cause and provide appropriate therapy.

By managing the patient's own blood, adverse outcomes associated with undiagnosed or untreated anaemia can be reduced.

"If not managed correctly before surgery, anaemia can result in the need for a transfusion of red blood cells, which carries risk," Kylie said.

"Red blood cell transfusions are associated with increased risk of infection, length of hospital stay, acute lung injury, the development of antibodies that can make future transfusions difficult, as well as the possibility of acute transfusion reactions."

The introduction of the anaemia management program has seen an improvement in outcomes for patients including an increase in haemoglobin on admission to surgery, a decrease in the use of red blood cell transfusions, and a reduced length of stay in hospital.

"Having a robust blood management program before surgery greatly increases a patient's ability to do well in surgery, and have a quicker recovery," she said.

*Pictured above:* Nurse Skye Gibson assists patient Stephanie Stanton while she undergoes an iron infusion at The Prince Charles Hospital.

## NDIS becomes a game changer for Matt

Support through the National Disability Insurance Scheme (NDIS) has been a game changer for former Jacana Acquired Brain Injury Centre resident Matt.

Matt spent a year recovering at Jacana at Bracken Ridge and has now relocated to a new home where he is able to see his children and family more often.

"Thank you for getting me closer to home and my kids and family. The Jacana team have all been so helpful," Matt said.

"I am loving it; living in Ipswich in my own unit. I can get out a lot more and recently went to Sea World with my family.

"I get to see my kids a lot more and they call me Dad."

A few years ago, father of two Matt, was wheeled into Jacana virtually non-responsive after being in a coma and reliant on life support.

At first, he couldn't speak, eat, stand or walk independently, but has come a long way to be able to leave Jacana and now live independently.

Matt is one of half-a-million Australians with a disability, and is being funded with assistance for equipment, medication and allied health treatment through the NDIS.

The NDIS has allowed Matt to apply for support for daily personal activities, transport, therapeutic supports, daily care needs, home modifications and mobility equipment.

The NDIS will go live in Moreton Bay region from 1 January 2019.

To learn more about the NDIS visit https://www.ndis.gov.au/news/events/qld.



Matt is now closer to his kids thanks to a lot of hard work and support through the NDIS.

#### Indigenous Data Atlas forecasts areas of need

A new data atlas will help healthcare providers on Brisbane's northside close the Indigenous health gap through better service planning and delivery.

The Indigenous Data Atlas brings together a range of health and population data for the Aboriginal and Torres Strait Islander population in the Metro North catchment over the past decade.

Director of Metro North's Aboriginal and Torres Strait Islander Health Unit Paul Drahm said the information will guide the development of new services and the evolution of existing services. The atlas provides current data, removing the need to wait for information to inform planning decisions.

The Atlas links information from a range of systems including:

- Hospital-based care, Emergency Department presentations, specialist outpatient clinic appointments, and hospital admissions
- Pre-and post-hospital care delivered in the community, including oral health, mental health, post-acute care and complex and chronic disease treatment
- Services provided by the local Aboriginal and Torres Strait Islander Health Unit

Mr Drahm said the information will help healthcare providers plan services to meet the changing needs of the population.

### New program benefitting Hepatitis C patients

A novel model of health care delivery pioneered by a clinical team at The Prince Charles Hospital (TPCH) is curing patients with Hepatitis C without the need for hospital admission. The Cure-It program aims to successfully treat Hepatitis C sufferers in Queensland and prevent long-term health problems associated with the fatal condition. Currently, there are up to 200,000 people in Australia affected by Hepatitis C.

The program involves hospital gastroenterology specialists collaborating with GPs across Queensland to provide patients with access to a new medication with a 98 per cent cure rate.

The medication, which became available in 2016, requires patients to take just one tablet once a day for eight to 12 weeks.

TPCH Director of Gastroenterology and Hepatology Dr Tony Rahman said before the new medication became available there was a 60 to 70 per cent chance of Hepatitis C sufferers developing cirrhosis.

"Prior to 2016, the treatment method was a weekly toxic injection and a combination of tablets that had a success rate of between 20 to 40 per cent," Dr Rahman said.

"People needed to take these medications anywhere between 12 to 24 months and they got sick; it was like chemotherapy."



Dr Tony Rahman and Hayley Thompson from The Prince Charles Hospital's Cure-It Program.

Another major benefit of the program is that patients can easily access the new medication through their GP, rather than a hospital admission.

"The majority of patients now just need to see their GP and may only require a simple blood test to see if they require treatment," Dr Rahman said.

"Once the results of a patient's tests are back, the treating GP can contact our team at TPCH. We can then help guide the GP with interpretation of the tests, deciding which treatment is best suited to the patient, for how long and advise with regards to prescription and management during and after treatment has been completed.

"The process means that patients can gain access to the necessary medication within 48 hours of seeing

their GP. Previously, patients may have had to wait between 12 and 18 months from the time they saw their GP to the day they received treatments."

More than 500 people have received treatment on the drug, with no side effects or hospital visits since TPCH started the program 18 months ago.

### Consumer engagement informing new models of care for Indigenous Health

#### Aboriginal and Torres Strait Islander people are actively contributing to the development of new models of healthcare.

Director of the Aboriginal and Torres Strait Islander Health Unit Paul Drahm said more Indigenous representatives were being sought across the health service on consumer engagement panels and projects.

"Our vision at Metro North is to ensure that all Aboriginal and Torres Strait Islander people have equitable access to health services that are culturally appropriate and culturally safe," Mr Drahm said.

"I'm pleased to see more of our mob being invited as consumer representatives to panels and contributing to new model of care sessions with our clinicians."

Metro North's Indigenous Hospital Services, community based Acute and Primary Care team, Ngarrama Family, and Indigenous Sexual Health services have drawn on consumer feedback to improve cultural safety and appropriateness of care.

Mr Drahm said local Elders were engaged to take part in a community engagement program by attending cultural events hosted by the Aboriginal and Torres Strait Islander Health Unit.

"It's about tailoring our consumer engagement and feedback in a manner that is appropriate for our community. Our events provide an informal way to gain essential feedback and for the elders to contribute on behalf of their communities," he said.



Uncle Terry Williams, Aunty Brenda Kanofski, A&TSIHU Director Paul Drahm, Metro North Hospital and Health Board Members Dr Kim Forrester and Bonny Barry and Aunty Minnie Mace and Uncle George Wano (centre).

### Driving change through engagement

Indigenous health leaders gathered at the annual Close the Gap day in March to discuss their roles within Metro North and participated in a consumer panel to provide feedback on ways we can all contribute to improving health outcomes.

Uncle Terry Williams has joined the Lighthouse Project as a consumer after having double bypass heart surgery at The Prince Charles Hospital in June 2016.

The project aims to improve care and outcomes for Aboriginal and Torres Strait Islander peoples with coronary heart disease.

Uncle Terry has since contributed to major changes within the hospital including the development of a healing space and artwork for Indigenous patients, the introduction of making tracks staff shirts and taking part in an educational film.

He also hopes to highlight the importance of nurturing the mental health of Aboriginal and Torres Strait people before and after major surgery.

#### COMPLAINTS BY SEVERITY

The Office of the Health Ombudsman (OHO) is Queensland's health service complaints agency and is another avenue consumers have available to them should they wish to make a healthcare complaint.

The OHO is an independent statutory body and the place Queenslanders should go if they have a complaint about a health service provider or a health service provided to them, a family member or someone in their care that they are unable to resolve with the service provider directly. Complaints can be made to the OHO about both registered and unregistered health service providers or health service organisations.

The diagram on the right represents the 2017-18 total number of Metro North – related complaints received from the OHO.

#### **Complaints received** Take no further action Assessment 1. Take no further action: Some complaints will not be taken further for a number of reasons. 2. Assessment: The assessment process will gather all relevant information needed from the complainant, the health service provider and any relevant experts to enable the OHO to make the right decision on how best to manage the complaint. Referral to another organisation i.e. 3. Local resolution: OHO works with the complainant and **AHPRA** Metro North to facilitate meetings and other communication to resolve the complaint informally. Referral to the Director 4. Conciliation: of Proceedings or When complaints are more complex. Conduct of an inquiry conciliation is an informal, confidential meeting process run by independent skilled conciliators. 5. Investigation: Investigation involves a detailed 6. Referral to another organisation: examination of a complaint including A complaint can be referred to another gathering evidence and analysing the organisation if the issue falls within another jurisdiction, better suited to

managing the complaint.

gathering evidence and analysing the cause/s of an adverse health incident or healthcare issue.

### Signs and Symptoms of Stroke

The National Stroke Foundation recommends the F.A.S.T. test as an easy way to remember the most common signs of stroke. Using the F.A.S.T. test involves asking these simple questions:





### Mental Health helping smokers kick butts

Smoking is a leading cause of preventable death and disease, accounting for more than 3,400 deaths in Queensland each year.

However, efforts by Metro North Mental Health (MNMH) to help consumers 'kick butts' are paying dividends with all three MNMH community facilities in the top five state-wide for overall smoking pathway completion rates.

Research has shown that compared with the general population, consumers with a mental illness have higher smoking rates, higher levels of nicotine dependence and lower cessation rates. Smokers with a mental illness are just as motivated to quit as the general population and research shows that quitting leads to improved physical and mental health outcomes and therefore it is important that they are offered support to quit.

MNMH Smoking Cessation Project Officer Kelly Price said the service was committed to working with consumers to self-manage their health, providing them with tools and access to resources to quit smoking.

The Smoking Cessation Project is funded by QIPC (Quality Improvement Payment C) – a state-wide initiative available to Hospital and Health Services to increase the delivery of clinician-led smoking cessation interventions for mental health community consumers.

In the six months from July to December 2017, 4,783 consumers accessed MNMH facilities at Redcliffe-Caboolture and The Prince Charles and Royal Brisbane and Women's Hospitals. Ms Price said the smoking status of 65 per cent of consumers was known.

"We identified 1,713 smokers and 61 per cent of these consumers completed the Smoking Cessation Clinical Pathway. The target was 30 per cent," she said.

"To achieve these targets our clinicians are required to have a discussion with consumers about their smoking and offer follow up support if the consumer wants to make changes to their smoking behaviour.

"Having these conversations with consumers who smoke opens up the for change and gives consumers additional support on their quit smoking journey."

The Smoking Cessation Project aims to:

- Screen consumers for smoking behaviour and provide intervention to identified smokers
- Provide brief interventions to all patients who are identified as current smokers
- Provide timely Nicotine Replacement Therapy on admission to reduce potential for withdrawal
- Increase NRT prescribing rates for patients on discharge
- Increase links and referrals to Quitline
- Standardise documentation
- Provide a multidisciplinary approach.

### Not just a bed

A bed is not just a bed. It's become an important tool to improve the health and safety of patients.

The Quality Effectiveness Support Team (QuEST) at The Prince Charles Hospital initiated a formal bed replacement program a decade ago after identifying that existing hospital beds did not meet international medical bed standards, resulting in a potential safety risk to patients and staff. With the changing technical climate in healthcare, they also realised there were opportunities to use beds for patient safety, as well as rest and recovery.

All 510 beds at the hospital have now been replaced to meet current international standards, with 15 different types of beds to choose from, each with multiple variations to assist with appropriate patient care.

QuEST Clinical Nurse Consultant Tracy Nowicki said hospital beds were essentially a health professional's work station and could be used to improve patient outcomes and reduce safety risks.

"A bed choice can make a significant difference to a patient's journey and impact on their rate of recovery and length of stay," she said.

Modern hospital beds have many useful applications

clinical needs," Tracy said. "For example, an elderly patient with dementia will require a more sophisticated bed than a general medical patient. The ideal bed would have a built-in air mattress, scales for easy weighing, and an alarm to alert staff when the patient is trying to mobilise."

Having a central store also means clinical areas have a dedicated area where they can send any beds that require maintenance or repair.

Hospital staff also have access to an extensive bedside support service where QuEST staff can provide education and advice about the operation and features of a particular bed.

QuEST staff can also provide expert consultations with patients and their families to ensure that the choice of bed is a good fit and the patient and family understand the benefits of the selected bed.

"Engaging with patients and their families is an important part of understanding their clinical requirements so we can find an option that assists with their recovery," Tracy said.

such as profiling mattress platforms that help to prevent pressure injuries.

To ensure the ongoing efficiency, the QuEST department has established a central bed store where a number of spare and specialty beds are kept, providing clinical areas with ready access to particular beds if required.

"Clinical areas will often require immediate access to a bed for a patient with specific



Finding a good fit. Assistant in Nursing, Douglas Walker explains the features of a bed to patient Glenda Jackson.

HEALTH SERVICE STRATEGY 🗸

#### Welcome videos reduce stress for families

Having a sick child can be worrying for a parent. To help families cope with visiting the hospital, Caboolture Hospital has created a video to introduce them to the paediatric ward.

The videos provide important information to parents on topics including access to and from the ward, information about hygiene and safety, as well as information about the room, including bedding.

Consumer representative Carolyn Wharton narrates and features in the video, along with our health professionals, reflecting on her experiences of accessing care over the past 12 years with her daughter, Madelyn.

Carolyn said people usually accessed the health system when they or a loved one was at their most vulnerable, unwell or in pain.

"When your child is sick, and you are tired, it's the little things that can make a big difference... like knowing where you can get a coffee or what questions you should ask your doctor when they come around," Carolyn said.

"This video is our way of making a tough time just a little easier.

"What's great about these videos is that you can watch them before you come to hospital, when you arrive or during your stay.

"They're accessible any time of the day or night. I know from experience how important this information can be."



Jordi and Carolyn making the video

### Partnering with consumers spells results for surgical ward

Preventing pressure injuries is a priority for healthcare staff across the globe, reducing life-long and debilitating consequences for patients. In 2017, Royal Brisbane and Women's Hospital (RBWH) Orthopaedic Trauma Ward 7AS was nominated to join in a partnership with RBWH Quality, Innovation and Patient Safety Service and a consumer representative to focus on reducing the number of pressure injuries on the ward.

Pressure injuries, or pressure sores, are spots of tissue damage to the skin caused by constant pressure or friction. They are most common in patients who are unable to move on their own, such as those in intensive care units or trauma wards.

"The team from the Quality, Innovation and Patient Safety Service came to us and said: 'in a perfect world what would the ward look like to you?'," 7AS Nurse Unit Manager Duane Watson said.

"We had a high incidence of pressure injuries, and while they were all explainable, you always want those numbers to be lower because we are really passionate about our patients, and we want them to be better, sooner."

The focus was on preventing pressure injuries, with staff and consumer engagement at every level. The partnership commenced with a real patient experience of life with permanent pressure injuries. The powerful impact of the consumer experience focused staff on achieving zero pressure injuries occurring on their ward.

For the last 12 months staff and patients have actively engaged in several activities, including safety huddles and care planning, and today the ward has a zero rate of pressure injury.

Quality, Innovation and Patient Safety Service's Catherine Ryan said the result was a testament to what can be achieved when staff and consumers work together.

"It's a great result for the ward and their patients. Fundamentally what was integral to the success of this was the consumer participation, and of course the buy in and willingness of the staff," Ms Ryan said.



The team from 7AS has achieved has a zero rate of pressure injuries.

### **Metro North Flu-Ready**

#### Seasonal flu can have a devastating effect on the community and put pressure on healthcare services.

Metro North Emergency Manager Diane Bretherton said the health service has adopted a proactive approach to support the community access to health services during the peak winter period.

"The key focus of this approach has been to support clinicians at the bedside to provide timely access and safe care for patients," said Diane.

"Positioning the health service to keeping our community, our workforce and our services resilient began as early as October 2017 with the purchase of point-of-care testing for flu.

"This testing is very efficient and will greatly assist hospitals in the early diagnosis and management of people with flu." While a broad community flu vaccination was available to the public, keeping hospital staff flu-free was another priority. Metro North delivered this through a highly successful, coordinated and targeted workforce vaccination program launched in April 2018 in parallel with a broader community vaccination program. This resulted in more than 13,100 staff vaccinations, with some staff also choosing to get their vaccines privately.

This was augmented by a revision of clinical services plans to ensure there was an agile response to the expected increase in demand for hospital beds.

"Through this we are enabling capacity and capability, without impacting patient care," Diane said.

Another key initiative has been the development of a live 'dashboard'. The dashboard provided a virtual connection between clinicians and service delivery planners to enable early targeted interventions to prevent delays in patient and community care during flu season.

### **Compassion Café serves up Values in Action**

A pop-up *Compassion Café* offering hundreds of free cups of tea and coffee, cupcakes and biscuits to staff, patients, families and carers celebrated Patient Experience Week at the Royal Brisbane and Women's Hospital (RBWH) in April.

The café was an initiative of the Quality, Innovation and Patient Safety Service and RBWH Consumers and was a chance to see the value of compassion in action and see how it impacts the lives of people staying, visiting or working at the Royal.

Consumer Advisory Group Chair Fiona Comber said it was fantastic to see the engagement from both staff and consumers who shared their stories of the random acts of kindness at Metro North.

"We wanted to do something more hands on for the thousands of people who walk through these doors each day," Fiona said.

"I loved hearing the stories of kindness... people come here during some of the most vulnerable times in their lives and it's heart-warming to hear that they've been positively impacted by staff here at RBWH."

The team received numerous pieces of feedback about random acts of kindness and other positive comments and compliments from patients, carers and families about their time at RBWH.



Visitors to the Compassion Café were met with smiles and a cuppa

It's a great result for the ward and their patients. Fundamentally what was integral to the success of this was the consumer participation, and of course the buy in and willingness of the staff.

**2**00



### **Caring for Older Persons**

With the number of Australians aged 65 and over projected to more than double by 2055, the need for local healthcare services to provide high quality, appropriate and safe care to this ageing cohort is paramount.

Navigating the healthcare system can be a daunting and difficult process for many patients. For our frail aging population this can be especially overwhelming.

With approximately 10 per cent of people over 65 also frail, many with complex and chronic conditions that prevent them from returning home, Metro North has put caring for frail older patients at the centre of a year-long campaign. At Metro North, this equates to 12,903 people.

Through the Year of the Frail Older Person, Metro North pledged to treat these vulnerable patients as if they were a family member, making it a deeply personal mission to improve their quality of life.

To do this, a range of initiatives have been put in place to ensure that from when they arrive, during their hospital stay and when they leave, seamless, effective and efficient care is within every aspect of their health journey.

Dr Elizabeth Whiting, Geriatrician and Executive Director Clinical Services, has championed the development of a range of strong and innovative solutions that will support the health and wellbeing of frail older people. This includes the vital clinical frailty score that assists and identifies appropriate care for older individuals.

"The Clinical Frailty Screening tool is used across all Metro North emergency departments and recorded a 66% compliance for over 75-year-olds at the end of



#### March 2018," said Dr Whiting.

"We are now recording this crucial information for all relevant presentations, which will allow us to monitor the number of frail patients we are treating, their pathway of care, and most importantly their clinical outcomes."

Further initiatives included the appointment of Nurse Navigators who are helping guide elderly patients through their hospital journey and the Watching Our Waits dashboard, which allows clinicians to gain a better view of the patient journey and where there are delays.

Innovative service models were introduced across facilities to provide more individualised care to older people to reduce their hospital stay and support them at home and in the community.

Other models of care are also shifting the focus away from hospitals providing multi-disciplinary clinical support to providing this care for elderly people in residential aged care.

Metro North will continue to focus on care of the older person through a range of initiatives that will come into place over the coming years. This includes implementation of the 5-year healthcare plan in partnership with Brisbane North PHN. Metro North also aspires to be recognised as a Centre of Health Care Excellence for the Care of the Older Person by 2024.

## Support healthy and active ageing.

Every day counts.

#### HEALTH SERVICE STRATEGY

### **Older Persons Assessment Liaison Service**

Elderly patients visiting The Prince Charles Hospital's adult emergency department (ED) are being treated by a dedicated team to address specific health issues experienced by older people and reducing waiting times.

The Older Persons Assessment Liaison Service (OPALS) brings together a multi-disciplinary team to talk to the patient about their healthcare goals with a focus on early decision making, maximising supported

community discharge, while seeking other opportunities to improve care.

Currently, TPCH's ED records an average of 26 patients over the age of 75 who present daily to the department (23 per cent of all adult presentations), with an admission rate of more than double those under 75 years old. Prior to OPALS,

these patients recorded an average waiting in the ED of more than eight hours, double the average waiting time of patients under 75 years old who presented to the department.

Adult ED Clinical Nurse Consultant Stephen Callaway said that there are various issues associated with this group of vulnerable patients, with potential challenges around communication, medication, mobility, toileting, and deconditioning.

"We know that the ED environment with its noise, bright lights, and overcrowding can contribute to a patient's disorientation," Stephen said.

Research shows that elderly patients are often not as physically resilient, that assessment can be complicated by the presence of chronic conditions, and some critical illness is more difficult to identify due to factors associated with the changes of ageing.

"Frail older persons are one of the most at-risk groups if there are delays to care. In OPALS the care we deliver is focused on addressing many of the challenges to their care," Stephen said.

The OPALS team seek to challenge the traditional assessment models in the ED by adding functional assessment early as part of the patient's initial emergency assessment, rather than waiting until the patient arrives at the ward. This allows an earlier multidisciplinary assessment process to occur which can help inform admission, treatment or discharge decision making. Some patients

who would have been routinely admitted under the previous model, are now returned to their usual residence, with additional support activated to optimise success of the discharge option.

The OPALS team has now provided care to over 1600 patients which represents 4.9 per cent of all ED patients.

The Service has produced some

promising results, recording an extremely low 'did not wait' rate of 0.2 per cent, and receiving positive feedback from the patient and other visitors.

While the OPALS specific cohort averaged 109 minutes less time in the ED compared with the same period last year, the wider cohort of older patients in ED have also benefitted, spending 21 minutes less time on average in the department.

Referral to community supports have doubled, and specifically targeted high-risk groups such as those with a fractured neck of femur, have achieved measurable improvements in care.

The OPALS initiative has also resulted in extra capacity in the broader adult ED which has recorded some improvement in direct access to the most appropriate treatment space for approximately 1000 patients. This is despite an overall growth in ED presentations of 4.3 per cent during the same period while OPALS has been operating.

"This initiative has created a smarter, more focused way to improve care while managing and responding to the growth in the broader community with minimal additional resources," Stephen said.

The OPALS team has now provided care to over 1600 patients which represents 4.9 per cent of all ED patients.



Redcliffe's Nurse Navigator for Dementia and Delirium, Irene Russell.

### Improving care for patients with dementia and delirium

Redcliffe Hospital has appointed the first Nurse Navigator dedicated to supporting patients with dementia and delirium.

Irene Russell was appointed in November last year, with the position designed to improve the care of patients with these complex conditions.

"These patients are special and need to be treated a bit differently," Irene said.

"When they present to the hospital, it's often not because of their dementia or delirium – but these conditions add a level of complexity to the care and treatment that they need from us."

One of three Nurse Navigators at Redcliffe Hospital, Irene works closely with the hospital's eight-bed Delirium and Falls Unit (DAFU), which treats the hospital's more complex patients, including those with behavioural concerns related to dementia and delirium.

"The role though works across the whole of the hospital, and with an older population accessing our hospital we see many patients showing those early cognitive changes who benefit from that extra bit of special care.

"With the attention that's been paid to the care of the frail older person, and hospital-wide improvements to patient flow under the Access Best Care Initiative (ABCi), I think we can definitely say that we're doing much better for patients with dementia and delirium at Redcliffe."





"I am also in the process of exploring more pathways for clients who end up in the emergency department or hospital purely because they themselves or their carers can't cope with the care needs."

### **Nurse Navigators**

For frail elderly patients with a range of complex and chronic health issues, navigating the healthcare system can be a difficult and daunting task.

Clinical jargon and specialist appointments are hard to understand and the pathway to home can look distant and sometimes non-existent.

As part of Year of the Frail Older Person, meeting these specific needs of the aged population has been a priority. To do this, Metro North has appointed five Older Person Nurse Navigators who are now offering a helping hand to these vulnerable patients, walking them through their hospital journey.

Paramjit Kaur is a Nurse Navigator based at Brighton, but her role expands beyond the campus and across Metro North as she case manages elderly and frail clients with complex medical issues or complex social situations to support them best in the community while connecting with other nurse navigators who work in hospitals.

"I help and support them to navigate through this complex system, am their advocate, I walk with them in their health journey, tell them what all the difficult medical jargon means, and help them with all these piles of paper work.

"I ensure that they don't have fragmented care because they need someone who can be that central point of contact," she said. "The beauty of the navigation role is I have the opportunity to do things not defined in a box."

As part of her role, avoiding hospitalisation for an elderly patient is a priority, as their health can often deteriorate rapidly during their stay.

"I get a client's issues sorted out or escalate the care needs and create more appropriate linkages to services to support them so we can avoid emergency department or hospital presentation.

"I am also in the process of exploring more pathways for clients who end up in the emergency department or hospital purely because they themselves or their carers can't cope with the care needs."

Above all, Paramjit and other Nurse Navigators empower individuals to take control of their own health by coaching them and help them be health literate.

"If required, I also go with the clients for GP/specialist appointments to facilitate the advocacy type of role. This is a wonderful outcome for older frail clients who are already struggling to understand the complex health system."

#### HEALTH SERVICE STRATEGY 💊

### **Geriatric Outreach Assessment Service (GOAS)**

In recognition of the increased rate of complications older people experience when they come to hospital, The Prince Charles Hospital (TPCH) has established an outreach service to support the care of frail older persons living in residential aged care facilities (RACF).

The Geriatric Outreach Assessment Service (GOAS), provides geriatric assessment expertise to residents living in RACF to help provide early management of their condition, and avoid unnecessary emergency department presentations and hospital admissions.

GOAS, which is a partnership with the Brisbane North PHN, involves a multi-disciplinary team from TPCH consisting of a geriatrician, registrar, two clinical nurses and an administration officer who provide phone and onsite support to RACF staff for patients requiring medical attention. The older person will remain under the care of their General Practitioner and will be reviewed by the GOAS on referral from the patient's GP, or on their behalf by RACF staff, or Queensland Ambulance Service (QAS).

TPCH Geriatrician, Dr Gurudev Kewalram said that older patients living in residential care facilities can experience multiple chronic conditions, physiological impairments, decreased reserve and often take multiple medications. "This makes them particularly vulnerable to the adverse effects associated with hospitalisation," Dr Kewalram said.

"Through GOAS, the primary goal is to allow the older patient to stay within their own environment to receive the necessary medical care, rather than coming to hospital.

"This ensures the older person's needs are respected and considered, and they experience a higher quality of health care."

Since the service commenced in June 2017, it has provided approximately 1,000 episodes of care. Of these episodes, 92 per cent were considered potentially preventable emergency department presentations and 78 per cent were estimated as potentially preventable hospital admissions.

These results have contributed to the decline in inpatient admissions and ED presentations by residents from RACFs with in TPCH's catchment area.



### An innovative approach for young Caboolture mothers

A new program is building confidence for young mothers in the Caboolture community by providing them with the support they need as new parents.



Pieter Walker from the Health Roundtable (far left) meets staff from the Caboolture Young Mothers for Young Women program, including midwife Debbi Sutherland (seated).

The Caboolture Young Mothers for Young Women Program (CYMYW) program consists of a small team of peer workers and a midwife who provide intensive support to roll out an integrated model of care which navigates community and hospital services offering antenatal and postnatal care that young mothers need and helps them to be confident as a parent.

CYMYW Team Leader Kylie Bolland said early feedback and outcomes from young women and their children were already showing that the innovative model worked.

"We are seeing young women access antenatal care and health services that they otherwise would not," Kylie said.

"These same young women are finding permanent housing and setting up and planning for the birth of their baby and parenthood."

The innovative program is a joint initiative between Caboolture Hospital and community-based, not-for-profit organisation MICAH Projects, funded by the Department of Communities. "This is early intervention and prevention work that can only be done when government and non-government organisations work together," Kylie said.

"It's great to have the opportunity to partner with a hospital willing to try something new and demonstrate real innovation and push the boundaries."

Caboolture Hospital Service Partnerships Lead Wayne Middleton said that talking with the CYMYW team about their experiences with the health and hospital system highlighted the importance of this model and how it can make a big difference in the life of young families.

"It enables transition of pregnant young women to hospital services earlier and follow-up to GP care afterwards," he said.

This innovative integrated care model and the partnership between health and the community sectors developed in Caboolture is now being discussed at a broader, statewide level.

The CYMYW is located at 2 Oakland Drive, Caboolture South. Phone 5495 7270.



### Queensland Milk Bank turns 5!

Through the kindness of nearly 600 women, more than 1,600 premature babies have been helped since the Queensland Milk Bank at Royal Brisbane and Women's Hospital first opened its doors in 2012.

Since then, it has had a name change and celebrated its fifth birthday. It has provided a massive 5,836 litres of breast milk for premature babies in need, with 16 additional facilities now receiving its milk.

It was through tragedy and extraordinary kindness that Caboolture's Debra Rolfe became the very first milk donor.

During her time in the RBWH neonatal ward with her sick premature son Bradley, Debra noticed that many women couldn't make milk for their babies, whether it was due to the timing of their baby's birth or the stress they were under.

"Meanwhile, I would be there day and night, every two hours, making milk. Bradley was never able to consume as much as I created. My supply was always greater than his demand," Debra said.

"I kept all the milk and put it in the freezer."

Sadly, Bradley passed away. Debra was approached by RBWH Neonatology Director Dr Pieter Koorts and Dr Donna Bostock about how she could help other babies by donating her milk.

"I donated 43 litres that day, and that was back when they had one or two fridges. Pieter sent me a letter saying I saved 18 babies on my own," she said.

The initial compassion Debra showed during her time at the Royal is being replicated every day at the thriving Milk Bank as mothers continue to donate the vital liquid.

The service is helping more little lives than ever, with Queensland Milk Bank feeding a record number of 51 babies in May.





Pulmonary Rehabilitation graduates are now well armed to get their lives back on track; (from left) CISS Senior Physiotherapist Rebekah Barry, Bob Rubendra, Marcia Fletcher, John Aiton, Stephen Bright, Marion Brooks and CISS Clinical Nurse Louisa Hammerslag.

### It's never too late to learn about your health

An ongoing chronic respiratory condition was keeping Morayfield resident Bob Rubendra from doing simple things around the house.

That has now changed after eight weeks of dedication and hard work, plus some great support through the Pulmonary Rehabilitation program being delivered by Metro North Hospital and Health Service.

Chronic respiratory conditions can make it more difficult for many older people to maintain their independence and mobility.

"I am very happy with the help I have received. I am now walking each day and can do a lot more of those important chores around the house, such as cleaning the gutters," Bob said.

Following an admission to Caboolture Hospital, Bob was introduced to the Satellite Pulmonary Rehabilitation Program. As part of the program, Bob undertook two gym sessions each week over a period of eight weeks participating in a range of exercises including a walking program, resistance training, weights and rowing, and walking tests. "The best thing I have learnt is how to manage my breathing properly, especially when I am doing things around the house," Bob said.

The current program intake, which includes around 20 participants from across North Brisbane, features additional educational classes delivered with allied health and nursing professionals at Burpengary, Redcliffe and Brighton.

Community and Oral Health's Senior Physiotherapist Rebekah Barry said more than 80 people in North Brisbane and Moreton Bay had already benefited from the Pulmonary Rehabilitation program.

"We are seeing participants improving their health and wellbeing, mobility, fitness and quality of life," Rebekah said.

"After eight weeks participants are getting back to activities they love such as dancing, walking, gardening and, in Bob's case, being more active around the house."

The program is part of a Metro North's strategy to reduce the demand on the hospital system by assisting people stay healthier and manage their disease more confidently closer to home.
### **Committed to Value Based Healthcare**

Value Based Healthcare (VBHC) is Metro North Hospital and Health Service's commitment to providing patients and consumers with healthcare they value. VBHC is about asking patients what matters the most to them and working with them on a treatment plan to achieve those outcomes wherever possible.

The Value Based Healthcare Unit, comprising medical officers, nurses and allied health professionals, was created to support clinicians in applying a different lens to how patient care is approached.

Interventional radiologist Dr John Clouston said the VBHC team had been working on simple and flexible ways for patients to tell clinicians how they're really going, by answering plainly worded questions at regular intervals before, during and after care.

"These are validated tools that assess outcomes from a patient perspective, quality of life and experience over time," Dr Clouston said.

"It allows comparison between healthcare that is delivered and health outcomes achieved from the patient's perspective.

"We would like this system to be available to every patient, clinician and health service in Queensland so that we can provide care that truly matters to patients and improves their lives."

To achieve this, the VBHC team pitched a patient reporting platform called 'AboutMe' designed to capture patient reported outcomes (PROMs) and experiences (PREMs) to the 2018 eHealth Hackathon.

The team is now one step closer to delivering the platform after securing third place in the competition and will now develop the idea into a working technology-based prototype to be funded for a pilot platform for Metro North.

In addition to the PROMs and PREMs platform, the team are collaborating with staff to develop a clinician dashboard that will allow validated data to be drawn from a range of sources and displayed in one convenient place so clinicians can assess their performance, do benchmarking, and make improvements.

Metro North's Value Based Healthcare team: Dr John Clouston, Dr Kate McCrossin, Dr Iain Borthwick, Elise Button and Adam Scott.



# Queensland's first post-ICU follow-up clinic

Redcliffe Hospital intensive care patients are benefitting from a Queensland-first service to treat a condition not well understood.

Intensive care units (ICU) provide the life-saving care that patients need when they are at their most vulnerable and unwell. Yet, for some patients, even after they left the hospital and have otherwise recovered from their injury or illness, they go on to endure a range of chronic symptoms that are essentially unrelated to what caused them to be admitted to the ICU.

These symptoms are collectively known as Post Intensive Care Syndrome (PICS), a condition that so far in Australia has not been well understood.

Redcliffe Hospital initiated a follow-up clinic to engage patients discharged from the hospital's ICU to better understand and support patients who may be suffering from PICS.

Redcliffe Hospital Social Worker Monique Raven said the follow-up clinic was based on a multidisciplinary approach between nursing and social work and had so far supported 171 former ICU patients on 227 occasions of service.

"The Redcliffe clinic specifically works with patients who had been admitted to the ICU for more than 48 hours, were not under a current mental health review, and were without severe cognitive impairment," Monique said.

"Through the ICU follow-up clinic, we provide patients with a platform

to debrief, discuss and better understand their ICU experiences and refer patients who do need help with the appropriate acute and subacute services that will support their recovery."

"We're also looking forward to publishing research data, and presenting at the ANZICS/ ACCCN ASM in Adelaide later this year, which will go toward helping other hospitals provide improved long-term care for ICU patients."



Social Worker Monique Raven with ICU Clinical Nurse Katrina Cook in Redcliffe Hospital's ICU



### Putting patients first through improved patient flow

Redcliffe Hospital has committed itself to an ambitious whole of hospital project it calls the Access Best Care Initiative (ABCi).

Redcliffe Hospital Executive Director Louise Oriti said ABCi is based on a very simple and very practical concept – that by improving patient flow, the hospital can improve patient care.

"ABCi is a whole of hospital commitment to putting patients first," Ms Oriti said.

"Phase one rolled out across the hospital from May to November last year introducing nine specific solutions that standardised hospital processes and improved communication between clinicians."

"Since the introduction of the first phase of ABCi, patients in the emergency department are being seen by a doctor sooner; and many patients who need to be admitted to a ward bed from the emergency department are making that transition faster than before," Ms Oriti said.

"Changes to our processes and systems, by and large, have made sustainable and measurable improvement, allowing the hospital to build on that success and move forward with a second phase, ABCi2."

"So, as ABCi continues, we will continue to maintain our focus on putting patients first," Ms Oriti said.

# **Reducing the risk of opioid overdose**

Metro North is taking action to reduce opioid overdose deaths, offering drug users an overdose reversal treatment.

Take-home naloxone (THN) programs delivered through peer outreach services are proving increasingly important and effective as part of an opioid overdose prevention strategy.

Clinical Director of Metro North's Alcohol and Drug Service, Dr Jeremy Hayllar, said Queensland had experienced a growing number of overdose deaths from prescription opioids.

Compared with 2001–2005, pharmaceutical opioid deaths in 2011–2015 increased 2.7—fold in Queensland, along with Western Australia—the largest increase in any state or territory. The average across Australia was a 1.6-fold increase.

"The number of overdose deaths from prescription opioids has grown, particularly in recent years involving fentanyl, which is up to 100 times more potent than morphine, so only a very small dose is needed to cause overdose," Dr Hayllar said.

As part of a range of responses, Metro North's Biala Community Health Centre developed an overdose prevention strategy that includes a take-home naloxone training program that expands access to the drug from hospitals and paramedics to people likely to witness an overdose, such as friends or family members of people who use drugs and people who use drugs themselves. Naloxone is an opioid blocker or reversing agent that will treat overdose from morphine and other opioids if given in a timely manner.

Biala piloted the THN training program in Queensland in 2014, alongside similar initiatives around the country. More than 2,500 people have now received training around Australia and, anecdotally, 630 drug overdose reversals have been reported according to a recently published review.

"THN training focuses on reducing the risk of overdose, recognising the features of overdose, responding to an overdose and giving naloxone by injection," Dr Hayllar said.

"The idea is that anyone at risk of overdose—people injecting heroin or other opioids, those on high dose prescription opioids or who use other depressants like alcohol or benzodiazepines in addition to opioids should be offered training in recognising and responding to overdose and how to administer naloxone."

Dr Hayllar said that although there had been a relatively slow uptake of THN generally across Queensland, efforts to promote THN awareness and training are continuing, along with other complementary harm reduction approaches.

"Naloxone is one of the most effective harm reduction tools to curb unintentional opioid overdose deaths."

### Faster response for deteriorating patients

Recognising and responding to a patient's deteriorating condition can help prevent serious adverse events.

To ensure early identification of deterioration, Caboolture Hospital has formed a governance committee to provide advice and support development and implementation of clinical deterioration response systems. The committee reports to the hospital's Safety and Quality committee and is chaired by ICU Staff Specialist Ramsy Dsouza.

The committee has seven key objectives including practically skilling staff to recognise and respond to a

deteriorating patient and maintain medical emergency standards. A recent project has installed four automated external defibrillator devices around the hospital campus.

It also ensures the hospital operates in accordance with the standards identified by the Australian Resuscitation Council and complies with National Safety and Quality Health Service Standards.



A great partnership has blossomed between Sandgate and District Men's Shed and Brighton Health Campus, with members including Robert Burgess and Peter Lumsdale developing rehabilitation aids to help in patient recovery.

### Men's Shed keeping minds active and healthy

A partnership between Community and Oral Health (COH) and Sandgate and Districts Men's Shed is having a positive effect for patients recovering from serious injury.

Executive Director Tami Photinos said it was great to see this partnership blossoming and resulting in some great outcomes for patients and residential residents.

"The Men's Shed members are working with our Allied Health staff to create a range of helpful items to support the care we provide," Ms Photinos said.

"We are seeing invaluable aids and sensory items being developed and used to support patients recovering from serious injury, and helping to improve the lives of residents at Brighton.

"The Men's Shed has created innovative rehabilitation aids for use in the gym area, including step-up blocks for balance assessments and exercises, and dexterity boxes with latches, lids and locks for patients that require help to improve their coordination, memory and fine motor skills.

"They have created personal dressing aids to help people who are having difficulty bending over, and a number of fun items such as quoits stands and small bowling alleys for rehabilitation of patients and resident entertainment."

Sandgate and District Men's Shed has opened its doors to residents and patients as a friendly place for them to come to spend some time, to interact, complete meaningful projects and remain active.

Jacana Acquired Brain Injury Centre resident Ken Broad said the best thing about the Men's Shed was the interaction with the volunteers and members.

"It is good to sit down and have a cup of coffee and gossip about things done in the past or holidays. It is good to see some of the items that have been crafted and which are now on display," Ken said.

The Men's Shed relocated to the Brighton Health Campus in July 2016, with membership increasing from 12 to close to 70 members, including residents at Brighton, Cooinda and Bracken Ridge ABI.

# Robotic technology to optimise medication management

Patients across Metro North are benefiting from safer, speedier and more efficient medication management thanks to robotic technology.

Director of Pharmacy at Royal Brisbane and Women's Hospital (RBWH) Associate Professor Ian Coombes said that managing medication inventory through robotics will bring a raft of benefits to patients' health outcomes as well as to the business of running a hospital.

"Medication management is complex and multifaceted and involves a number of different processes and people; for example, doctors, nurses and pharmacists, as well the patient themselves," A/Prof. Coombes said.

"The reality of current processes is that pharmacists spend much of their time manually storing, distributing and dispensing medications. This reduces the time they can spend on more important and more complex aspects of their job, such as clinically assessing and optimising therapy, and advising patients on medicine use."

More than \$100 million worth of medications are supplied across Metro North each year.

As part of Metro North's Electronic Medication Management Plan, Pyxis MedStations have been rolled out in Emergency Departments at Redcliffe, RBWH, The Prince Charles Hospital and Caboolture Hospital.

"Using electronic systems to carry out medication storage and dispensing will reduce the time it takes between when the script is written and the delivery of medications to patients," A/Prof. Coombes said.

Pyxis also provides additional security, with things like fingerprint access and barcode scanning to track what is being used, and where. As it only provides access to the medicine that has been pre-selected, the risk of an unintended medication being accidentally picked up is reduced.

Under the North's Electronic Medication Management plan, a Pharmacy Robot (CEDRIC) has been implemented in the Cancer Care pharmacy at RBWH to more safely and efficiently automatically pick and store medications. Another huge tandem robot is scheduled to go live in RBWH's Main Pharmacy in July 2018. In addition to robotics, an Electronic Prescribing and Medication Administration system (MedChart) is being piloted in selected wards at Caboolture Hospital and RBWH to test the vision of achieving a complete cycle of medication management from prescribing to dispensing, to patient supply and administration.

The results of this proof of concept will be used to inform Metro North on the benefits and potential issues of deploying electronic prescribing more broadly across MNHHS.

The rollout of these projects is a core component for Closed Loop Electronic Medication Management (CLEMM) and a fundamental building block for digital hospital readiness.

Pharmacist at The Prince Charles Hospital Meghan Winterflood trials the new Pyxis system in the Emergency Department.



## Zeroing in on ENT wait lists

Patients will have a shorter wait for a specialist ear, nose and throat (ENT) appointment at Royal Brisbane and Women's Hospital after a twoyear project to improve outpatient access. Royal Brisbane and Women's Hospital's ENT department has reduced waiting lists through a variety of innovations and changes, including the development of satellite services to treat people closer to home, streamlining clinics, extended hours and Saturday theatre lists, pop up clinics, robotics, clinical trials to potentially reduce reliance on surgery, initial and ongoing audits, allied health support and an improved approach to discharge.

CNC Surgical Outpatient Coordinator Kate Dickson said the process was a long but rewarding one, reducing Category 3 waits from 1,029 days to 418 days; Category 2 waits from 667 days to 105 days, and keeping Category 1 waits steady at 22 days.

"We were able to drastically improve," Kate said. "It was an opportunity to do what we always wanted to do. And we've maintained this over the last 12 months, which has been so incredibly important for our team, and most importantly the patients.

"We treat people, we don't treat numbers. It certainly pays to improve access to vital services like ENT."

The ENT Department at RBWH provides treatment for head and neck cancers to people living in Brisbane, north western Queensland, eastern Northern Territory, Northern New South Wales, the Pacific Islands and Papua New Guinea. They also cover everything in between; from ear surgery, cochlear implants and bone anchored hearing aids, nasal and sinus surgery, tonsillectomies, and salivary gland and voice disorders.

RBWH's Ear, Nose and Throat team have improved access to specialist services.





# Digital solution speeds dental access

People needing dental care can now receive treatment sooner with a new digital dental voucher program.

Metro North is one of Australia's largest dental health providers, offering free treatment to eligible patients. It also provides vouchers for eligible public dental patients to receive care from private providers when public appointments aren't available in the timeframe needed.

The new Dental Online Voucher Exchange (DOVE) allows eligible dental patients to receive vouchers instantly instead of waiting up to several weeks for vouchers to arrive by post.

Metro North's General Manager of Health Funding and Analysis Rebecca He led the project to develop Queensland's first digital dental voucher solution.

"Eligible dental patients can now contact private service providers and organise an appointment within two or three minutes," said Rebecca.

"Manual administrative processes were impacting patient care. Once patient eligibility was checked, staff printed a voucher and posted it to patients, which could take a week or more to reach them. Patients then had to contact a service provider to make an appointment, so it could be two weeks or more before someone with a toothache is able to receive treatment.

"With our digital solution there is no more waiting. It's also cut days of paperwork for Oral Health staff."

By using DOVE, patients can now call the Oral Health Centre, have their eligibility verified and receive their voucher via SMS rather than in the mail. It also means the private dental service providers can submit treatment details digitally and redeem vouchers faster.

The result is more responsive patient care and improved levels of patient and provider satisfaction.

"We also have enhanced visibility and control of service delivery and financial impact," Rebecca said.

DOVE launched in June and delivered return on investment in the first 13 days.

In the 2018-19 financial year, Metro North Oral Health expects to issue approximately 18,000 dental vouchers.

Metro North is one of Australia's largest providers of public oral health services, delivering services free of charge to eligible Queensland residents, with eligibility criteria being:

### Adults who hold a current concession card:

- Pensioner Concession Cards issued by either the Department of Veterans' Affairs or Centrelink Health Care Card;
- Commonwealth Seniors Card;
- Queensland Seniors Card.

#### **Children and adolescents:**

- Aged 0-4 years whose parents have a current Centrelink Card, Healthcare Card our Pension Card;
- In Prep (aged over 4 years) through to year 10;
- In Year 11 or Year 12 with a current Centrelink Card, Healthcare Card or Pension Card;
- Child Dental Benefit Scheme eligible patients

To support timely delivery of these services, Metro North can refer patients to a private provider by issuing a voucher.

# Dental program helping the homeless

An innovative program is improving access to public dental services for disadvantaged and homeless adults.

The Priority Access Program is driven by the Oral Health Alliance - a collaboration between The University of Queensland and Metro North Oral Health Services (MNOHS) and combines dental services with research that will determine the program's feasibility, sustainability and acceptability among patients.

UQ Researcher Nicole Stormon said the project is a great way for the Oral Health Alliance to combine strengths of research and service to have a positive impact on homeless adults

impact on homeless adults in Brisbane. "We a for the oral h denta Nurse "It tak develue North like !

"By researching and evaluating this method for reaching out to the community, we are able to prove programs like this are feasible and help disadvantaged and homeless adults access appropriate dental care."

To gauge interest in the intervention, the Oral Health Alliance worked with community organisations to approach homeless and disadvantaged adults who are afraid to reach out for dental assistance because of fear or a lack of finances.

"We aimed to provide a facilitated access pathway for these groups, by incorporating community-based oral health screenings and immediate referral for dental appointments at our facilities," said MNOHS Nurse Manager Safety and Quality Jan Anderson.

"It takes some coordination and collaboration to develop these programs, not only within Metro North but also with homelessness support services like Salvation Army and The Big Issue.

The team ultimately would like to establish a drop-in clinic to ensure that people with dental emergencies who are referred by the emergency department can always have access to specialist care.

"It expanded because the need was there, but this program is ultimately a step towards the main goal of a drop-in clinic," Jan said.



Sandstone Point resident Shirley Livingstone was pleased with the opportunity to attend the new kidney disease clinic at Caboolture where she was seen by Dr Gary Chang.

# New clinic supports patients with CKD

An innovative new health clinic has been established at Caboolture to tackle chronic kidney disease (CKD), a common disease that affects thousands of Queenslanders.

Metro North's Kidney Service Director Dr Helen Healy said CKD often goes under-diagnosed with 90 per cent of people unaware they have the condition until it is well advanced and harder to manage.

"When kidney disease progresses, it may eventually lead to kidney failure, which requires dialysis or a kidney transplant. It can also lead to life threatening cardiovascular conditions," she said.

Dr Healy said there was an increased demand for kidney care in Caboolture, and the number of people with CKD was higher than in areas closer to Brisbane.

"Twenty-five per cent of our Metro North Kidney Service patients, who are diagnosed with CKD, are from Caboolture and the surrounding region," Dr Healy said.

"The new Keeping Kidneys Clinic at Caboolture will primarily focus on identifying people with kidney disease. The earlier we are able to start this work, the more successful we will be in slowing the progression of the disease, and avoid invasive treatments like renal dialysis."

It is anticipated that the outpatient clinic will see up to 200 patients in its first year, with that number continuing to grow.

As part of the care, patients will be treated by a General Practitioner with Special Interest in CKD, with support from a highly specialised doctor (Nephrologist) from the Metro North Kidney Service.

The Keeping Kidneys Clinic is part of a network of General Practitioner with Special Interest Clinics being trialled across Metro North in the areas of epilepsy, breast health, diabetes, orthopaedics, gastroenterology, general surgery, cardiology, and gynaecology.

The new clinic will complement the recently enhanced specialist outpatient service at Caboolture Hospital.

#### HEALTH SERVICE STRATEGY

### **Recovery focused model of care for mental health**

Mental health consumers are experiencing a less stressful transition of care with the opening of Nundah House, Metro North's first alternative to hospital admission facility.

The prevention and recovery short-stay residential facility is based on the innovative 'step up step down' model of care that provides mental health consumers with an option that sits between a hospital stay and community based care.

Nundah House reflects the community's desire to provide a less restrictive type of mental health care. Its personalised and recovery-centred approach not only supports people to manage their illness but helps to build resilience, independence, social connectedness.

Consumers can access the service to prevent the escalation of illness or the need for hospital admission; or they can use the service after spending time in hospital to strengthen their recovery before returning home.

Metro North Mental Health provides clinical care, while mental health organisation Neami National assists with recovery orientated support services to help empower consumers with the skills and confidence to live well in their community.



Planning is now under way to build a six-bed youth 'Step up Step down' facility north of Brisbane. The facility is expected to be built by the end of 2019. This service will extend the continuum of mental health service options available to youth with severe and complex mental health issues and their families and carers with the least possible disruption to their community connections.

#### **Testimonials from consumers**

"Nundah House is a well-established unit for people needing a break from the troubles of normal life. The staff and facilities are wonderful; a very caring and sharing environment. I have found it very relaxing and mindful, which helped me with my recovery on the road to going home. Hospital for me was stressful and, in some cases, scary. Nundah House has definitely helped me through tough times." – Renay

"I was admitted to The Prince Charles Hospital with drug induced psychosis as a result of my ice use. I was placed on medication, which helped, however I found the experience of being in the mental health ward restricted. Upon discharge from hospital I was accepted to Nundah House, which has given me time to think, relax and prepare to enter the world again with new strategies. I now feel confident that I can stay clean and I have found the staff here to be caring, understanding and supportive to my current situation. You're given more freedom at Nundah House, which has helped with me transitioning into the community. I am grateful for Nundah House and what it has offered me." – Steve

"My stay at Nundah House has been relaxing, the food is very nice. The staff have been very supportive, helping and understanding. I prefer Nundah House to the hospital; [it has] more pleasant surroundings and very nice rooms." – Christine

Nundah House provides a therapeutic residential environment and reflects the community's need and preference for innovative mental health services that offer flexible, recovery-focused care, closer to home and to family and friends who can offer support.



# New pathway relieves back pain

For the one in six Australians experiencing debilitating and chronic back pain, a new Metro North initiative is ensuring they receive more timely access to the right health practitioners to manage their condition.

The HIU funded Integrated Care Innovation Fund Back Pain Pathway Project is helping patients by providing more communication, collaboration and coordination to reducing waiting times and ensure patient and practitioner are well-connected.

"The Back Pain Pathway project initiatives support GPs in managing this chronic condition, and supports patients in accessing the services they require" said Nicole Payne, Nursing Director for Outpatient Strategies, COSI.

A vital component of the program is the Healthy Spine Service, consisting of the Spinal Health Hub, which provides a streamlined approach to back pain referrals, the Health Spine Clinic and the Healthy Spine education program.

The service was also the first in Metro North to employ GPs with special interests (GPwSI).

- "The Healthy Spine hub managed more than 4,500 referrals in the first 6 months it was open and 34% of the patients referred were seen by GPs with Special Interest in the Healthy Spine Clinic, located at the Keperra Community Health Centre," said Nicole.
- "These expert GPs were able to discharge 69% of these patients back to the care of their regular GP with management plans and support.
- "Prior to the Back Pain Pathway Project and the Healthy Spine Service commencing, about 40% of patients

with back pain were waiting longer than clinically recommended times to see a specialist," said Nicole.

Through this, patients have benefited from more timely access to appropriate services because, through consistent referral streaming and categorisation, patients are seeing the right health practitioner whether it is a surgeon, a GP with a special interest (GPwSI), Allied Health or their own GP.

"Results show that 500 patients did not require treatment at secondary care facilities and have been managed in primary care," said Nicole.

The program also provides access to the Back Pain education program and better supported management closer to home via telehealth and tele-rehabilitation.



Healthy Spine Service team, Sarah Davoine, Kelly Graf, Dr Scott Masters – GP with Special Interest, Elly Cullen

### Team approach involves patients in decisions

An innovative new model of care is ensuring patients and their families are an integral part of decision making on Medical Wards at Caboolture Hospital.

The Structured Interdisciplinary Bedside Rounds (SIBR) model brings the whole multidisciplinary team together to see each patient every day to provide updates and answer questions.

"At present, patients are often visited separately by hospital staff involved in their care, which can contribute to fragmented care, delays and potentially longer lengths of stay in hospital," said Rebecca Hitchcock, Acting Assistant Director of Nursing Quality and Safety.

The SIBR model helps staff to talk to patients directly and without medical jargon which encourages them to work with the doctor, nurses and specialist staff to develop a plan and goals for the day.

SIBR rounds also incorporate a safety and quality checklist to promote the best outcomes for patients.

Patients and their families are strongly encouraged to contribute and be part of their care and decision making.

SIBR has been rolled out at more than 100 different locations around the world, including Cancer Care Services wards at the Royal Brisbane and Women's Hospital.

At present, patients are often visited separately by hospital staff involved in their care, which can contribute to fragmented care, delays and potentially longer lengths of stay in hospital.



Nurse Mike Arnold, Clinical Nurse Katrina Johnson, Educator Charles Davis and RN Amanda Corser at SIBR Training recently.

#### HEALTH SERVICE STRATEGY

# Supporting patients through their kidney journey

Unknown to most, people living with advanced kidney disease often have a greater symptom burden than those with terminal cancer. Until recently, these people did not have access to supportive or palliative care services unless given a terminal prognosis.

In 2016, Kidney Supportive Care (KSC) commenced across Metro North Hospital and Health Service

Championed by Kidney Service Director Dr Helen Healy, Director Palliative Care Dr Carol Douglas and Clinical Nurse Consultant Ilse Berquier, KSC is provided by an interdisciplinary kidney and palliative care team. Referral to KSC is available earlier in the disease journey with a focus on a patient's symptom burden, complex decisionmaking, carer and family support and advance care planning.

CNC Ilse Berquier said since KSC's commencement, close to 300 patients have been referred.

With specialist symptom management, the majority of reviewed patients showed improvement in overall symptom burden between the first and most recent visit," Ilse said. "People come to us for a variety of reasons; severe symptom burden, assistance with advance care planning and deciding on future treatments."

Ilse said the team also supports people and their families as they near end of life by providing individualised care.

"Most patients have a documented advance care plan by the second visit," she said.

"Importantly, with good advance care planning most KSC patients are able to die in the place of their choosing. This is a very important for many patients and their families."

"KSC has been a long time coming and with experienced team members coming from a variety of disciplines; nursing, social work, pharmacy and medicine KSC patients have access to great quality, evidence based care."

KSC returns a very high level of patient and carer satisfaction, at 96 per cent and 91 per cent respectively.

### **Caboolture Hospital's Ward 4A HALLT Program**

### A simple question has reduced potential clinical incidents and medication errors in a Caboolture Hospital ward.

The HALLT model encourages staff to be aware of their emotions and encourages our naturally caring workforce to step up and show care and support for their colleagues also, by asking themselves and colleagues if they are hungry, angry, late, lonely or tired regularly throughout the shift.

By addressing known human factors, the program has reduced medication errors by15 per cent and total incidents by 35 per cent in the first 12 months.

Nurse Educator Sharon Ragau said HALLT gives staff a quick way to check in. The individual and the team negotiate the ways they will mitigate the risk – from a short five-minute break to go and have breakfast, to the reallocation of care-tasks so the affected staff member is not put in higher risk situations. Having leadership support and openly state that it was okay for staff to accommodate other people's needs in the interest of compassion for our staff and the safety of the patient was a great motivator, Rebecca Hitchcock NUM 4A said.

"We also rolled out training that provided background of the change and explain the acronym with posters placed at key points throughout the ward. We discussed possible team strategies to deal with the HALLT criteria and reduce the humanistic contributors that can cause errors."

HALLT has been used as a self-awareness tool in substance abuse and mental health situations for many years.



### DISTRIBUTION

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Metro North distributes copies of the Quality of Care Report to patients, staff, community members and key stakeholders. This year the report will again be made available to our partners, patients and staff, as well as on our website, www.health.qld.gov.au/metronorth.

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