



Health Service Strategy

2015–2020 | 2017 refresh

Annual Report September 2020

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Overview

In 2015 Metro North Hospital and Health Service (Metro North HHS) released the Metro North Health Service Strategy 2015-2020 (the Strategy). The strategy focused on addressing a range of challenges including increasing demand for services, changing care needs, pressure on existing infrastructure, and the need to maintain a skilled and committed workforce. The Strategy outlined priority actions to be delivered over a five-year period. Through the dedication and commitment of our staff, significant progress was made in implementing priority actions in the Strategy.

In 2017, Metro North reviewed the Strategy to ensure it continued to align with the changing needs of our community and supported the delivery of the Metro North Strategic Plan 2016-2020. The Health Service Strategy 2015-2020 (2017) has provided Metro North with a renewed framework for providing connected, accessible, high quality services that help improve the health of the communities we service while using our resources efficiently and effectively. This refreshed Strategy has four focus areas to guide our health service initiatives and implementation effort. These are:

- Living healthy and well in our local communities
- Delivering person-centred, connected and integrated care
- Effective delivery of healthcare to address growing population health needs
- Responsive holistic healthcare that meets the specific needs of vulnerable groups including but not limited to:
 - » older people including frail older people

- » children
- » young people
- » people with mental illness
- » people with alcohol and other drug dependence
- » people with disabilities
- » Aboriginal and Torres Strait Islander peoples
- » culturally and linguistically diverse communities (CALD).

The report provides a short overview of selected initiatives as well as a summary of measures for each focus area. Metro North has made significant progress in each focus areas whilst remaining under budget for the life of the Strategy. The report is not exhaustive and does not include every initiative that contributed to the significant in-roads that have been made towards meeting the needs of our community and supporting them to remain healthy and well in their local communities and access high quality healthcare when required.

Outcomes

The outcomes that we aimed to achieve through implementation of the Strategy included:

- equity of access and improved health outcomes for all patients, particularly those with complex health and social support needs
- patients, families and carers are empowered to take an active role in managing and improving their health
- the highest standard of care centred around individual needs and preferences that offer the best possible patient experiences as close to home as clinically appropriate whilst supporting efficient service delivery

- care that is connected, coordinated, integrated and promotes continuity, making it easy for patients to navigate the system
- an empowered, compassionate and engaged workforce
- a culture of connectivity, cooperation and working collaboratively with the wider care provider system
- evidenced-based practice in all aspects of healthcare
- staff who are engaged in research, innovating and using technology to improve patient and carer experience and outcomes
- one health service, with multiple facilities and community based services working towards the one goal of high quality, integrated and compassionate care for people.

COVID-19



The COVID-19 pandemic has been a significant event in 2020 impacting on many areas of health care including the needs and expectations of our community, service delivery models, workforce models and more broadly the health system and economy. Whilst the response from government and health services has been swift and effective the disruption to service delivery has seen many initiatives and performance measures altered. A positive from the early experience has been the agile response of Metro North HHS, the adoption of different ways of doing things and supporting our workforce to provide safe and high-quality care through engagement with our community.



Focus areas

1. Living healthy and well in our local communities

The key strategies of this focus area included improving health literacy and inclusiveness for patients and staff by working together in partnership with other organisations; promoting healthy behaviours; focusing on priority health areas and ensuring faster access to tests and results. The following are examples of initiatives that have contributed to achieving our outcomes.

The Metro North Health Literacy Approach was endorsed in 2018 and facilitates a proactive, coordinated and long-term approach to improve health literacy outcomes in Metro North. We have provided staff training on health literacy across the directorates. An enhanced communications program specific to improving health literacy and understanding for Aboriginal and/or Torres Strait Islander patients, families and community has been established through interagency partnerships. An external social media platform has been established to increase consumer engagement and feedback for service improvements. The cardiac rehabilitation program is using health literacy sheets to support their service delivery as are cancer care services who utilise a patient portal to support health literacy and shared decision making. All

Metro North websites have been updated, in partnership with consumers, general practitioners (GPs) and staff for improved navigation and information finding.

Over the five years of the Strategy, Metro North has worked closely with partner organisations to encourage healthy behaviours and make healthy choices easy. Service experience videos have been developed for Hospital in the Home (HITH), community palliative care and post-acute care to enhance and promote service information for consumers and referrers. The Starting Well initiative at Caboolture provides families with support in the community from Caboolture Hospital midwives, Children's Health Queensland, and Brisbane North PHN.



The Health Ageing Expo has been running for four years. The expo encourages the older population to live a full and active lifestyle, physically, mentally and socially. The Expo connects consumers, their carers, family, community, volunteers and staff. In 2019 the Expo included a sustainable living workshop for seniors to learn how to be ecofriendly and set up their home to save money and the planet. Other activities include cooking demonstrations from Nutrition Australia, hearing tests, Tai Chi, a Heart Foundation walking group, fun social games, barefoot bowls, health screening and information sessions for people interested about living and ageing well.

To help staff, patients and visitors make healthy choices easier, healthy food and drink options have been implemented across Metro North HHS, with Caboolture/Kilcoy Directorate being the first

directorate to remove sugary drinks from the facility. The Prince Charles Hospital (TPCH) was the first facility to implement the Room Service Food Delivery model, to support patients to choose their meals to meet their nutritional needs. Staff wellness spaces have also been established at a number of sites including the Lilly Pilly space at Herston.

Metro North has offered opportunistic vaccination programs, for example, Caboolture Hospital provides vaccinations for pregnant women for influenza and pertussis. Influenza vaccinations are provided for all Metro North HHS staff, and for all staff at Woodford Correctional Facility. Health screening programs are offered across the HHS including BreastScreen and the bowel cancer screening program. The bowel cancer screening plan is in its second year of implementation.

Access to faster diagnostics and treatments have also been a focus for Metro North over the last five years, with a moderated Chest Pain Pathway and access to point of care blood testing implemented in Woodford Corrections Health Service, supported by Royal Brisbane and Women's Hospital (RBWH) cardiac telehealth team. Digital x-ray was installed in 14 oral health clinics and 4 dental vans.

Our measures

Staff completing training – there has been a significant increase in the number of staff completing training. 96 per cent of all new starters participated in mandatory induction training in 2018-2019. In 2019-20 many of the training programs were suspended due to COVID-19 and in early 2020 the orientation module was made available online.

Screening programs - breast screening numbers have stayed constant since 2016-17 however there has been a slight decrease (due to COVID 19) in the number of BreastScreen occasions of service performed in 2019-20. The number of breast screens for Aboriginal and/or Torres Strait Islander women has also remained constant. CALD women BreastScreen has increase between 2016-17 and 2018-19.

Potentially preventable hospitalisations - as at March 2020, there were 30,068 potentially preventable hospitalisations separations, 8.2 per cent of all Metro North HHS hospital separations. This has fluctuated between 7.8 per cent and 8.3 per cent over the Strategy reporting period.

2. Delivering person-centred, connected and integrated care

The key strategies of this focus area included an emphasis on holistic approach to healthcare that puts the needs and experience of people (patients, families and carers) at the centre of how services are organised and delivered and empowering people in their own care. The following are examples of initiatives that have contributed to achieving our outcomes.

Metro North has progressed significantly in gathering patient reported experience measures to help inform care and ensure the patients voice is heard. There are nurse navigators located in each Directorate to assist consumers to navigate the health system. A broad range of evidence based integrated care pathways have been implemented across the HHS and with other HHSs to improve care across the continuum and the digital technologies

have been implemented HHS to assist seamless care including implementation of an integrated virtual central patient monitoring system at RBWH, TPCH, Redcliffe and Caboolture Hospitals.

All facilities across Metro North HHS hold events for NAIDOC week. Metro North has held large community events at Caboolture with over 1000 participants and more than 35 stall holders providing health information, resources and cultural support to the community.

Patient, consumer and community engagement continues to be a strong focus in Metro North. Over the life of the Strategy, there has been consistently increasing opportunities to engage with consumers, hear their voices and use their feedback to improve patient outcomes and patient experience. Trials have been conducted of Patient Reported Experience Measures with good outcomes and a raft of feedback to incorporate into our services. Each Directorate has consumer networks which meet regularly and are integral in providing input to service reviews, service planning, infrastructure planning and strategy development. In 2017-18 Caboolture consumer and consumer leads of the Caring

Together Network were awarded a Health Consumers Queensland Partnership Award in recognition of their engagement.

Brighton Health Campus holds frequent health forums where a range of speakers share information on understanding pensions, advanced care planning, Queensland Ambulance Service (QAS), vision and more.

The Brisbane North and Moreton Bay Health Alliance has supported four projects:

1. improving the health and wellbeing of frail older people – building on previous collaborative work across the health sector, the Health Alliance is facilitating change in the way the health system responds to frail older people. They have an outcomes framework and a set of indicators to guide future activity across the sector.
2. supporting people who have complex health needs who frequently attend emergency departments (ED)
3. improving health outcomes for children in Caboolture
4. better utilising system wide data.



improving the health and wellbeing of frail older people



Supporting people who have complex health needs



Improving health outcomes for children in Caboolture



Better utilising system wide data

Over the last 5 years 57 projects have been awarded LINK or SEED funding. These projects have ranged from investigating the effect the environment and design of intensive care bed space has on patient outcomes and the cognitive burden of admission, through to a community based dual diagnosis day program for young people, through to a partnership program for Diabetes and Chronic Kidney Disease.

Our measures

Consumers participating in committees and working groups

- the total number of consumers participating in committees and working groups has remained constant at approximately 100 across Metro North. The range of activities in which consumers are

involved has expanded over the duration of the Strategy.

Patient experience survey - there are currently three standardised patient experience surveys being used in Metro North (Metro North Patient Experience for inpatients and outpatients (formerly named CaRE) across all directorates except Mental Health, Mental Health Services Your Experience of Service (YES) survey and Alcohol and Drug Service - Client Satisfaction Service). Patient participation has increased from approximately 1800 in 2016 to more than 11,000 in 2019-20. The methods of collecting and reporting patient experience measures has changed each year reflecting the growth in patient participation and refinement of measures based on patient

feedback. In 2019-20 more than 45,000 patients were invited to complete a patient experience survey and over 7,000 patients participated.

Uptake of integrated pathway - an increase in the implementation of integrated health care pathways from 60 health pathways in 2016-17 to 548 pathways in 2019-20.

Utilisation of telehealth services - has increased by 55 per cent in 2019-2020 from the previous year.



3. Effective delivery of healthcare to address growing population health needs

The key strategies of this focus area included improving timely access to the right care, at the right time in the right place and as close to home as possible and services being evidenced based, high quality and effective with new facilities and technology to provide care to the growing needs of our community. The following are examples of initiatives that have contributed to achieving our outcomes.



There has been a focus on reducing variation in clinical practice to improve patient outcomes. The use of digital technology has been in clinical areas to improve access to services includes the CardiHub app – an app based on cardiac rehabilitation education and exercise program that consumers can download and complete in their own time.

Projects and patient pathways have been implemented with QAS over the five years of this Strategy. Program to assess patients for transport to hospital or referral to community services for assessment including a QAS referral assessment nurse navigator has been established to support alternatives to transfer to hospital in the patient access and coordination hub (PACH). The

Medically Authorised Transport Initiative typically assesses 30-40 patients per day to identify an alternate to presentation at emergency, including options for direct admission if appropriate.

Planning has continued for the opening of the Surgical Treatment and Rehabilitation Service (STARS), with the building being completed in late 2020 and services commencing in February 2021. Redcliffe and Caboolture Hospitals have additional operating theatre rooms and have established dedicated emergency theatre sessions. Caboolture Hospital also had the interim ED expansion completed providing 16 new treatment spaces, three new triage assessment rooms, dedicated assessment areas for paediatric and mental health patients and refurbished the

existing waiting room reception and triage. The mental health short stay unit also opened at Caboolture Hospital, providing brief interventions for people presenting with acute mental health concerns.

Metro North has focused on transitioning services to be provided in the community or home-based as opposed to in hospitals. The Mental Health Acute Care Teams have increased their functionality to provide acute home base assertive outreach, reducing the need for these consumers to be admitted for care. TPC and Community and Oral Health Directorate were trialling a Transition to Home program, designed to facilitate timely transfer of older patients' home where ongoing care and assessment is provided by

community-based services. In partnership with Brisbane North PHN, alternate models of fracture care were established to direct appropriate musculoskeletal injuries to primary care.

To support patient flow a range of strategies have been implemented. Allied Health have implemented a number of extended scope initiatives such as the high risk foot management practices, expansion of physiotherapy administration of medicines, pharmacist-initiated opioid de-escalation and the ED pharmacist role. The Heart and Lung stream have trialed a criteria-led discharge tool and a GP with special interest in the cardiology clinics at TPCH. Cancer care services have implemented

minimum referral criteria with general practitioner liaison officers to standardise referrals and reduce delays in assessment.

Palliative care services implemented a new model of care to increase their capacity to deliver care in the home, supported by a community-based specialist approach including medical consultant services. A stand-alone palliative care service commenced at Caboolture Hospital with the commencement of a palliative care consultant and nurse practitioner. Palliative care services have also been delivering culturally centred care education to assist health professionals care for Aboriginal and Torres Strait Islander people and CALD people who are approaching end of life.

Metro North has established a significant number of new services over the last five years. The RBWH established a gender service comprising of medical, psychiatry, social work, psychology, speech pathology and administrative services. Extracorporeal Membrane Oxygenation (ECMO) service commenced at RBWH as a service to critically ill patients. Also at RBWH, Endovascular Clot Retrieval Services commenced in 2018-19 for all clinically suitable patients from Metro North.

Redcliffe Hospital introduced Hydrocortisone Local Anaesthetic clinics to reduce patient waiting times. The Caboolture Young Mothers for Young Women opened and assists young,



pregnant and parenting women, aged 20 years and under, along with their children and families. The program provides peer and professional support to women in practical ways, allowing women to participate socially within their community. Telehealth outpatient clinics were established for residents of Woodford Correctional Facility. A Chronic Wound Outpatient Clinic was established at Caboolture Hospital.

Moreton Bay Integrated Care Centre Cancer Service increased from 10 to 16 chairs for chemotherapy and infusion services. There was an increase in the number of GPs with special interest initiatives across the HHS including in outpatient clinics, neurology, cardiology and diabetes. Robotic Surgery services expanded at both RBWH and TPCH.

Metro North provides a range of tertiary and quaternary services to people from across Queensland and northern New South Wales. A new brain injury rehabilitation service was established at Brighton for patients deemed “slow to recover”, accepting patients from as far north as Townsville. A new statewide bariatric service was established at RBWH and Stem Cell Transplantation Haploidentical Transplants statewide program commenced. Telehealth models have been put in place for statewide haemophilia services direct to patients’ homes, haematology consultations from RBWH to Bundaberg Base Hospital and Hervey Bay Hospital and tele-chemo service between RBWH and Longreach. Metro North has also increased the utilisation of telehealth to support and improve access to services between our

own facilities and sites such a tele-chemo to North Lakes and Kilcoy. The TPCH Sleep Disorder Centre has introduced remote monitoring of treatment for patients on Queensland Health Sleep Disorders Program Continuous Positive Airway Pressure (CPAP) devices.

The skin culture centre opened at RBWH enabling the growth of patient’s own skin. This will increase the use of autograft treatment of burns, and is expected to improve survival rate, reduce recovery time and improve patient recovery. Genetic Health Queensland (GHQ) is undertaking two projects to investigate the potential for rapid triage (neonates and parents) whole genome sequencing as a first tier genetic diagnostics test for children in paediatric and neonatal intensive care units, as well as investigating a cohort of children referred to GHQ who have a suspected rare monogenic disorder. The Herston Biofabrication Institute opened to advance knowledge and technology in 3D modelling and 3D printing of medical devices, bone, cartilage and human tissue. The Jamieson Trauma Institute opened to bring together a unique collaboration of service partners, striving to advance trauma prevention, research, systems, and clinical management to deliver the best possible care for people who suffer a traumatic injury.

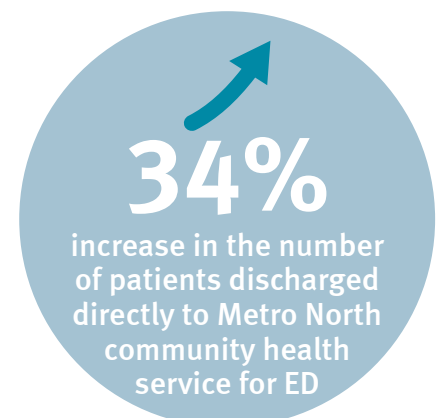
Our measures

Wait times for specialist outpatient services - there was a consistent decrease in the long waits from 2016-17 to 2018-19 however in 2019-20, there has been an increase in long wait patients for outpatients due to the impact of COVID-19.

Discharge summaries – completion of discharge summaries within 48 hours across Metro North has increased from 64.2% to 67.2%

Care close to home - 57 per cent of patients who resided in the Redcliffe Hospital catchment received their admitted care at Redcliffe Hospital in 2019-20, a slight increase from the previous year of 56 per cent. 59 per cent of patients who resided in the Caboolture/Kilcoy Hospital catchment received their admitted care at their local hospital in 2019-20 an increase from previous year of 54 per cent.

Patients discharged directly to community services from ED - a 34 per cent increase in the number of patients that were discharged directly to Metro North community health services from the ED between 2016-17 to 2019-20.



4. Responsive healthcare that meets the high health needs of identified groups

Older people and frail older people

The key strategies of this focus area included enabling older people to be active, engaged and independent at home; implementing evidence based models of care and providing timely, high quality end of life care. The following are examples of initiatives that have contributed to achieving our outcomes.

In 2017-18, implementation of the joint Brisbane North PHN and Metro North HHS: A five-year health care plan for older people who live in Brisbane North commenced. Metro North aim is provide a coordinated, networked service system to help as many older people as possible remain in their home environment, connected with their communities and supported by general practice

and other community services.

The Residential Aged Care District Assessment and Referral (RADAR) outreach service has been implemented across all facilities and provides clinically appropriate alternatives to admission for residents of residential aged care facilities (RACFs). The “Yellow Envelope Initiative” was implemented across Directorates to enhance information sharing on discharge, particularly with the GP and RACFs. Metro North also had a focus on increase the number of advanced care plans in place and reviewing end of life care pathways to improve patient experience and access to appropriate levels of care and support.

Our measures

Timely identification of people over age of 75 who are frail - the completion of clinical ‘Clinical Frailty Assessments’ for patients over the age of 75 has ranged from 52.6 per cent to 65 per cent.

People over age 75 discharged to same address - RBWH and Redcliffe Hospital at times have met the 80% target and Caboolture and TPCH have been over 70 per cent.



Children and young people

The key strategies of this focus area included enhanced capacity of services in Metro North to enable optimal health and services provided close to home. The following are examples of initiatives that have contributed to achieving our outcomes.

The Women’s and Children’s steam have commenced a needs assessment of children and young people who require mental health services in our HHS presenting to ED. There have been service enhancements or developments in fracture clinics at TPCH, increased capability for low risk surgery to children above the age of 12 at TPCH, separate child protection services at Redcliffe, Caboolture and Kilcoy Hospitals, paediatric orthopaedic surgery at Redcliffe Hospital, provision of ENT surgery and outpatient clinics at Caboolture Hospital, provision of outreach ophthalmology services cross Metro North HHS and



provision of neonatal screening across select sites.

The Sony You Can Centre opened at RBWH in 2019 to provide cancer patients with age appropriate specialist youth cancer services. Oral Health is collaborating with Children's Health Queensland (CHQ) community and child health nurses to screen and refer at risk children and established a fluoride varnish application program targeting high risk students. Metro North in partnership with CHQ are looking at increasing access to Child development services in the north of the HHS. The Children of Caboolture operational group, which has membership from Metro North HHS, CHQ and Brisbane North PHN, is focusing on linkages between maternity, child health and child development in the Caboolture region.

Our measures

Access to children's services - overall self-sufficiency rate for children living in Metro North and receiving public hospital care in Metro North HHS hospitals has increased from 55 per cent (2016-2017) to 73.8 per cent in 2019-20.



People with mental illness and/or alcohol and drug dependence

The key strategies of this focus area included leading evidenced based quality care; increasing access to recovery focused services; holistic approach to health and partnerships. The following are examples of initiatives that have contributed to achieving our outcomes.

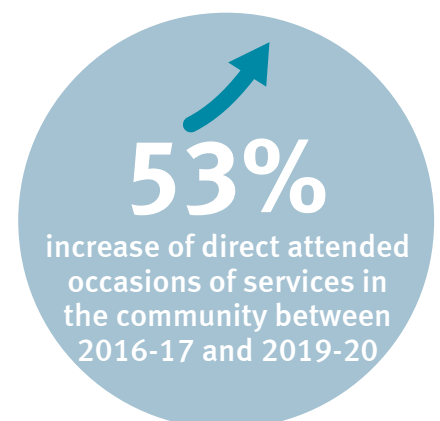
Metro North has focused on providing timely and coordinated care for people with mental illness and/or alcohol and drug dependence. In Caboolture and Redcliffe community based safe spaces were established for those that experience distress related to their psychosocial needs to reduce presentations to local emergency departments. Nundah House opened and provides short term psychosocial mental health care as an alternative to admission and the Caboolture youth Step Up Step Down beds opened. The Health Alliance Connecting Care in ED and the Consultation Liaison Psychiatry service both at RBWH also provided alternatives to admission for people with mental illness. A co-responder approach with police was implemented to prevent presentations to ED for people with mental illness. Oral health services have increased the number of

student run dentistry clinics in community mental health services where they provide screening and education about oral health.

In partnership with the PHN, the Way back Support Service delivers non-clinical support coordination and care navigation, in addition to clinical counselling to people in the Redcliffe region who have made a suicide attempt or experienced suicidal crisis. "Planning for Wellbeing" was launched in October 2018 and the regional plan for mental health, suicide prevention and alcohol and other drug treatment. Sponsored by Brisbane North PHN and Metro North and developed in consultation with people with a lived experience, providers and other stakeholders, the Plan sets out to improve the quality, coordination and integration of services. All the services commissioned by Brisbane North PHN are consistent with the regional plan and contribute to meeting objectives in the plan.

Our measures

Access to community based services - there was 53 per cent increase (180,800 to 275,952) of direct attended occasions of services in the community between 2016-17 and 2019-20.



People with a disability

The key strategies of this focus area included empowering people to be active participants in their care and delivering equitable, accessible, holistic, individual, tailored, coordinated and integrated care. The following are examples of initiatives that have contributed to achieving our outcomes.

People with a disability often have diverse, complex and unique health, social and emotional needs. Brighton has established a Wellness Hub that connects the community to health services.

There have been numerous education sessions for NDIS participants to improve health literacy. National Disability Insurance Scheme (NDIS) pathways are well developed with frequent collaboration with the National Disability Insurance Agency (NDIA) to improve seamless transition between sectors. The Nurse Navigator – Watching Our Waits actively monitors patients who require or are waiting for NDIS package as an inpatient and assist and link where appropriate.

Our measures

Participation - consumers with disabilities continue to be involved in the Health Literacy steering committee and working groups; are represented on the new MY ROLE (Registry of Lived Experience) network for Mental Health Services and have representation the RBWH Diversity Committee.

Aboriginal and/or Torres Strait Islander People

The key strategies of this focus area included working with Aboriginal and/or Torres Strait Islander people to plan, design and deliver health services in a holistic, comprehensive and culturally responsive way. The following are examples of initiatives that have contributed to achieving our outcomes.

Metro North has built and strengthened relationships with a number of Aboriginal and/or Torres Strait Islander peak organisations to deliver services which reflect local health needs. We have partnered with the Institute of Urban Indigenous Health (IUIH) and local elders to increase access to oral health services. The Oral Health services also partnered with respected community elders to produce a hip-hop video highlighting the importance of good oral health and strong teeth. Another partnership with IUIH is the Birthing in Our Community model (BiOC) to enhance service delivery within Ngarrama Maternity.

The Lighthouse project at TPCB has successfully delivered the Murrumba healing garden, patient journey videos, artwork and the Australian Institute of Aboriginal





and Torres Strait Islander Studies “Map of Indigenous Australia”. RBWH commenced the Ngarrama post-acute care service and relocated the Indigenous Liaison Service to a newly designed location.

Caboolture Hospital had a third Indigenous Health Liaison Officer commence to support emotional, cultural and social support for patients and their families. Redcliffe Hospital has implemented strategies to support Aboriginal and/or Torres Strait Islander people’s health needs in areas such as reducing smoking during pregnancy and discharge against medical advice. COHD implemented cultural capability audits across the service to identify quality improvement opportunities and established the workforce “Staff Yarns” network. Cancer Clinical stream implemented opportunistic screening for Aboriginal and/or Torres Strait Islander people whilst in hospital or in community health settings. The Building Engineering and Maintenance Service

implemented two apprenticeships for Aboriginal and/or Torres Strait Islander people and Metro North implemented the school based trainee program. All Directorates have Action Plans on how they will contribute to closing the gap in health outcomes for Aboriginal and/or Torres Strait Islander people.

The Better Together Plan is being implemented and is overseen by an executive committee with membership of our Aboriginal and/or Torres Strait Islander staff and partner organisations. A key initiative in 2019-20 was the launch of the Better Together Health Van with tele-health capabilities in addition to a clinical space and screening equipment.

Indigenous Nurse Navigator roles established at Community and Oral Health, Mental Health, The Prince Charles Hospital, The Royal Brisbane and Women’s Hospital and Caboolture and Redcliffe Hospitals to enhance a seamless transition across the patient journey.

Our measures

Participation - an Aboriginal and/or Torres Strait Islander community representative is a member of the Board Community Advisory Committee. There were a number of Aboriginal and/or Torres Strait Islander community and consumer representatives at the Board Community Engagement Forum in 2019 providing input into new Metro North Strategic Plan 2020-24. Indigenous community representatives presented alongside clinicians from Caboolture Emergency Department on how they are building community connections to improve access to ED. COHD and Caboolture Hospital have engaged Aboriginal and/or Torres Strait Islander communities through community outreach, community events, yarning circles and as participants in working groups developing of Reconciliation Action Plans. Significant input into the design, artwork and way finding for STARS.

Culturally and Linguistically Diverse (CALD) Communities

The key strategies of this focus area included working with CALD representatives to plan, design and deliver holistic, comprehensive and culturally responsive health services. The following are examples of initiatives that have contributed to achieving our outcomes.

In January 2018 the first Metro North HHS Cultural Diversity Coordinator commenced. The role focuses on delivery of cultural responsive services, workforce cultural capabilities, culturally tailored patient experience measures and consumer engagement and preventive health for CALD communities. In 2017-18, 15 culturally and linguistically diverse groups participated in the Health Women's Breast Screening initiative, which involved designing resources to encourage breast screening for women from diverse cultural backgrounds. Oral Health have implemented refugee specific clinic days with referrals from refugee case workers fast tracked. Relationships with CALD communities and peak organisations have been strengthened with a range of joint

initiatives with Ethnic Communities Council of Queensland (ECCQ), Co.As.It and World Wellness Group. Welcome to hospital videos with the option of audio and subtitles in nine languages other than English have been developed. A CALD Needs Assessment Data Report was undertaken to improve the knowledge and awareness of CALD communities across Metro North HHS.

Our measures

Participation - during the life of the Strategy there has been significant uptake of new staff resources on working with CALD communities on the intranet (QHEPs). A CALD community representative is a member of the Board Community Advisory Committee. There was CALD community and consumer representation at the Board Community Engagement Forum for input into new Metro North Strategic Plan 2020-24. The RBWH Diversity Committee now has representation by a CALD consumer. There is continued involvement of a Consumers from CALD backgrounds involved in Health Literacy steering committee and working groups.



Summary

The Strategy has provided Metro North, the community and our partner organisations with direction on the key strategies and actions to support people to live healthy and well in their homes, access person-centred, connect and integrated care that is delivered effectively and efficiently and is responsive to the needs of all of our community groups. There has been commitment and active implementation of initiatives to achieve positive outcomes for patients, families and carers across Metro North. This Strategy provides a platform to develop a new five year strategy which will continue to guide delivery of health services in Metro North.



