

Caboolture Hospital Paediatric Review

Individual recommendation response

Recommendation	Metro North response
Emergency Department attendances are increasing for children, with 47.8% (in 2023) in children aged 4 years or less.	
<p>1. Develop a 24-hour paediatric triage within the internal waiting area supervised by nursing staff</p>	<p>It is recognised that attending any Emergency Department can be distressing, particularly for children and young people. To streamline paediatric access, ensure paediatric and adolescent patients/families are managed in a dedicated and appropriate space, and reduce potential distress, a separate and dedicated paediatric triage and waiting area managed by Paediatric Emergency Department (PED) nursing staff was commissioned and implemented from 1 July 2024, within the Caboolture Hospital Emergency Department (ED).</p> <p>This separate PED triage was established within the constraints of the building with consumer consultation.</p>
<p>2. Appointment of a specialist paediatric emergency physician as the Clinical Lead in paediatric emergency medicine for clinical work and leadership on the floor (0.5FTE) and leadership in education, policy/procedures, recruitment, academic functions, safety and quality assurance (0.5FTE)</p>	<p>Caboolture's younger population has increased substantially, which requires paediatric specialist care to be available at Caboolture Hospital, with appropriate leadership and educational resources. To achieve this, a Paediatric Clinical Director has been recruited and is due to commence in September 2024.</p> <p>Additionally, an Associate Nurse Unit Manager has been appointed to work in partnership with the Clinical Director to provide governance to the PED within the ED structure.</p> <p>A PED medical roster has been developed to ensure the availability of a designated consultant (PEM/FACEMS with paediatric experience) 7.30am to 11.30pm each day. This roster includes Paediatric Nurse Practitioners to support paediatric care.</p>
<p>3. Dedicated paediatric emergency medicine education for all staff incorporating team-based simulation and skills relevant to paediatric emergency medicine and a dedicated paediatric clinical nurse educator</p>	<p>As part of establishing the paediatric specialist offering at Caboolture Hospital, an Executive Paediatric Steering Committee has been established to shape and recognise Paediatrics as a distinct specialty. The Executive Paediatric Steering Committee has a focus on environment, equipment, workforce, and education.</p> <p>Paediatric recognition will be strengthened through Metro North Health's Year of Children, Adolescents and Young Adults launched on 8 July 2024 which focuses on the 'first quarter of life', from neonates to young adults, to reposition and highlight the importance of child health in preventing disease later in life.</p> <p>The education framework for Caboolture Hospital ED nursing staff has been revised to specifically focus on the paediatric skills development. This framework is actively being implemented and includes all ED nursing staff undertaking the Transition to Specialty Practice program which includes statewide paediatric training. Caboolture</p>

	<p>Hospital has also implemented the OPTIMUS CORE training for all ED Nurses, followed by OPTIMUS PRIME, and OPTIMUS PULSE for nurses working specifically in the PED. The OPTIMUS courses are developed by Children's Health Queensland and are focused on recognition of sick patients/children, escalation of care and management of deteriorating or critically unwell children.</p> <p>The Caboolture Hospital Paediatric Nurse Educator with the ED Nurse Educator supports education across paediatric services including the ED. The Paediatric Nurse Educator role is currently under recruitment following a recent vacancy.</p> <p>Simulation and Multidisciplinary training are undertaken within the ED, led by the medical and nursing education leads. Following the recruitment of the Assistant Nursing Director and Paediatric Nurse Educator, a process for simulation across paediatric services and MET responders will be further developed.</p>
<p>4. An emergency consultant should be rostered to the paediatric ED for peak periods and should be considered in the future from approximately 8am to approximately 1130pm seven days a week</p>	<p>Paediatric care requires a care approach that is specific to the developmental stage of young people and considers the unique needs of the child and their parents/carer.</p> <p>The Paediatric Medical roster has a designated consultant between the hours of 0730-1130hrs Monday to Sunday. After these hours there is a designated doctor for the PED and an on-call consultant available for rapid response.</p>
<p>5. Acknowledgment of the potential for pain and distress experienced by children and their parents/carers through medical procedures a. Early pain scores at triage b. Enable rapid and safe administration of analgesia (this requires the weight of the patient) c. Avoid restraint where practical d. Utilise distraction (video, audio, printed) and/or child-life specialists for procedural distress e. Develop safe sedation practices including pharmacological agents such as: • Nitrous oxide (preferably via a continuous flow device) • Ketamine • Propofol</p>	<p>Caboolture Hospital staff aim to provide a positive experience for children and their parents/carer and the reviewers' feedback on this is valuable.</p> <p>Caboolture Hospital is concerned about pain management in children and has developed tools to ensure that all modalities and therapeutic options for pain management are considered for every child.</p> <p>Caboolture Hospital also has available quick reference tools (that have been developed by clinicians) to ensure the consideration of all therapeutic options and appropriate dosing.</p> <p>Caboolture Hospital works within a Paediatric Procedural Sedation Protocol to ensure early, appropriate and effective management of sedation-requiring situations. This ensures the avoidance of restraint wherever possible.</p> <p>Pain management measures, including those outlined in recommendation 5, will continue to be made available to children through the triage and assessment processes at Caboolture Hospital. The implementation of a separate Paediatric Triage has complemented these services and enable targeted child friendly approaches to pain management and responses to provide quality care.</p> <p>Alternative distraction therapies are under review for further implementation with the new clinical leadership team in PED.</p>
<p>Performance measures are not specific to children. Data related to adults and children is generally combined, reducing the visibility of important paediatric issues. While time-based performance measures in hospitals are relevant, there are clinical performance measures that can be implemented and reported upon.</p>	

6. Separate reporting of data pertaining to adults and children presenting to Caboolture Hospital ED	Current reporting provides a range of metrics including paediatric care to support ongoing monitoring and review of service requirements. Caboolture Hospital and Metro North Health review paediatric ED data separately both daily and monthly. To further enhance and enable this review a range of tailored paediatric reporting dashboards are being developed.
7. Identify meaningful performance metrics for Paediatric Emergency Medicine in Caboolture ED. Examples: a. time to antibiotics in children with a presumed diagnosis of sepsis [stratified by age] b. provision of an asthma management plan to discharged children with a diagnosis of asthma c. notification of an Indigenous Health Liaison Officer for families who identify as indigenous	<p>Caboolture Hospital is committed to ongoing continuous improvement and the Executive Team regularly monitors a range of performance measures and indicators, based on data analytics.</p> <p>The feedback from reviewers regarding the types of indicators and measures to include in the paediatric reporting dashboards will inform ongoing monitoring and evaluation, in addition to national and international performance metrics for Emergency Medicine.</p> <p>Caboolture Hospital has implemented a process where cultural support is initiated at triage unless the person/family declines.</p>
8. Having done the above, create an evaluation framework to assess progress and implementation	Current evaluation tools and frameworks will be reviewed and adapted to ensure appropriate monitoring to assess progress and support further improvements.
Paediatrics is not adequately recognised as a specialty within Caboolture Hospital and in the Metro North HHS	
9. Paediatrics and Child Health representation in Executive meetings to be expected and supported by adequate clinical support time	All Caboolture Hospital executive meetings include a mix of multidisciplinary professional leads. There is paediatric representation in all leadership meetings (Medical Director, Paediatrics, Nursing and Midwifery Director Women, Childrens and Families), which will be expanded to include the Assistant Nursing Director – Paediatrics, and Clinical Director – PED where appropriate.
10. Development of a separate CKW Paediatrics and Child Health Service Line that encompasses all elements of the child and their healthcare journey. Examples include: a. Operations manager of Paediatrics and Child Health b. Medical and Nursing Directors of Paediatrics and Child Health (with management and paediatric clinical experience) c. Director of Paediatric Allied Health d. Consumer Advisory Group (CAG) sub-committee for Paediatric and Child Health	An Executive Paediatric Steering Committee has been established to shape and recognise Paediatrics as a distinct specialty with a focus on environment, equipment, workforce, and education. The review team's examples are noted and will be considered through the planning and development phase, alongside peer review and benchmarking.
11. Integration of the Consumer Advisory Group into strategic planning partnerships building upon highly innovative consumer engagement initiatives and demonstrable gold standard examples showcasing the power of partnering with consumers	Caboolture Hospital is committed to hearing and learning from the voice of consumers. A Paediatric and Child Health Advisory Group, co-designed with consumers, will be established at Caboolture.

<p>12. Equity in Allied Health recruitment so that developmental outcomes in all domains can be improved</p>	<p>Paediatric care requires a multidisciplinary approach. To ensure there is timely access to Allied Health services for paediatric patients across Caboolture Hospital, a gap analysis has been undertaken to determine paediatric service opportunities. This gap analysis is now being used to inform the future Paediatric Allied Health services at Caboolture Hospital with consumer and clinician involvement and collaboration.</p> <p>A trial of the co-designed approach to triage “Responsible and Holistic Connected Healthcare for Paediatrics” has been successful and will inform this work.</p>
<p>13. Building on an innovative developmental screening clinic (First Contact Triage clinic), engaging with consumers on a suitable local model for expansion of this and integration with other high priority needs (e.g. behavioural assessments)</p>	<p>Understanding and assessing developmental needs is critical in ensuring the delivery of quality care.</p> <p>As part of the establishment of the separate Caboolture Hospital PED Triage, an analysis of screening requirements will be undertaken to support development of models of care with a focus on children with behavioural needs.</p>
<p>Child Protection</p>	
<p>14. Redevelopment of the Child Protection Unit, bringing it into the Paediatric Service under the leadership of an acknowledged child protection specialist (paediatric medical or social work) a. Integration of child protection into the paediatric emergency department and children’s ward b. Design of a functional and safe space for assessment of these vulnerable children and their families where confidentiality is maintained and culturally and age-appropriate forensic assessment can occur</p>	<p>Caboolture Hospital acknowledges that children and families interacting with the Queensland’s child protection system have unique health and social support needs. It is important for health workers to adopt a trauma-informed approach to working with children who are being assessed for, or receiving, child protection services.</p> <p>The Caboolture Hospital Child Protection Unit (CPU) was relocated to a separate area within the Paediatric Ward footprint in May 2024 to ensure the close collaboration of the teams to provide the best treatment for children requiring these services. A paediatric consultant was appointed as a clinical lead within the team in March 2024.</p> <p>The Forensic Medical Examination (FME) room was relocated into the paediatric outpatient department immediately upon notification by the review team (February 2024). The area the space has been relocated to is a joint care area within the paediatric space that has accessibility via a separate entry, and separate parking to decrease the impost of needing to enter through busy spaces on the child and family.</p> <p>An analysis reviewing the CPU and other statewide services is progressing to inform further improvements in this service.</p>
<p>15. Reconfigure office spaces of the Child Protection Unit to allow for private viewing and discussion of cases, ensuring confidentiality and focus.</p>	<p>Refer 14 - complete</p>
<p>16. Embed clinical supervision for staff working in Child Protection Unit (CPU).</p>	<p>Caboolture Hospital and Metro North Health will review the clinical supervision models across CPU services in Metro North to ensure all staff are provided support.</p>
<p>17. Establish a formal debriefing program to facilitate structured and supportive discussions post-case handling</p>	<p>All staff have access to the Employee Assistance Program, Staff Psychologist and peer responder models at all times.</p> <p>Caboolture Hospital will review the formal debriefing practices across CPU services at Metro North Health to ensure that debriefing is being implemented in line with the post critical incident staff support guideline, and that staff are accessing these services as required.</p>

<p>18. Explore opportunities for collaboration with other hospital services to create a network of support and learning.</p>	<p>Metro North Health participates on the statewide Child Protection Clinical Partnership which provides a mechanism for collaboration amongst the Queensland Health child protection workforce across Hospital and Health Services. The partnership is hosted by Children’s Health Queensland.</p> <p>The Assistant Nursing Director Paediatrics will work with the CPU Clinical lead to ensure that the Caboolture Hospital CPU actively participates in the Metro North Health Community of Practice for CPU.</p>
<p>Disability services are not meeting the needs of the community</p>	
<p>19. Design a developmental service and implementation strategy, collaborating with other organisations:</p> <p>a. develop an evidence-based service at Caboolture that provides clear pathways for screening, diagnosis, early intervention, parent training and support. b. Co-design processes to ensure the service meets the needs of all stakeholders. This includes: i. Consumers and persons with lived experience ii. Developmental disability experts iii. Developmental and General paediatricians iv. Paediatric nurses including nurse navigators and advanced practice nurses v. GPs vi. Allied Health professionals vii. Administrative staff c. Initiate inter-agency discussions with Education, Human services and NDIS and create a memorandum of understanding between relevant stakeholders d. Initiate inter-agency discussions with local disability support services to understand and enable referrals to local services</p>	<p>In recognition of the cross-agency requirements and interdependencies of the recommendations, immediate work is being undertaken to establish a Children of Caboolture Collaborative which will include a broad range of representatives including consumers, the Brisbane North Primary Health Network, the Moreton Bay Council, Education, Disability Sector, Institute of Urban Indigenous Health to consider how best to design a developmental service.</p> <p>This strategy will build upon the long-term commitment Metro North Health has demonstrated to working across agencies to improve health outcomes for children and families through the Moreton Bay Children’s Partnership which has identified a need to take a place-based multi-agency approach to address needs, increase access to community-based allied health and child development services, and support families through integrated hubs and community connectors.</p> <p>In addition, Caboolture Hospital will implement a Paediatric and Child Health Advisory Group to inform care and service development.</p> <p>In addition, Metro North Health is currently in the process of establishing a Disability Focussed Interagency forum with Carers Queensland with the first meeting proposed for 1 August 2024.</p>
<p>20. Create a lived-experience advisory panel to co-design and develop: a. inclusive communications campaigns and accessible feedback channels. b. identification processes and training for the triage and admission process. c. communication supports to prepare children with disabilities and their families for hospital visits (e.g. visual communication supports to explain common procedures) d. a paediatric-specific Health Passport (Adapted version of Julian’s Key) e. a schedule of disability focused training with lived experience experts f. trauma informed</p>	<p>The knowledge of people with a lived experience is critical in understanding how to develop best practice approaches. Following establishment of the Children of Caboolture Collaborative, sub advisory panels will be established to support and drive improvements to paediatric healthcare.</p> <p>In addition, Caboolture Hospital will implement a Paediatric and Child Health Advisory Group to inform care and service development.</p>

<p>guidelines for working with children with disabilities g. development of all new physical spaces in new outpatients and all future redevelopments</p>	
<p>21. Create disability navigator roles (potential for lived-experience role). a. Create criteria for identifying children and families with disabilities and procedure for accessing disability navigators. (See Aboriginal and Torres Strait Islander Traffic Light System) b. Educate all staff on roles and procedures</p>	<p>It is recognised that children and families with disabilities may have increased difficulties accessing healthcare.</p> <p>This recommendation aligns to KPI 1.1.5 in the Metro North Disability Services Action Plan. This recommendation also aligns with Disability Royal Commission recommendations, and National Disability Insurance Scheme proposed changes to foundational support.</p> <p>Metro North Health is committed to improving care pathways by co-designing appropriate procedures and education to support children and families accessing care at all facilities.</p> <p>The Department of Health is exploring Disability Liaison roles and implementation approaches to inform development.</p>
<p>22. Create a co-design working group to adapt the Metro North Health Disability Services Action Plan to create site-specific, paediatric-specific actions and key performance indicators.</p>	<p>Caboolture Hospital is in the process of establishing a local Diversity Working Group, that will be responsible for the implementation and co-design the solutions of the Disability Service Plan KPIs. This will include consumers with specific child and youth lived experience or knowledge (parents or young adults).</p>
<p>23. Publicise Caboolture’s commitment to improving disability services and provide the community with updates on progress.</p>	<p>On 14 March 2024, Caboolture Hospital hosted the Disability Services Action Plan launch which was well attended by community members.</p> <p>Metro North Health, including Caboolture Hospital, utilises a range of media platforms to provide information and advice, promote our services and patient and staff experiences. Following establishment of the Children of Caboolture Collaborative, the work program will include actions around best options to promote the improvements being made.</p>
<p>Paediatric Outpatients is not fit for purpose</p>	
<p>24. A purpose-built paediatric outpatient centre at Caboolture Hospital was welcomed by the review team. This needs consumer co-design collaboration from the beginning. a. From a parent, “Take note of parents. They are the knowledge holders for their children. Trust they know their children and the needs. Listen to concerns and work together.”</p>	<p>In February 2024, the Metro North Hospital and Health Service Board committed \$15 million to deliver a new Paediatric Outpatients Centre.</p> <p>Caboolture Hospital will continue to work collaboratively with community members to shape the design and services offered at the outpatient centre as well as supporting models and approaches which will continue following opening. A co-design framework has been developed to support this.</p>
<p>25. Development of modern clinic practices with roles for integration of allied health and nurse led</p>	<p>Metro North Health has recently implemented seven rapid access clinics and will establish its first nurse led clinic in Brisbane City. These clinics will inform future opportunities to develop alternative models of care at Caboolture Hospital.</p>

clinics with the recognition of the potential for telehealth to be integrated.	Metro North Health has well-established telehealth and virtual care services and will review opportunities to further expand these technologies and services to support paediatric care for children and young people who live in the Caboolture area.
26.Utilisation of appropriate referral systems so that GP referrals are efficiently identified and triaged	Metro North Health's referral systems are based on statewide guidelines and systems. However, in line with Metro North Health's commitment to ongoing improvement, as the largest Hospital and Health Service we actively advocate to improve the patient's care journey.
27.Approaching subspecialist services at Metro North HHS and Queensland Children's Hospital to discuss the potential of outreach clinics at Caboolture	Refer to 25 with opportunity to further collaborate with Children's Health Queensland.
Integration of paediatric services and collaboration between paediatric centres should be improved.	
28.Development of a coordinated approach to service provision across Metro North HHS and Queensland Children's Hospital. Consider the following: a. Memoranda of understanding regarding transfer of children back to Caboolture Hospital if clinically appropriate from other centres, if they reside in the Caboolture Hospital catchment b. Development of a unified referral system that includes developmental screening questions to better triage such referrals c. Quarterly retrieval service reviews to determine and learn from the management of the sickest patients	It is recognised that the delivery of care closest to home is always preferable. Metro North Health has a strong relationship with Children's Health Queensland with agreed procedures to support shared care arrangements. Metro North Health will work closely with Children's Health Queensland to review current arrangements and develop an agreed memorandum of understanding that focusses on both the child's clinical and emotional requirements that also includes the views of parents/carers.
29.Expand and develop educational collaborations between Metro North HHS campuses and Queensland Children's Hospital.	Health professional education encompasses a wide range of prerequisite and mandatory qualifications and a wide range of learning opportunities. Metro North Health as the largest Hospital and Health Service is committed to supporting lifelong learning and career development pathways. As part of this commitment, Metro North Health collaborates with the Department of Health and other Hospital Services including Children's Health Queensland.
30.Develop research collaborations between Metro North HHS campuses, Queensland Children's Hospital and beyond. Research involving Allied Health, Indigenous Health, Nursing and/or Medical teams is possible	Metro North Health recognises that quality care requires a strong and well supported research community, enabled to develop new treatments, tools and model for early diagnosis and prevention of advanced diseases. Metro North Health is collaborating with Children's Health Queensland on the following research studies: <ul style="list-style-type: none"> • Paediatric Anaesthetic Consultant Survey: Assessing the Fidelity and Utility of a Novel 3D-Printed Caudal Anaesthetic Trainer. • An evaluation of full scope of practice physiotherapy-led assessment and management of paediatric orthopaedic variants. • Management of Intraventricular Haemorrhage of Prematurity. • Multi-Centre Retrospective Cohort Analysis of Mechanical Aortic Valve Replacement in Under 20-year-olds. • Real-world Validation of Deep Learning Algorithm ROP: AI for the Automated Diagnosis of Retinopathy of Prematurity.

Identification of the needs of Aboriginal and Torres Strait Islander patients and their families/carers requires additional work	
<p>31. Caboolture Hospital must engage in truth telling conversations to determine culturally appropriate methods for service reviews including the following:</p> <p>a. Revisit the strategy described in the Queensland Health Aboriginal and Torres Strait Islander Cultural Capability Framework 2010 – 2033 and the Metro North HHS Health Equity Strategy</p> <p>b. Determine the next steps together</p>	<p>Caboolture Hospital is committed to providing equity of access to high quality healthcare services and building relationships based on inclusions with Aboriginal and Torres Strait Islander people and their communities and remains committed to achieve life expectancy parity for Aboriginal and Torres Strait Islander peoples by 2031.</p> <p>Caboolture Hospital has a strong Aboriginal and Torres Strait Islander equity focus and values both the role of Aboriginal and Torres Strait Islander workforce and community in supporting and informing care for our community. Caboolture Hospital will engage with community and Metro North Aboriginal and Torres Strait Islander Leadership team to review ways to strengthen this engagement as part of the “Focus on the First Quarter” strategy.</p> <p>Metro North Health’s Health Equity Strategy 2022-2025 provides the pathway for cultural change across five key areas including working with First Nations peoples, communities and organisations to design, deliver, monitor and review health services.</p>
<p>32. Develop analyses with IHLOs and SHWs that would allow an understanding of the proportion of those who identify as Aboriginal or Torres Strait Islander who receive cultural care</p>	<p>Metro North Health’s Aboriginal and Torres Strait Islander Leadership Team is at the forefront of developing a comprehensive suite of advanced analytics, insights, and dynamic dashboards designed to gain a profound understanding of the Aboriginal and Torres Strait Islander patients we serve. These tools not only enhance patient care but also empower our dedicated workforce.</p> <p>In alignment with Metro North Health’s Health Equity Strategy, we are dedicated to formulating and refining a variety of quantitative and qualitative metrics. These metrics are meticulously tracked to tailor our services to the unique needs of Aboriginal and Torres Strait Islander communities, ensuring that our care is both customised and culturally respectful.</p> <p>Caboolture Hospital’s Aboriginal and Torres Strait Islander team review all patients that identified as Aboriginal and/or Torres Strait Islander through the patient systems. This review and follow up are undertaken daily. Caboolture Hospital has formal reporting systems on the numbers of patients seen or contacted. Formalisation of this reporting is progressing.</p>
<p>33. Explore advanced clinical practice roles for SHWs and/or IHLOs in the community, in outpatient clinics, in paediatric emergency and in Children’s Ward. a. Develop clinical governance and performance measurements b. Take on additional clinical responsibility following best evidence pathways and collaborating with other nursing and medical teams</p>	<p>Metro North Health recognises that achieving improved health outcomes for Aboriginal and Torres Strait Islander people requires a substantial shift to genuinely listen, understand, and acknowledge the systems and our approach for the need to change. A key action of the Metro North Health’s Health Equity Strategy 2022-25 is to increase and value the expertise of the Aboriginal and Torres Strait Islander workforce. Further work will be undertaken to strengthen clinical governance and performance measurements.</p>
Escalation of serious illness and/or parental concern within Caboolture Hospital ED and Children’s Ward	
<p>34. Prior to invoking Ryan’s Rule, parents must be able to get rapid clinical care in the case of acute or severe deterioration, for example, via a parent-initiated escalation system (analogous to a MET</p>	<p>Uncertainty of diagnosis, deterioration, next steps and care plan in the Emergency Department can be stressful. Ryan’s Rule supports patients and families and carers to raise concerns if a patient’s health condition is getting worse or not improving as well as can be expected.</p>

<p>call). A process that educates and empowers parents to initiate these calls should be strongly considered.</p>	<p>As this recommendation is relevant to all hospitals, a statewide approach will be taken to co-design a process and supporting education and resources.</p> <p>Caboolture Hospital has ensured that all waiting areas and rooms have Ryan's Rule information that explains how to escalate concerns. On arrival in a clinical area (PED, or Paediatric Ward) an orientation to the clinical area is provided to the patient/family which includes Ryan's Rule process information.</p>
<p>35. Develop systems that will mean that children arriving at triage will have their vital signs taken within 30 minutes of arrival</p>	<p>It is recognised that attending any Emergency Department can be distressing, particularly for children and young people. Commencing on 1 July 2024, the separate and dedicated paediatric triage and waiting room process includes vital sign assessment.</p>
<p>36. Roll out an education program to all the clinical teams on CW as part of mandatory MET and Paediatric Code Blue activation</p>	<p>Caboolture Hospital is committed to quality care and responding efficiently and effectively to deteriorating patients.</p> <p>During May 2024, the practice for paediatric MET calls and Code Blue activation was reviewed and amended. Information and education has been provided to support the process. This education is part of our orientation and mandatory education related to the recognition and response to deteriorating patients.</p> <p>Analysis of MET calls for paediatric patients is undertaken separately to adult patients in the Recognising and Responding to Acute Deterioration Committee.</p>
<p>37. Development of in-situ and translational simulation program that can expose latent threats and organisational issues affecting the response to critical illness in children across Caboolture Hospital, within the Satellite Hospital(s) and other existing and evolving services.</p> <p>a. Implement change based on this program b. Publicise this process in professional meetings and with the local community</p>	<p>Caboolture Hospital recognises the benefits of in-situ and translational programs that support improved preparedness and care responses.</p> <p>The Assistant Nursing Director Paediatrics and Paediatric Nurse Educator will define a process for simulation across paediatric services, including deteriorating patient scenarios, MET responders, and staff, with a focus on identifying latent threats and systems issues.</p>
<p>38. Development of technological solutions to acute escalation in the ED. Telephones and photographs on a wall are not appropriate. Use simulation to facilitate development of a more responsive, robust and acceptable system.</p>	<p>Uncertainty of diagnosis, deterioration, next steps and care plan in the Emergency Department can be stressful for all parties. Caboolture Hospital utilises the staff alert system located at each bedside to call for urgent response and assistance.</p> <p>Caboolture Hospital shares information via a range of methods including posters and brochures, and QR codes are available for patients' families and carers linking them to the Queensland Children's Hospital parent information. Caboolture Hospital staff will print these for families if they are relevant or asked for.</p> <p>Additionally, Caboolture Hospital utilises a SharePoint system that contains all Queensland Children's Hospital clinical guidelines to support practice.</p>
<p>Building a broad-based paediatric team across the entire health service.</p>	
<p>39. Governance structures must provide visibility to the Board and to the Executive of the standard</p>	<p>Metro North Health will ensure that governance and reporting structures provide timely information on paediatric service provision to the Executive and the Board. Existing mechanisms will be reviewed and enhanced including</p>

<p>of paediatric service provision in near to real time.</p> <p>a. Paediatric performance measures to be sourced from other centres, developed locally and trialled in the Caboolture environment</p> <p>b. Explore the feasibility of a paediatrics and child health service line separate from Women's Health that includes medical and nursing leadership with paediatric skills and experience</p>	<p>directorate reporting to the Board, operations reporting, and clinical stream reporting to ensure granular and close to real time information.</p> <p>a. We will review our current paediatric performance measures against contemporary best practice in other jurisdictions and adapt to suit the local Caboolture context.</p> <p>b. We commit to explore the feasibility of a paediatrics and child health service line and will progress as part of the broader development of paediatrics services across Metro North facilities including Caboolture Hospital.</p>
<p>40. Utilise local nursing expertise to develop paediatric skills in the Emergency Department</p> <p>a. Children's ward paediatric nurses to be rostered into the Emergency Department (including resuscitation cubicles) with appropriate on-boarding, education and support</p> <p>b. Expand the Paediatric Nurse Practitioner FTE in the ED</p> <p>c. Development of a Graduate Nurse program in Paediatric Nursing utilising skills on Children's Ward, the Emergency Department and Children's Outpatients.</p> <p>i. Aim for a 70:30 ratio of experienced to junior nurses</p> <p>ii. Regular clinical supervision for staff</p>	<p>In February 2024, Caboolture Hospital further enhanced the expertise of the staff working in Paediatric ED through a separated staffing model. This will ensure there is an experienced Paediatric ED Nurse leading the shift (CN), specialist Paediatric ED staff on each shift, a paediatric skilled triage nurse supported by ED nurses trained in paediatrics and undertaking their ED training. The rotational component is important to ensure the ED nurses' skills are maintained so they are able to provide support in periods of demand. Following recruitment these staff have been commenced with the implementation of the separate paediatric triage model. The Paediatric Ward provides staffing support to the ED when required however the new governance roles will further establish business as usual processes for this with an intent to investigate opportunities to look at rotations for Caboolture Hospital specialist paediatric nurses to Children's Health Queensland.</p> <p>Additionally, an Associate Nurse Unit Manager has been appointed in PED to oversee this rostering.</p> <p>An Assistant Nursing Director position has been established and the role has been recruited. This role will oversee the further development of paediatric education and formalised supports and education across the paediatric services.</p>
<p>41. Develop skills, through recruitment and training, in the management of mental health conditions such as eating disorders, anxiety and depression which are now the major diagnostic groups in children from as young as 8 years of age through into Adolescent medicine</p> <p>a. For many children these will be comorbidities</p> <p>b. Understand how they affect the child and their family during an acute hospital attendance or admission</p>	<p>A Caboolture Hospital Executive Paediatric Steering Committee has been established to shape and ensure the recognition and operationalisation of Paediatrics as a distinct specialty with a focus on environment, equipment, workforce, and education. There will be a specific focus on children and adolescent presenting to PED receiving appropriate care in an appropriate location.</p> <p>The Assistant Nursing Director and Clinical Director will be responsible for establishing pathways of care to ensure that those children and adolescents are managed within appropriate environments and that staff are upskilled to support these children and their families.</p>
<p>Developing a culture of compassion</p>	
<p>42. Shift from blame to support and an educative mindset</p>	<p>In a complex health environment, we recognise that expectations will not always be met. Caboolture Hospital recognises that this and the impacts of recent events has added significant impost to leaders and staff across the</p>

	<p>directorate. Caboolture Hospital is focused on continuous improvement and is working with all leaders to ensure a no blame culture, and that we move to a learning and inquisitive culture, to ensure we maximise opportunities to improve care for and with our community.</p>
<p>43. Build capability in the workforce a. Compassion workshops for staff at all levels</p>	<p>Caboolture Hospital recognises that a child's worst day may also be a very busy day with multiple priorities and stressors for clinical and support staff involved in their care. We acknowledge that unintended behaviours or actions may not meet our community's expectations. Caboolture Hospital has implemented a Compassion Leadership Set and our first 60 Caboolture Hospital participants from the Emergency Department, Paediatric Ward, Child Protection Unit and the leadership team have commenced a three-part compassionate leadership training set to enhance soft skills through the lens of compassionate care. This course is being undertaken with research-based Monash University training program, the CAPS program and the clinical disclosure program.</p>
<p>44. Demonstrate how and where change has improved care frequently and through various channels a. Newsletters b. Local forums c. Social media (with great care) d. Network based symposia e. Formal research conferences</p>	<p>Caboolture Hospital utilises a range of media platforms to provide information and advice, promote our services and patient and staff experiences. Caboolture Hospital will utilise these channels to demonstrate how and where change has improved.</p> <p>Each week the Executive Director showcases key happenings and achievements across the directorate in her staff message.</p> <p>Women, Children and Families Clinical Stream also sends regular updates which will increase this year with the Focus on the First Quarter strategy, along with discussion at the regular stream meeting with all sites and service line.</p> <p>Caboolture Hospital is active in research and research forums and with the introduction of the new governance roles in Paediatrics it will be a focus to increase our paediatric focused research and improvements.</p>
<p>45. Invite patients to share their stories throughout all levels of the organisation, i.e. in-services, executive, performance and safety and quality meetings – ensuring they are acknowledged and first on the agenda.</p>	<p>Caboolture Hospital recognises the positive impact patient stories can have for our staff and in informing new ways to deliver and communicate care.</p> <p>Caboolture Hospital has a range of feedback loops, and these will be strengthened through the development of a patient experience approach.</p> <p>Caboolture Hospital has improved the management of feedback, ensuring that feedback is followed up within a short timeframe by a senior clinician or leadership role. There has also been a focus on offering patients providing feedback different opportunities such as joining the consumer advisory; undertaking in-services to staff in a way they are comfortable with including with the support of the Executive Director or other senior staff to share their experience; patient story sharing with their involvement (to date they have fed in but not attended, however we are working with patients on their preferences to make the story real and meaningful); meeting with executive and leadership staff. These strategies are in place for all Caboolture Hospital patients, and families and we continue to work in a continuous improvement methodology to ensure the patient and family experience approach and recognising the impact of trauma in these stories.</p>
<p>Child-Centred Approaches</p>	

46. Provide education to staff to minimise procedural trauma	Procedural trauma can have life-long impacts on patients. In transitioning paediatric care to be recognised as a distinct speciality at Caboolture Hospital further education will be developed to reduce procedural trauma including the use of strategies to minimise restraint and invasive procedures where appropriate.
47. Investigate the use of distraction therapies – music, therapy animals, digital art displays etc to minimise trauma, occupy children and families while waiting and reduce privacy issues	Caboolture Hospital supports the use of distraction therapies. An approach for the Emergency Department and Children’s Ward will be co-designed following establishment of the Paediatric and Child Health Advisory Group.
48. Collaborate with the children of Caboolture to create designs and dedicated spaces that are child friendly and welcoming. Remember the “Child’s Voice”	The child’s voice is central to improving our care and environment for children and young people. A range of child friendly improvements have already been made and Caboolture Hospital is committed further improvements that will allow children and young people to feel more comfortable when in our care.
Satellite Hospital Attendances	
49. Metro North HHS develop a communication strategy to inform the public about Satellite Hospitals and when they should present there, including minimum age	<p>Community and stakeholder engagement occurred prior to the opening of the Satellite Hospitals in Caboolture, Kallangur, and Bribie Island. Engagement focussed on educating the local community and primary healthcare network on the services offered at Satellite Hospitals and when it was appropriate to attend. This included local mailbox drops, community open days at the Satellite Hospitals which included guided tours and information about the services, and pop-up community stalls at local events and shopping centres. Information sessions and printed information were provided to local primary health care providers. This engagement continues on an as-needed basis.</p> <p>Queensland Health delivered a statewide awareness campaign which included television, social media, and letterbox drops. Metro North has supplemented this campaign with an ‘alternatives to ED’ campaign which focussed on attending the right place for the right care. This campaign is ongoing and operates during peak seasons, winter and the Christmas period:</p> <ul style="list-style-type: none"> • billboard advertising during winter • social media posts • social media advertising, including for community open days
50. Public awareness of the role of the Caboolture Satellite Hospital will reduce delays to appropriate care, by preventing inappropriate attendances.	Refer 49
Leadership of Paediatric Services	
51. Mentoring and development of future paediatric medical and nursing leaders a. Includes a requirement for paediatric nursing experience as part of the selection process.	<p>A Caboolture Hospital Executive Paediatric Steering Committee has been established to shape and recognise Paediatrics as a distinct specialty with a focus on environment, equipment, workforce, and education. There will be a specific focus on the development of future paediatric medical and nursing leaders.</p> <p>Refer 40</p>

<p>52. Development of paediatric Allied Health leadership under the larger Allied Health umbrella</p>	<p>The Office of the Chief Allied Health Officer plays a key role in the development, implementation, and evaluation of strategies to ensure an appropriately skilled allied health workforce to meet the current and future health service needs of Queensland.</p> <p>Further development of Paediatric Allied Health leadership will be considered by the Chief Allied Health Officer.</p> <p>Refer 12, this process will identify a Caboolture Hospital Allied Health Paediatric Lead.</p>
<p>Safety and Quality</p>	
<p>53. No adult admissions to CW. This represents a risk to children in the ward and limits access for additional children who may require admission after acceptance of the adult patient(s).</p>	<p>It is recognised there are risks in placing adult patients in the Caboolture Hospital Children's Ward. Caboolture Hospital does not admit adults to the paediatric ward.</p> <p>Adolescents up to 19 years old are admitted in the paediatric ward with careful selection and cohorting. A plan is in place to develop an adolescent and paediatric behavioural space in a lockable area next to the paediatric ward which would support this cohort.</p>
<p>54. Improve the balance of Performance Meetings to ensure appropriate representation of paediatrics.</p>	<p>All Caboolture Hospital performance meetings include a mix of multidisciplinary professions and paediatric metrics are reviewed. There is a dedicated Women, Childrens and Families performance meeting which has moved to separately review paediatric metrics.</p>
<p>55. Change the culture around RiskMan reporting.</p> <p>a. Set up every clinician in RiskMan to facilitate incident entry and incident review where relevant. Incident entry is everybody's responsibility.</p> <p>b. Set expectations that near miss events must be entered into RiskMan. These will prevent the future SAC 1 or SAC 2 event.</p> <p>c. Use RiskMan incidents to inform abovementioned simulation program development</p> <p>d. Close the reporting loop on all clinical incidents by implementing structured procedures.</p>	<p>It is a current requirement of Metro North Health that every staff member be established as a reporter within the RiskMan incident reporting system. The Metro North Clinical Governance team will lead a review to ensure that every clinician at Caboolture has that level of access to RiskMan and will ensure that wide-spread communication and education regarding clinical incident reporting is provided to all staff at Caboolture.</p> <p>Structured policy and procedures relating to Clinical Incident Management are already in place. Structures and processes have been updated at Caboolture Hospital to review and learn from events with teams and ensure that the loop is closed with teams on incidents. This is an ongoing improvement focus for Caboolture Hospital which has a weekly reporting and review process, a monthly review process in the Safety and Quality meeting, and a discussion and review process at the service line performance meetings including specific paediatric discussion.</p> <p>Metro North Health Clinical Governance will work with Caboolture Hospital to strengthen the link between ongoing education programs and learnings from trended clinical incident data.</p>
<p>56. Perform an audit to correlate Riskman entries to the following:</p> <p>a. Clinical cases presented in M&M meetings</p> <p>b. Ryan's Rule activation</p> <p>c. Audit and presentation of quality improvement actions taken because of Riskman entries</p>	<p>Metro North Health recognises the importance of transparent reporting.</p> <p>Metro North Health's audit program is currently being adapted to ensure that it reflects reconciliation within the RiskMan incident reporting system against clinical cases presented to Morbidity and Mortality meetings and Ryan's Rule calls.</p> <p>As above, the link between learnings from trended Caboolture Hospital clinical incident data and the provision of education will be strengthened.</p>

<p>57. Paediatrics and Paediatric Emergency Medicine to hold joint M&M meetings</p> <p>a. Standing invitations to all staff with an interest in paediatrics and child health</p> <p>b. Other areas of Caboolture Hospital (e.g. ICU, mental health, pathology, radiology) or CKW Directorate (eg. Satellite Hospitals) can attend and must present if a paediatric case has occurred.</p> <p>c. M&M meetings must have an agenda and minutes should be submitted to Metro North HHS Quality and Safety Committee</p> <p>d. Strengthen and utilise patient's voice and stories as stimuli for M&M meetings</p>	<p>The Caboolture Hospital Paediatric Morbidity and Mortality committee has been reviewed and strengthened to include all paediatric services. This will continue to be a focus as a core foundation for Caboolture Hospital paediatric services with the new governance and leadership roles commencing.</p>
<p>58. Allocate dedicated administrative time for Chairs to perform this task with their full attention during their working hours</p>	<p>Currently all clinical staff have dedicated administrative time. In recognition of chairpersons' clinical priorities, opportunities will be considered to support administrative tasks.</p>
<p>Compliments and Complaints</p>	
<p>59. Perform Complaint classification audits regularly. a. Was a Riskman clinical incident entry made? b. If a Riskman entry was made, how was the complaint resolved through this process? c. If no Riskman entry was made i. Should one be made now? ii. Why was it not made earlier? d. Complaints that have been closed without a documented response.</p>	<p>All feedback, both complaints and compliments, is routinely entered into RiskMan. RiskMan is used to monitor the progress of the complaints including documentation to outline the process of investigation, communication, any meetings held, a record of the formal response provided, and the closure of the complaint.</p> <p>RiskMan has the capability to link complaints and clinical incidents, this is activated at Caboolture Hospital. The Patient Safety and Consumer Liaison teams meet weekly to discuss shared cases and ensure that both processes are aligned and escalate any concerns or incidents.</p> <p>Caboolture Hospital routinely monitors and reports on any complaints that are closed without feedback to complainants, noting that this is regularly because complaints have been made anonymously but are nevertheless managed in the same way as complaints made by identified complainants.</p> <p>Senior Caboolture Hospital staff review non-anonymous complaints that are closed without feedback and ensure that the rationale for this is reasonable and acceptable.</p>
<p>60. Provide feedback to families about the service improvement activity or action taken in response to their complaint/compliment promptly (within 30 days).</p>	<p>Metro North Health has recently employed additional patient experience officers across all facilities with the aim of managing any concerns prior to discharge.</p> <p>All compliments and complaints are managed in line with the Queensland Government timeframes. Caboolture Hospital continuously reviews its processes to support resolution.</p> <p>Caboolture Hospital aims to have a conversation with complainants and senior clinical leads within a short timeframe where concern is significant, and close complaints within a much shorter timeframe the KPI.</p>
<p>61. Record all actions taken in Riskman</p>	<p>Refer 60</p>

<p>a. This includes, for example, escalation to Director, change or development of a Quality improvement process or change in policy/procedure.</p>	
<p>62. Provide training for clinicians performing Open Disclosure including: a. Trauma-informed care b. Active listening c. Compassion/empathy</p>	<p>Clinical Excellence Queensland, Department of Health currently coordinate state-wide training for Open Disclosure consultants for all Queensland Hospital and Health Services. The training is comprehensive, including trauma-informed care, active listening principles and compassionate and empathetic response. Open Disclosure consultants are required to undertake regular refresher training to maintain their accreditation.</p> <p>Open Disclosure in Metro North can only be led by a currently-trained Open Disclosure staff member. Caboolture Hospital encourages and supports clinical leaders to undertake Open Disclosure training.</p> <p>The Compassion Care learning set that is being trialled at Caboolture Hospital includes clinical disclosure training also.</p>
<p>63. Provide evidence and documentation of timely clinical debriefs with parents and children after an adverse or clinical incident has occurred.</p>	<p>Caboolture Hospital is committed to accurate and timely Clinician Disclosure.</p> <p>Clinical debriefs, known as 'Clinician Disclosure', are routinely recorded within the RiskMan incident reporting system, along with recording within the patient's health record.</p>
<p>Reputational Issues</p>	
<p>64. Co-design and implement a recovery plan to regain the trust and build confidence of the community and clinicians.</p>	<p>Caboolture Hospital provides over 100,000 occasions of care annually with a high level of satisfaction. Metro North Health is committed to working with the local community to ensure they feel safe and confident that they will receive high quality care.</p> <p>The Caboolture Hospital Paediatric and Child Health Advisory Group will further design Caboolture Hospital's communication plan in development.</p>
<p>65. Collaborate with other Caboolture departments, other Metro North campuses and Queensland Children's Hospital on education, clinical and research programs. Then publicise them using professional journals, conferences and community media. a. The local community should be made aware through media opportunities of infrastructure developments and good news stories</p>	<p>Metro North Health recognises that quality care requires collaboration across education, clinical and research domains to support delivery of quality care, develop new treatments, tools and model for early diagnosis and prevention of advanced diseases. Metro North Health actively collaborates and promotes achievements with state, national and international hospitals, tertiary education sector, private and non-government sector.</p>
<p>Consumer Engagement</p>	

<p>66. Commence a Paediatric consumer advisory group from the commencement of design and development to completion and beyond of the new Paediatric Outpatients Department.</p>	<p>Working collaboratively with consumers to design and deliver new services, models and approaches provides valuable insights to inform and drive priorities. This commitment is reflected in the consumer co-designed plan to support establishment of the new \$15 million Paediatric Outpatients Centre. Co-design will be ongoing.</p> <p>Caboolture Hospital will implement a Paediatric and Child Health Advisory Group to inform care and service development.</p>
<p>67. The Consumer Advisory Group (CAG) should review all compliments and complaints data and Patient Reported Experience Measures (PREMS).</p>	<p>The Caboolture Hospital Consumer Advisory group reviews compliment and complaint data and PREMS data monthly. This is presented by the Director Safety and Quality for discussion along with the presentation of patient stories.</p> <p>The Terms of Reference for the Paediatric and Child Health Consumer Advisory Group, co-designed with consumers (as described at Recommendation 11), will incorporate routine and regular reporting of consumer feedback.</p>
<p>68. Communicate to the CKW community regarding progress and implementation of recommendations made in this report.</p>	<p>Caboolture Hospital will invite all families who participated in the review to attend a meeting to discuss the proposed responses and how they may continue to be involved.</p> <p>In addition, a formal mechanism to provide the community with regular updates will be established.</p>
<p>69. Establish the Child's Voice methodology, a Children's and Adolescent's advisory council and family group to influence and inform models of paediatric care</p> <p>a. Dedicated paediatric Consumer and Community Engagement Officer (1 FTE)</p> <p>i. Suggest Metro North HHS-wide role</p>	<p>The child's voice is central to improving our care and environment for children and young people.</p> <p>The Children of Caboolture Collaborative and the Executive Paediatric Steering Committee will guide how this recommendation is co-designed and progressed.</p> <p>In addition, Caboolture Hospital will implement a Paediatric and Child Health Advisory Group to inform care and service development.</p>
<p>Implementation of Review Recommendations</p>	
<p>70. Continue to monitor, evaluate and maintain gains made in implementation of surgical services review.</p>	<p>Implementation of the Caboolture Hospital Surgical Services Review recommendations has support improved care and processes across a range of areas. Metro North Health is committed to the continuous monitoring, evaluation and review of these improvements.</p>
<p>71. Monitoring, evaluating, and maintaining gains achieved in WT Care recommendations</p>	<p>The WT Review recommendations have been implemented. The monitoring, and evaluation of these recommendations has been introduced to business as usual practice and will also remain as a regular review in the Caboolture Hospital Safety and Quality meeting for 12 months to ensure continuous monitoring, evaluation and review.</p>
<p>72. Establish a multi-disciplinary working group, including consumers, to oversee the implementation of this report's recommendations. This, in turn, will be reported through Performance, Safety and Quality and</p>	<p>The Children of Caboolture Collaborative will provide oversight of implementation of the review's recommendations. This will be underpinned by a multidisciplinary working group led by the Executive Director, Caboolture Hospital.</p> <p>Reporting lines will also be established to Performance, Quality and Safety and Executive meetings including the Caboolture Paediatric Executive Committee, the Metro North Health Senior Executive Team Meeting and Metro North Hospital and Health Services Board meeting</p>

Executive Meetings within Caboolture Hospital and Metro North HHS.	
73. Provide a monthly progress report to the Chief Executive of MNHHS about implementation, monitoring and evaluation of recommendations.	See 72
74.The progress report to be tabled at the MNHHS Board meeting and MNHHS Board Safety and Quality Committee.	See 72
75.Provide updates regarding progress of implementation of recommendations to the paediatric community of Caboolture, Kilcoy and Woodford.	See 72
76.Engage a Review Team to complete an evaluation of implementation of recommendations in 18 months from this report's delivery. This should include invitations to the members of this Review Team	A review team will be engaged in December 2025 to complete an evaluation of implementation of the report's recommendations.