



STANDARD 1: Clinical Governance

CRITERION: Governance, leadership and culture (Action 1.1 – 1.6)

Leaders at all levels in the organisation set up and use clinical governance systems to improve the safety and quality of health care for patients.

Provide a summary of the processes that are in place to meet this criterion.

Western Health's (WH) approach to clinical governance is called 'Best Care'. Developed in consultation with consumers, staff and the Board, this approach describes a vision for the best possible care for all WH consumers and focuses on the behaviours, strategies and organisational systems needed to achieve this vision.

Best Care is outlined in a dedicated WH Policy and Framework, with a range of related policies and procedures covering quality and safety systems such as incident reporting, risk management, variation monitoring and staff education.

Within the WH Best Care Policy and Framework are role statements and expected behaviours for staff who provide, lead, govern and support Best Care.

WH's education and learning programs support staff development to actively engage in Best Care related systems and care practices.

The WH Best Care Framework's Annual Action Plan outlines priority actions to apply and enhance quality systems supporting Person-Centred, Co-ordinated, Right and Safe care.

WH is an official signatory to the National 'Close the Gap' Statement of Intent, and in line with this commitment, the organisation actively supports the objectives and priorities of the Victorian Government's Korin Korin Balit-Djak Aboriginal Health, Wellbeing and Safety Strategic Plan 2017-2027. These priorities, as well as core elements of the Reconciliation Action Plans are reflected in WH's Aboriginal Health Cultural Safety Plan led by the organisation's Wilim Berrbang (Aboriginal Health) Unit and overseen by the Aboriginal Health Steering Committee.

How does the health service monitor the requirements of this criterion are being met and where is the information reported?

A Best Care Committee structure supporting reporting from operations through to the WH Board is integrated into the overall WH Committee Structure and a bi-monthly WH Best Care Report is generated against the dimensions of Person-Centred, Co-ordinated, Right and Safe Care.

The WH Monitoring and Performance (MaP) warehouse provides a central resource for a range of Best Care performance measures.

Informing and supporting the ongoing review and improvement of WH's quality and safety systems is our engagement with Safer Care Victoria (SCV) and the Victorian Agency for Health Information (VAHI).

These state-wide agencies were created in response to the report 'Targeting Zero: supporting the Victorian hospital system to eliminate avoidable harm and strengthen quality of care'.

A culture of safety and quality improvement is measured annually through WH's participation in the state-wide 'People Matter' Survey. A 'patient safety culture' metric is informed by staff responses to eight individual questions on culture, systems and improvement.

The Victorian Health Experience Survey (VHES) also provides ratings from consumers relating to the provision of Best Care at WH.

An annual Quality Account publication is submitted to the WH Board, the Victorian Department of Health (DH) and is accessible to WH staff, volunteers and members of the community via the WH Intranet and Internet.

Have improvements been implemented?

A new and improved WH Live Best Care microsite was launched in 2022 to further assist staff understand the key principles of Best Care, improve their accessibility to essential information and share action plans and improvements. This site draws from and informs a Nursing & Midwifery microsite, a new resource developed in 2021 to keep our nurses and midwives updated and allow for easy access to tools, information and documents supporting and acknowledging Best Care.

A Live Best Care learning package complements the Live Best Care site and includes a survey to garner ongoing feedback from staff on their awareness and engagement in quality and safety systems.

WH's Best Care Committee structure has been enhanced over the past year with the introduction of Clinical Council and Best Care Performance Committees. The Clinical Council has been designed to enable a collaborative approach to organisation-wide recommendations for endorsement, implementation and monitoring progress, while the Best Care Performance Committee focuses on organisation-wide performance monitoring and improvement in line with the Best Care Framework.

A rapid-delivery project to enhance WH's Performance Dashboards has been undertaken throughout 2022-23. The Performance Dashboard Project is an exciting opportunity to develop, test, and deploy a prioritised set of dashboards. The aim is to convert mass amounts of data into easy to navigate overviews, enabling staff to analyse performance indicators and develop actionable insights. A number of clinical performance dashboards care have been launched and are actively supporting the monitoring, review and improvement of best care.

In 2022, we reviewed the achievements of our Aboriginal Health Cultural Safety Plan 2019-21. These include expansion of the Wilim Berrbang Team to include an Aboriginal Journey Walker role supporting care co-ordination, progressive implementation in clinical departments of a Cultural Safety Audit Tool, and provision of a room in the birthing suite that is welcoming and culturally sensitive for Aboriginal and Torres Strait Islander women.

To develop the WH Aboriginal Health Cultural Safety Plan for the next three years (2022-25), extensive consultation was undertaken with WH staff, WH Aboriginal Health Steering Committee members, Aboriginal community members, and the DH.

CRITERION: Patient safety and quality systems (Action 1.7 – 1.18)

Safety and quality systems are integrated with governance processes to enable organisations to actively manage and improve the safety and quality of health care for patients.

Provide a summary of the processes that are in place to meet this criterion.

WH's Best Care Framework encapsulates our approach to organisational quality and safety management. Best Care describes a vision for Person-Centred, Co-ordinated, Right and Safe Care for all WH patients and focuses on the behaviours, strategies and organisational systems needed to achieve this vision. These systems are grouped under five headings (or pillars) – Leadership, Process, Workforce, Improvement, with the central pillar 'Consumer First'.

The **Process** pillar focuses on maintaining and enhancing the policies, procedures, guidelines (PPGs) and tools supporting the delivery of Best Care. WH's PPG system supports the development, authorisation, promulgation and review of PPGs covering quality and safety systems and associated risks. PPGs are based on and referenced to relevant legislation, industry standards and clinical best practice, and are available to staff through the PROMPT document management platform.

WH's PPGs guide the clinical practice that is documented by healthcare records available to clinicians at the point of care. WH is progressing towards a whole of organisation electronic medical record (EMR) with Phase 1 and 2 of this major project completed. A hybrid medical record consisting of EMR, digital medical record (DTR) and paper record elements is maintained.

The **Improvement** pillar focuses on:

- ***Utilising purposeful information collection from audits, indicators and incidents to analyse, share and respond to identified risks and opportunities to improve Best Care*** – this is supported by a Risk Management Framework that aligns to the International Standard ISO 31000:2009, an Incident Management System that meets the requirements of the Victorian Health Incident Management System (VHIMS), and a Variation Management approach that draws together processes such as clinical audits, ISBAR audits, governance audits, data review, Morbidity and Mortality (M&M) meetings and the use of clinical quality registries.
- ***Supporting improvement activity to maximise positive impact on patient care and outcomes*** – this is supported by annual business and Best Care action planning, the Live Best Care approach for Improvement and Innovation and a dedicated team which assists staff in applying consistent quality improvement methodology.
- ***Reporting and recognising Best Care Improvement activity*** – this is supported by a WH Improvement Project Register, the WH 'Live Best Care' microsite, an annual Best Care week, publication of an annual Quality Account, and participation in external healthcare improvement conferences and awards programs.

How does the health service monitor the requirements of this criterion are being met and where is the information reported?

The continuing review of PPGs is flagged through reporting of scheduled document review and operational reporting mechanisms such as variation monitoring, Morbidity and Mortality reviews and the report and management of clinical and non-clinical incidents.

WH's Monitoring and Performance reporting solution (MaP) brings together current data from WH's health records and operational patient and incident systems to provide a single source of truth for performance reporting.

This data, plus the output from a number of quality and safety systems, informs the reporting to WH's Best Care Committees that are integrated into the overall WH Committee Structure.

Reporting includes a bi-monthly WH Best Care Report generated against the dimensions of Person-Centred, Co-ordinated, Right and Safe care.

Informing and supporting the activity and ongoing review and improvement of WH's quality and safety systems is our engagement with Safer Care Victoria and the Victorian Agency for Health Information. This includes the completion of an annual Organisational Strategy Improvement Matrix (OSIM) self-assessment on the maturity of WH's improvement systems.

WH staff also provide feedback on their awareness and engagement in quality and safety systems through the WH 'Live Best Care' learning package.

An annual Quality Account publication is submitted to the WH Board and the DH, and is accessible to WH staff, volunteers and members of the community via the WH Intranet and Internet. This Report brings together the activity and outcomes of a number of quality and safety systems to report on performance against the WH vision of providing Best Care that is Person-Centred, Co-ordinated, Right and Safe.

Have improvements been implemented?

The PROMPT system for PPGs went live for all WH staff in November 2022. PROMPT was developed by Barwon Health and supports a significant number of health service with their PPG access and management requirements. The PROMPT platform has a well-developed search function which makes it easier for staff to find and utilise PPGs. It also enables access to the PPGs of other health services utilising the platform.

Phase 2 of WH's Electronic Medical Record (EMR) went live in July-August 2023. A self-funded project, we have worked with our staff and the vendor to design and implement the most comprehensive Oracle (Cerner) suite within the southern hemisphere.

A rapid-delivery project to enhance WH's Performance Dashboards has been undertaken over 2022-23. The Performance Dashboard Project is an exciting opportunity to develop, test, and deploy a prioritised set of dashboards. The aim is to convert mass amounts of data into easy to navigate overviews, enabling staff to analyse performance indicators and develop actionable insights. A number of clinical performance dashboards care have been launched and are actively supporting the monitoring, review and improvement of best care.

Following a hiatus during COVID-19 response, the Auditing Best Care (ABC) program has been re-launched. Engaging the whole organisation, six-month ABC audits support the monitoring of Best Care at the patient's bedside and provide us with an opportunity to identify areas for clinical practice improvement.

The 'Riskman' incident management system has been upgraded to meet new VHIMS reporting requirements and provide a more user friendly and intuitive system supporting reporting and review of clinical incidents. A new incident Recommendation Register has also been developed to support a more integrated approach to enhancing clinical practice following the review of adverse events.

The 'Riskman' consumer feedback system and associated processes for feedback management have also been enhanced, with a sustained improvement in the timeliness of complaint response.

WH has refined workflows and processes to support staff in understanding and meeting obligations under new Statutory Duty of Candour (SDC) requirements taking effect from 30 November 2022. These have been successfully applied at WH and have enhanced communications with patients and families and follow up of serious adverse events. Engagement in state and national collaboratives has immersed staff in evidence-based improvement methodology. WH's maternity teams were Safer Care Victoria's winners of the Better Births for Women Collaborative. The SUPPORT program aimed to improve outcomes for women by reducing the severity and occurrence of perineal tears during birth with evidence-based interventions. WH was able to achieve an overall decrease in severe perineal tears by 48%.

WH has also launched 'LifeQI', an online quality improvement (QI) platform that supports teams to run QI projects and organisations to report on QI activity.

CRITERION: Clinical performance and effectiveness (Action 1.19 – 1.28)

The workforce has the right qualifications, skills and supervision to provide safe, high-quality health care to patients.

Provide a summary of the processes that are in place to meet this criterion.

WH's Best Care Framework describes a vision for Person-Centred, Co-ordinated, Right and Safe Care for all WH patients and focuses on the behaviours, strategies and organisational systems needed to achieve this vision. These systems are grouped under five headings (or pillars) – Leadership, Process, Workforce, Improvement, and the central pillar 'Patient First'.

The **Workforce** pillar focuses on recruiting and supporting a workforce with the right qualifications, skills and supervision to provide Best Care. Workforce management systems supporting our staff to provide Best Care focus on:

- **Supporting the workforce to understand their role and responsibilities for Best Care** – this is supported by articulation of the role and responsibilities for staff within the Best Care policy, framework and learning package. WH makes a concerted effort to translate much of the complex information that supports great clinical care into clear, readily available, clinician-friendly procedures and guidelines, and uses a range of variation monitoring methods including clinical quality registries, auditing, Morbidity and Mortality meetings, peer review and benchmarked data to support the ongoing review and improvement of care.
- **Appropriately orienting and training the workforce to provide Best Care** – this is supported by Best Care focused WH orientation, 'WeLearn' education packages and educators. WeLearn and Simulation training also support mandatory training, and cultural immersion training improves staff awareness of the Aboriginal and Torres Strait Islander health needs.
- **Ensuring clinicians are appropriately credentialed and work within agreed scope of practice** – this is supported by the WH Credentialling and Scope of Practice policy and procedures that are compliant with AHPRA and external guidelines, and cover medical, nursing and allied health staff. These procedures are supported by discipline specific credentialling committees and an online credentialling system (Cgov).

- **Routinely reviewing individuals' performance in provide Best Care** – this is supported by WH's Performance and Development system that includes annual performance reviews (titled Professional Development Plans at WH) and performance development planning.
- **Providing supervision to clinicians to provide Best Care** – this is supported by a range of discipline specific clinical supervision models and education resources.

The **Improvement** pillar supports staff to identify and address variation in clinical practice by focusing on:

- **Utilising purposeful information collection from audits, indicators and incidents to analyse, share and respond to identified risks and opportunities to improve Best Care** – this is supported by a Risk Management Framework that aligns to the International Standard ISO 31000:2009, an Incident Management System that meets the requirements of the Victorian Health Incident Management System (VHIMS), and a Variation Management approach that draws together processes such as clinical audits, data review, Morbidity and Mortality (M&M) meetings and the use of clinical quality registries.
- **Supporting improvement activity to maximise positive impact on patient care and outcomes** – this is supported by annual business and Best Care action planning, the Live Best Care approach for Improvement and Innovation and a dedicated team which assists staff in applying consistent quality improvement methodology. Our research team assists to translate research into practice to enhance delivery of evidence based practice.
- **Reporting and recognising Best Care Improvement activity** – this is supported by a WH Improvement Project Register, the WH 'Live Best Care' microsite, an annual Best Care week, publication of an annual Quality Account, and participation in external healthcare improvement conferences and awards programs.

How does the health service monitor the requirements of this criterion are being met and where is the information reported?

WH's Committee Structure incorporates discipline specific committees covering credentialing and scope of practice, and an organisation-wide Education and Learning Committee, while the WH Best Care Committee structure supports clinical care variation reporting from the ward to the Board.

The 'Cgov' system supports the monitoring of workforce governance, including professional registration and credentialing and scope of practice status, while data is accessed from the WeLearn platform to track staff engagement in training. In addition, the WH Monitoring and Performance (MaP) warehouse provides a central resource for a range of Best Care performance measures, including the engagement of staff in mandatory education and performance reviews

MaP is also a central resource for clinical variation reporting both internally and to the Victorian Agency for Health Information (VAHI). This Agency in turn provides benchmarking data on a range of clinical performance measures, as do the Clinical Registries to which WH subscribes.

WH staff provide feedback on whether they feel supported to deliver clinical practice and their professional growth through the annual state-wide People Matter Survey and via the 'Systems Supporting Best Care' survey accessed through the WH 'Live Best Care' learning package.

Have improvements been implemented?

WH is a rapidly growing health service that values proactive workforce management, maintaining a positive workplace culture and ensuring we are an employer of choice. All of

these were central to providing Best Care while meeting COVID-19 related surge requirements and ongoing workforce demand.

We continued to fill our nursing & midwifery graduate programs and the launch of a 'Grad+' program supports WH to continually attract the brightest and best. This innovative program includes 2 free post-graduate subjects accredited by 5 universities to support enhanced early career transition and life-long learning.

We were the first health service to implement the Registered Undergraduate Student of Midwifery (RUSOM) role and have significantly expanded the employment of Registered Undergraduate Student of Nursing (RUSON) roles.

In October 2022, Transition to Acute Care (TAC) program was launched. Providing an employment pathway for experienced nurses without acute care experience to join our nursing workforce.

In order to develop and retain our talented workforce, we have expanded the leadership program for emerging, newly appointed and experienced leaders across all disciplines. This includes launching the Emerging Leaders program which aims to boost the capabilities and confidence of upcoming leaders and the 'Stepping in' Senior Leadership Program aimed at senior managers from all employee cohorts.

In May 2023, WH launched a new Professional Practice Framework for our nurses and midwives. The Framework includes an achievement model of skill acquisition to support career planning and progression and outlines the support and opportunities available to assist both the development of individuals and teams.

The Allied Health workforce is implementing a Western Health model to advance skills of allied health professional and enhance career pathways to support skill development across all levels of experience, provision of mentoring, research training and review of performance development and supervision models based on feedback from the workforce.

A series of e-learning modules developed by Indigenous and non-Indigenous representatives from the Wandeat Bangoongagat Project Group are now available for all WH staff and volunteers. All staff are encouraged to undertake cultural awareness training. Staff in the Galinjera Maternity program and Aboriginal Outpatient clinic undergo tailored 1:1 cultural awareness training.

WH has increased the support for post graduate studies over the past three years. As a result, course participation rates increased from 60 in 2019 to 180 in 2023. This resulted in a 60% increase of employment and retention rates of post graduate qualified nurses.

We have also held our first Community of Practice for staff who identify as Aboriginal and/Torres Strait Islander, to ensure they can provide meaningful input into areas such as recruitment, retention, organisational policy, cultural events and cultural support.

A rapid-delivery project to enhance WH's Performance Dashboards has been undertaken over 2022-2023. The Performance Dashboard Project is an exciting opportunity to develop, test, and deploy a prioritised set of dashboards. The aim is to convert mass amounts of data into easy to navigate overviews, enabling staff to analyse performance indicators and develop actionable insights.

WH in partnership with VMIA (Victorian Managed Insurance Authority) have created and are currently implementing a 'Best Care Excellence & Improvement Program' (BCEIP). The main focus of this program is to utilise learning modules aimed to move the organisation from

contemporary quality and safety thinking to a proactive thought process using Safety-II methodology.

CRITERION: Safe environment for the delivery of care (Action 1.29 – 1.33)

The environment promotes safe and high-quality health care for patients.

Provide a summary of the processes that are in place to meet this criterion.

Building, plant and equipment at WH are maintained in compliance with relevant standards and codes, e.g. AS3003 'testing of patient treatment areas' and AS3551 'testing of biomedical equipment'. Engineering preventive and reactive maintenance is performed by in-house WH trade staff and external contractors if required. Work details are captured within Engineering's management system BEIMS with jobs linked to relevant asset codes, preventative maintenance schedules or project codes.

Cleaning schedules and cleanliness audits also support a safe environment for the delivery of care, as does the WH Occupational Health and Safety Team who provide tools and support to identify and address environmental hazards and risks.

WH has a range of organisational processes for the prevention and effective management of Occupational Violence and Aggression (OVA) for the protection of staff and others in the workplace. These reflect the principles of the Victorian DH Framework for Preventing and Managing OVA, and cover the domains of: Governance, Prevention, Training, Response, and Reporting and Investigation. WH has a Prevention and Management of OVA procedure with oversight provided by the WH OVA committee.

WH has a comprehensive 'Wayfinding' strategy applied across each of its sites. This is outlined in the WH Wayfinding and Signage Policy. This strategy focuses on identification of the most effective way to direct people through a space and includes printed information, design elements or architectural features, digital devices (for example kiosks) and human interactions (for example WH volunteer visitor guides).

Visitors have access to all designated public areas (unless access controlled or restricted during events such as the COVID-19 pandemic) during normal business hours of the hospital. Visitors with special circumstances can arrange visitation within restricted patient care areas and beyond normal business hours with the Nurse Unit Manager or Midwife Unit Manager, or the Nurse or Midwife in Charge. Where complex social situations, security or behavioural concerns have been identified, further assessment of visiting arrangements are undertaken, with security staff involvement as required.

WH has a strong commitment to improving Aboriginal and Torres Strait Islander health, by providing a culturally respectful, high quality, safe, collaborative and holistic health care organisation. WH's Aboriginal Health Steering Committee provides advice and direction to the organisation on matters relating to improving the health of Aboriginal patients and a welcoming environment.

A welcoming environment at WH includes acknowledgement plaques at the entrance of hospital sites, Aboriginal flags flying at main entry points and displayed in reception areas and boardrooms, artwork commissioned by Aboriginal artists, communication resources, and a

dedicated Wilim Berrbang (Aboriginal Health) Liaison Unit. Culturally sensitive health programs such as maternity care are also available to support Aboriginal health needs.

How does the health service monitor the requirements of this criterion are being met and where is the information reported?

Systems such as the BEIMS engineering management system, the WH RiskMan incident system and auditing and data programs support the reporting of information relating to the environment of care at WH.

The WH Committee Structure supports the review and action planning or implementation associated with monitoring and enhancing the care environment within WH.

Associated committees include a Capital Committee, an OVA Committee, an Aboriginal Health Advisory Committee and an Infection Prevention Committee.

An annual Quality Account publication reports on the environment of care at WH. This is submitted to the WH Board, the Victorian DH and is accessible to WH staff, volunteers and the community via the WH Intranet and Internet.

Have improvements been implemented?

The scale and scope of capital projects currently being undertaken at WH to enhance Best Care is unique in the State.

We have taken important steps toward the development of our new \$1.5 billion Footscray Hospital, with schematic design completed and construction is well progressed. Co-design of the new hospital environment with patients, carers, staff and the community is a key feature of the new hospital build. Construction is also well progressed to deliver 52 new hospital-based mental health beds and services on the Sunshine Hospital site in late 2023.

We have completed a Sunshine Hospital Emergency Department (SHED) expansion. This has been years in the making and with days of well over 300 presenting patients has increased the capacity of SHED to support demand and timely care.

The 2022/23 Victorian Government Budget included an investment of \$981 million in a new Melton Hospital to be run by WH. Once completed, the new hospital will have capacity to treat 130,000 patients each year and see almost 60,000 patients in the emergency department.

Face to face visits were limited during the COVID-19 pandemic however, at WH we understood how important social connection is and offered a program we called 'Virtual Visiting' to support our patients to video call family or friends.

WH staff reported over 400 occupational violence incidents in 2022/23, with over 35% of these resulting in a staff injury or illness. A number of initiatives have been rolled out to support our staff to predict and prevent occupational violence, and effectively and safely manage it when it does occur. These initiatives include awareness and education campaigns for staff and visitors, and expanded roll-out of a behaviours of concern risk assessment tool. WH also piloted the SafeWard Model, an exploratory and adaptable program of evidence-based nursing interventions, developed to strengthen existing principles of good nursing practice and promoting patient centred care by involving patients, their families and carers. Initiatives to support staff in predicting, preventing and managing occupational violence are having a positive effect on the number of significant incidents from violence and have attracted interest from other health services and external healthcare improvement Awards.

Informed by our WH Aboriginal Health Cultural Safety Plans, engagement of the Aboriginal community has led to a number of innovative, award-winning programs to support health needs in a culturally sensitive manner. These include an Aboriginal and Torres Strait Islander Outpatients Clinic with a focus on chronic disease management, and involvement in the Baggarrook Yurrongi program which revealed maternity care for First Nations mothers and babies can be improve through access to culturally safe continuity of maternity care.