Caring for our communities – healthier together

Rural Division

Operational Plan 2017-18

Darling Downs Hospital and Health Service

Queensland Government

Strategy and Planning Unit, Darling Downs Hospital and Health Service (DDHHS)

The design of the DDHHS 2017-18 Operational Plan templates including excel reporting tool is adapted from the Metro North Hospital and Health Service (MNHHS) Operational Planning template with the permission of MNHHS.

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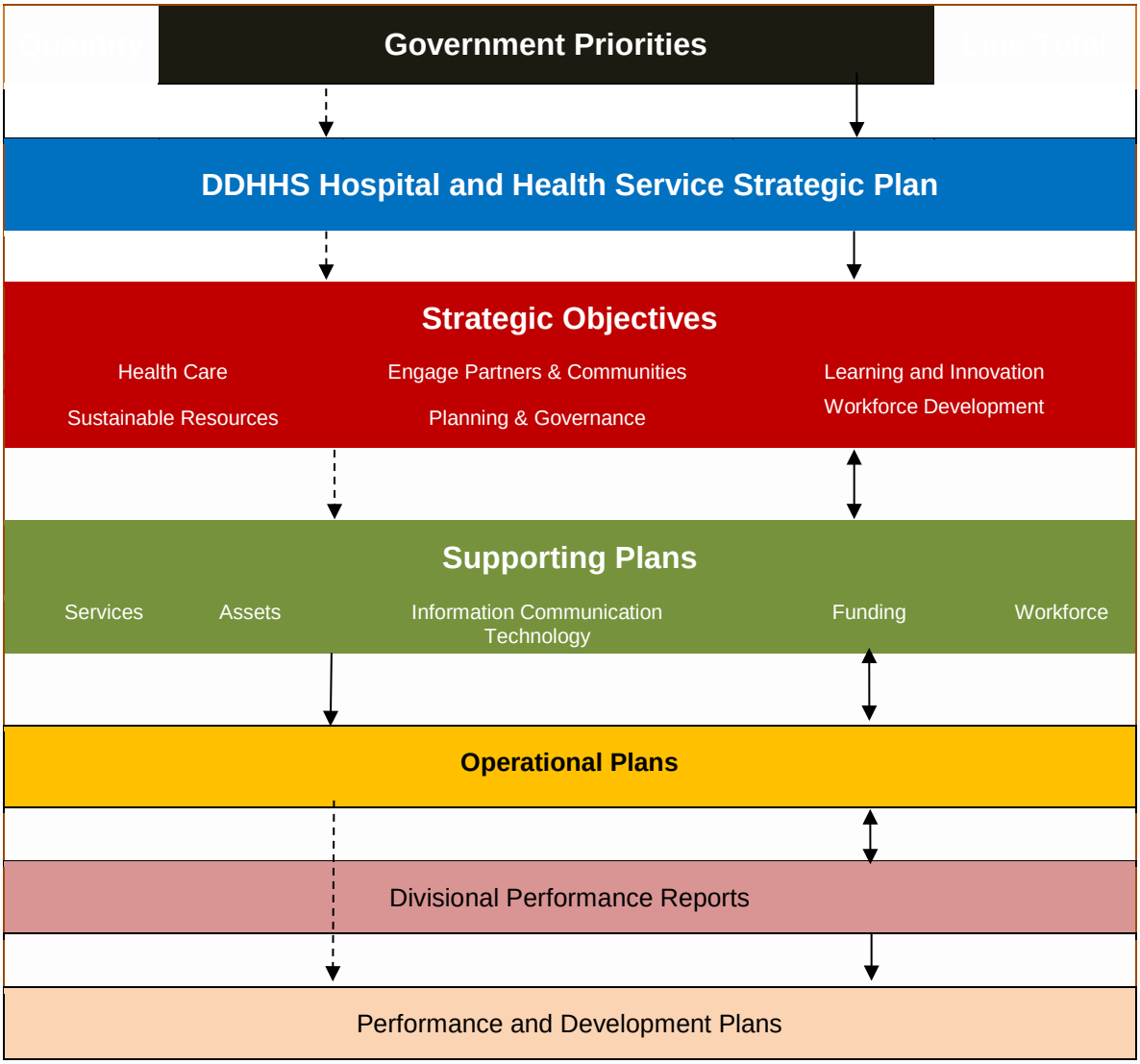
Planning Context

The Darling Downs Hospital and Health Service's (DDHHS) strategic planning approach ensures strategy and planning activities across the HHS, services and facilities are integrated vertically and horizontally. The information in this operational plan aligns with the Department of Premier and Cabinet's Agency Planning Requirements and Section 9 of the *Financial and Performance Management Standard 2009.*

The DDHHS's strategic planning framework supports a cascading approach for planning activities as depicted in Figure 1. DDHHS has one organisation-wide strategic plan with six objectives (Health Care, Engage Partners and Communities, Learning, and Innovation, Sustainable Resources, Planning and Governance and Workforce Development) and multiple strategies to support the implementation of the DDHHS strategic plan objectives.

Figure 1: Strategic planning framework



DDHHS Vision

Caring for our communities – Healthier Together

DDHHS Values

DDHHS Strategic Plan 2016-2020 Strategic Objectives

HC: Deliver quality evidence-based healthcare for our patients and clients

R: Ensure sustainable resources through attentive financial and asset administration

E: Engage, communicate and collaborate with our partners and communities to ensure we provide integrated, patient-centred care

P: Plan and maintain clear and focused processes to facilitate effective corporate and clinical governance

L: Demonstrate a commitment to learning, research, innovation and education in rural and regional healthcare

WF: Value, develop and engage our workforce to promote professional and personal wellbeing, and to ensure expert and dedicated delivery of services

Operational context

About the DDHHS

The Darling Downs Hospital and Health Service provides a comprehensive range of high-quality acute, sub-acute, mental health, drug and alcohol, oral health, residential aged care, and community health services. We deliver clinical services to approximately 300,000 people across 26 locations, including the major hospital in Toowoomba, regional and rural community hospitals, residential aged care facilities, multipurpose health services and community clinic facilities.

Our services cover the Local Government Areas of the Toowoomba Regional Council, Western Downs Regional Council, Southern Downs Regional Council, South Burnett Regional Council, Goondiwindi Regional Council, Cherbourg Aboriginal Shire Council and part of the Banana Shire Council (community of Taroom). This represents an area of about 90,000 square kilometres.

The Hospital and Health Service has a major teaching role, providing both undergraduate and postgraduate clinical experience for members of the multidisciplinary healthcare team. We have a strong focus on, and commitment to, service delivery and education and training and a thriving culture of research that delivers continuous service improvement and evidence-based care.

We are the largest employer in the Darling Downs, employing more than 5,000 people, with revenue of more than $700 million annually.

Our community

- 4% of the population identify as Aboriginal and Torres Strait Islander
- 17% of the population is aged 65 years or older
- 31% of the population falls within the first quintile when scored for socioeconomic disadvantage
- 64% of the population are overweight or obese weight

About the Rural Division

Purpose of Division

The purpose of the Rural Division is to deliver excellence in healthcare and optimise patient centred outcomes for our community. This is achieved by enabling safe, accessible, sustainable, and evidence based healthcare by a highly skilled and valued workforce.

Scope of Division

Rural Division has seven (7) regional hospitals, 11 smaller hospital/Multipurpose facilities and five (5) outpatient facilities to provide a range of acute, residential and community based health services. In addition, Rural has six (6) residential aged care facilities to provide residential and community based aged care services compliant with the Commonwealth Department of Health Aged Care Standards.
Rural Division provides a comprehensive range of community and secondary health services, Aboriginal and Torres Strait Island health programs, child and maternal health services, sexual health service, allied health services, and health promotion programs. Facilities also host Oral Health and Mental Health services, as well as non-clinical services, such as catering, cleaning, and laundry services.

Facilities and Reporting Relationships

Rural Division is organised into four (4) main clusters, each led by a Director of Nursing - Rural who reports directly to the Executive Director Medical Service and Rural. The clusters are:

- Aged Care
- South Burnett
- Southern
- Western

Operational plan

The following strategies identified in the Finance Division Operational Plan aim to support the district strategic objectives in achievement of the DDHHS vision *'caring for communities – healthier together'.*

Strategic Objective HC: Deliver quality evidence-based healthcare for our patients and clients

Strategy Ref. E.g. HC1	Actions	Owner	Timeframe	National standard or other relevant standards	Relevant DDHHS Value	Strategic Risk Ref Id and Risk Rating
HC1 HC2 HC3 HC4	Monitor and Maintain achievement against all System Performance Measures	EDMS&R	June 2018	ISO 9001:2015 8.2	Integrity	Community expectations,
HC4	Review and redesign organisational and management structure to improve the Aboriginal and Torres Strait Islander health service delivery model	EDMS&R, DSP	June 2018	ISO 9001:2015 8.2	Compassion	12 Health Care and Social Reform
HC5	Expand Services in rural facilities - Delivery of Renal Haemodialysis Outreach and Telechemotherapy across some DDHHS Rural Hospitals including Warwick Hospital.	EDMS&R, DDMS-R, DON's Rural,	June 2018	ISO 9001:2015 8.2	Innovation	Workforce, Community expectations, Funding

The KPI's of this objective are:

	HC1. Deliver core health services
	RHAC WAU - Total (Actual), ABF, non ABF meeting target
	HC2. Improve access to services
	Qld Emergency Access Target (QEAT) - 4 hrs (calendar year)
	N.E.S.T - ES % treated in time - Cat 1 (30 days) – Rural meet target 98%
	N.E.S.T - ES % treated in time - Cat 2 (90 days) – Rural meet target 95%
	N.E.S.T - ES % treated in time - Cat 3 (365 days) – Rural meet target 95%
	N.E.S.T - sum of cases with overdue days Cats 1, 2 & 3 = 0 (Dalby, Goondiwindi, Kingaroy, Stanthorpe & Warwick)

	Outpatient clinics - 98% seen in time - Cat 1 (30 days)
	Outpatient clinics - 95% seen in time - Cat 2 (90 days)
	Outpatient clinics - 95% seen in time - Cat 3 (365 days)
	HC3. Ensure safe and quality health outcomes
	No. of low mortality rate DRGs (deaths)
	Hand hygiene compliance (all staff) (RHAC)
	HC4. Work to deliver Aboriginal and Torres Strait Islander health and support services in line with Closing the Gap
	ATSI discharge against medical advice – improve performance to meet target 1%
	% of ATSI Clients giving birth with more than 5 Antenatal visits
HC4	Organisational realignment completed and new management structure implemented
HC5	Telehealth consultations (OPD) - RURAL (Target 10% increase on prior year actual)
HC5	Number of patients having chemotherapy, haemodialysis in rural hospitals Annual Reduction in PTSS costs

Strategic Objective R: Ensure sustainable resources through attentive financial and asset administration						
Strategy Ref. E.g. R1	**Actions**	**Owner**	**Timeframe**	**National standard or other relevant standards**	**Relevant DDHHS value**	**Strategic Risk Ref Id and Risk Rating**
R2	Manage expenditure to ensure Division maintains EOY balanced financial operating position	EDMS&R,	June 2018	ISO 9001:2015 7.1	Integrity	1 Funding
R2	Progress expenditure of allocated capital prioritisation funds	EMS&R	June 2018	ISO 9001:2015 7.1	Integrity	1 Funding
R5	Implement and roll out Leecare (Aged Care) & Communicare (Community) software solutions (in collaboration with Infrastructure Division)	EMS&R	June 2018	ISO 9001:2015 7.1	Integrity	1 Funding
R6	Redevelop - Warwick Emergency Department and CSSD and Kingaroy ED	EDMS&R, DON's Rural, DON/FM, EDI	June 2018	ISO 9001:2015 7.1.3	Innovation	Funding, Community Expectations, Infrastructure
The KPI's of this objective are:						
R2	FY balanced or surplus forecast operating position					
R2	Allocated capital prioritisation funds 100% expended					
R5	Software solution operational on time in budget & without service disruption					
R6	Kingaroy and Warwick ED redevelopments completed and operational					

Strategic Objective E: Engage, communicate and collaborate with our partners and communities to ensure we provide integrated, patient-centred care						
Strategy Ref. E.g. E1	**Actions**	**Owner**	**Timeframe**	**National standard or other relevant standards**	**Relevant DDHHS value**	**Strategic Risk Ref Id and Risk Rating**
E3	Press Ganey Patient Experience Report to maintain patient experience result at the 75th percentile across all services	DON's Rural, EDMS&R, DDMS-R, DON/FM	June 2018	Standard 2 NSQHS	Compassion	Community Expectation, Patient Safety
E3	Establish a Community Advisory Network (CAN) in alignment with the DDHHS Community Engagement Strategy for all clusters • Training for network members • Formal meetings bi-monthly and minutes submitted to DDHHS Consumer Engagement Service	DON's Rural, EDMS&R, DDMS-R	June 2018	Standard 2 NSQHS	Compassion	Community Expectations
The KPI's of this objective are:						
E3	Press Ganey patient experience number reported with 10% increase target					
E3	Each cluster has a CAN that has a suitable representative/s on cluster management meetings and recruitment processes for key positions (panel member)					

Strategic Objective P: Plan and maintain clear and focused processes to facilitate effective corporate and clinical governance						
Strategy Ref. E.g. P1	**Actions**	**Owner**	**Timeframe**	**National standard or other relevant standards**	**Relevant DDHHS value**	**Strategic Risk Ref Id and Risk Rating**
P2	Develop and implement a transition strategy for patients from Hub Hospitals to other DDHHS Hospitals	EDMS&R, DDMS-R, DON's Rural,	June 2018	ISO 9001:2015 8.2	Innovation	Workforce, Community expectations, Funding
P5	Develop a consistent process for rural division credentialed clinicians to ensure • maintenance of professional standards are documented, monitored, and managed to meet recommendations (courses and frequency) of DDHHS credentials committee • Explore contemporary midwifery options to support consumer's choices for maternity clients of birthing Hospitals.	EDMS&R, DDMS-R	Ongoing	NSQHS 1	Integrity	Workforce, Patient Safety

The KPI's of this objective are:	
P2	Hub Hospital Model implemented and assessment report completed
P5	% credentialed clinicians in rural hospitals
P5	Contemporary midwifery model implemented at identified rural sites. Patient experience reports completed.

Strategic Objective L: Demonstrate a commitment to learning, research, innovation and education in rural and regional healthcare						
Strategy Ref. E.g. L1	Actions	Owner	Timeframe	National standard or other relevant standards	Relevant DDHHS value	Strategic Risk Ref Id and Risk Rating
	Nil to report					
The KPI's of this objective are:						

Strategic Objective WF: Value, develop and engage our workforce to promote professional and personal wellbeing, and to ensure expert and dedicated delivery of services						
Strategy Ref. E.g. WF1	Actions	Owner	Timeframe	National standard or other relevant standards	Relevant DDHHS value	Strategic Risk Ref Id and Risk Rating
WF1	Facilities to develop and implement action plans to increase staff engagement % from 2017 Cultural Survey Results by 10% in the 2019 survey • Workplace Cultural Action Plans due by 30 June 2017 • Progress update to actions quarterly	DON's Rural, EDMS&R, DDMS-R, DON/FM, DAC	June 2018	ISO 9001:2015 7.1.4	Courage	Workforce
WF6	Actively monitor staffing KPI's and ensure within target	EDMR&S	June 2018	ISO 9001:2015 7.1.4	Courage	Workforce
The KPI's of this objective are:						
WF1	Improve Division culture by one performance bracket					
WF1	% of staff completed Cultural Practice Program					
WF4	85% of Staff Completed all Mandatory Training and ePAD					

Appendix – Additional Rural Division Planning Initiatives, Not Included in combined DDHHS Operational Plan. **Monitored by Rural Division but not included in quarterly reporting of progress against operational plan to HSCE.**

Strategic Objective HC: Deliver quality evidence-based healthcare for our patients and clients

Strategy Ref. E.g. HC1	Actions	Owner	Timeframe	National standard or other relevant standards	Relevant DDHHS Value	Strategic Risk Ref Id and Risk Rating
HC3	Develop and implement behaviour management strategies for all RACFs	DAC	June 2018	ISO 9001:2015 10	Dignity	Workforce, Patient Safety
HC5	Expand Services in rural facilities • Surgical Services - Endoscopy, Gynaecology, Tonsillectomies	EDMS&R, DDMS-R, DON's Rural,	June 2018	ISO 9001:2015 8.2	Innovation	Workforce, Community expectations, Funding
HC2	Develop and implement Model of Service Delivery for Community Health focusing on key objectives for health priorities Model of Service to define: • Organisational structure of Community Health Service in South Burnett • Roles and Responsibilities • Performance Measures • Develop a Community Care Model of Service realignment that effectively responds to needs under HCP reforms and NDIS	EDMS&R, DON's Rural, DON/FM EDNM& S	June 2018	ISO 9001:2015 8.2	Innovation	Workforce, Community expectations, Funding

The KPI's of this objective are:

HC3	Number of management plans in RAC, link to cultural survey and patient experience results?
HC2	Develop new community care structure and present to EMC (a lot of the Community care KPI's are the current KPI's eg, smoking cessation, DAMA, Indigenous, antenatal)
HC2	NDIS client hours
HC2	% of total Home Care Packages (prev CACPS) occupied, % of total Transition Care Packages (TCP) occupied

Strategic Objective R: Ensure sustainable resources through attentive financial and asset administration						
Strategy Ref. E.g. R1	**Actions**	**Owner**	**Timeframe**	**National standard or other relevant standards**	**Relevant DDHHS value**	**Strategic Risk Ref Id and Risk Rating**
R1	Initiate RACF Infrastructure Blueprint that identifies Aged Care specific built environment plans for the future	DAC	June 2018	ISO 9001:2015 7.1.3	Innovation	Community Expectations, Infrastructure
The KPI's of this objective are:						
R1	RAC beds increase per month					

Strategic Objective P: Plan and maintain clear and focused processes to facilitate effective corporate and clinical governance						
Strategy Ref. E.g. P1	**Actions**	**Owner**	**Timeframe**	**National standard or other relevant standards**	**Relevant DDHHS value**	**Strategic Risk Ref Id and Risk Rating**
P2	Participate in reporting realignment and restructure of Aged Care Cluster.	EDMS&R	Jan 2018	NSQHS 1	Integrity	Workforce
P2	Participate in Medical Workforce Redesign Project review to be undertaken by Queensland Country Practice.	DON –Rural Western, EDMS&R, DDMS-R	Jan 2018	NSQHS 1	Integrity	Workforce
The KPI's of this objective are:						
P2	Aged Care Cluster restructure and realignment completed					
P2	Present Workforce report to Board with recommendations for financial integrity, sustainability and succession planning					

Strategic Objective L: Demonstrate a commitment to learning, research, innovation and education in rural and regional healthcare						
Strategy Ref. E.g. L1	**Actions**	**Owner**	**Timeframe**	**National standard or other relevant standards**	**Relevant DDHHS value**	**Strategic Risk Ref Id and Risk Rating**
L2	Line Managers and future leaders in all Clusters to undertake Management Development Program (MDP)	DON's Rural, EDMS&R, DDMS-R, DON/FM, DAC	June 2018	ISO 9001:2015 7.2	Innovation	Patient Safety, Workforce
L3	Develop partnership and implementation of the rural training facilities at Dalby.	DON –Rural Western, EDMS&R, DDMS-R	June 2018	ISO 9001:2015 7.2	Innovation	Patient Safety, Workforce, Funding
The KPI's of this objective are:						
L2	100% of line managers (all disciplines) have completed MDP					
L3	Requirement to complete training is included in start-up/orientation					

Strategic Objective WF: Value, develop and engage our workforce to promote professional and personal wellbeing, and to ensure expert and dedicated delivery of services						
Strategy Ref. E.g. WF1	Actions	Owner	Timeframe	National standard or other relevant standards	Relevant DDHHS value	Strategic Risk Ref Id and Risk Rating
WF3	Develop a nursing recruitment plan that considers: • Attraction strategies for recruitment and retention • Succession planning • Additional clinical and emotional support for junior nurses	DON's Rural, EDMS&R, DDMS-R, DON/FM, EDNMS	June 2018	ISO 9001:2015 7.1.2	Dignity	Workforce, Patient Safety, Funding
WF5	Staff Wellness model is promoted across the all Clusters and Aged Care with the identified wellness champions working together	DON's Rural, EDMS&R, DDMS-R, DON/FM, DAC	June 2018	ISO 9001:2015 7.1.4	Compassion	Workforce
The KPI's of this objective are:						
WF3	Clinical positions filled in required time					
WF5	Wellness champions report their role is supported by the Division					