

Quality of care reports 2013–14 recommended reporting



Publishing and submission timelines

As part of the *2013–14 Policy and funding guidelines*, all Victorian health services are required to publish an annual quality of care report for the financial year 1 July 2013 to 30 June 2014. Six copies of the report are to be submitted to the Department of Health by **31 October 2014** to:

Terry Symonds
Director
Sector Performance Quality and Rural Health Branch
Department of Health
50 Lonsdale Street
GPO Box 4541
Melbourne Vic 3001

If you have any queries regarding the guidelines and timelines, please contact:

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A copy of these guidelines can be downloaded from the Department of Health's Consumer, Carer and Community Information Program's website at:
<http://www.health.vic.gov.au/consumer/pubs/index.htm>

Purpose of quality of care reports

The quality of care report should describe the quality and safety systems, processes and outcomes of the health service. The primary audience includes consumers (patients), carers and the health service community. Health services may also target other audiences, such as health service staff and other key stakeholders.

Health services should consult with consumers, carers and community members and/or their community advisory committee about the specific content of their annual quality of care report.

Presentation and distribution

The presentation of the report is important. It should:

- be understandable and accessible to a lay audience
- use clear formats and layouts
- be an appropriate length
- be interesting to read
- use consumer and staff stories, with their permission
- demonstrate the extent to which staff, consumers, carers and community groups were involved in developing the report, and in improving health services broadly
- demonstrate a mechanism for incorporating feedback
- show how the previous year's feedback has been used to improve current reporting.¹

All performance data published in an annual quality of care report should have a commentary, which is clear to a lay reader. It should explain:

- what the data measures
- how to interpret the figures in the report
- how the health service uses the data to improve care.

Where statutory immunity provisions apply, information will not be available for public scrutiny. In these cases the health service must demonstrate that it has clear accountable management and clinical systems to review this information and respond appropriately where performance is unsatisfactory.

Health services must report on the steps taken to ensure quality of care reports are readily available to the community for which they are written. For example, the report may be published on the service's website, available in waiting areas, the local newspaper or in local government newsletters.

It is important that health services report on the outcomes of the evaluation of the previous year's report. The report should address feedback from consumers, carers and community members, and highlight key changes to the report's style, content and information.

¹ Currie K, Spink J and Rajendran M 2000, *Well-written health information: a guide. Communicating with consumers series*. Victorian Government Department of Human Services, Melbourne, viewed 1 April 2011, <http://www.health.vic.gov.au/consumer/downloads/dhs1074.pdf>

Recommended reporting

The following recommended quality and safety areas should guide the reporting process. These recommendations should be reviewed by the health service, together with your community, to determine the most appropriate measures to report on in relation to your service type, community and geographic location. The purpose of the report, which is to describe the quality and safety systems, processes and outcomes of the health service, needs to guide this process.

Consumer, carer and community participation

Consumers, carers and community members include people living with a disability, people from diverse cultural and religious experiences, socioeconomic status and social circumstances, sexual orientations and health and illness conditions.

Recommended reporting areas for 2013-14 in consumer, carer and community participation include for:

- all health services the participation indicators and priority actions in the *Doing it with us not for us: Strategic direction 2010-13* policy found at <http://www.health.vic.gov.au/consumer/>
- public health services the key result areas 1 to 4 of the Improving Care for Aboriginal Patients (ICAP) program as specified in the guidelines at <http://www.health.vic.gov.au/aboriginalhealth/>
- public health services reporting on the progress towards achieving the six standards of a health service's cultural responsiveness plan, as specified in the *Cultural responsiveness framework: Guidelines for Victorian health services* at <http://www.health.vic.gov.au/cald/>
- registered community health services the partnerships with Aboriginal communities and organisations; responses to chronic and complex conditions; and initiatives around refugee health.

The focus for all health services should remain on how quality systems and measures are used to improve quality and safety. By giving examples and telling a consumer's story (with their permission) you can describe how a sample of the standards, result areas and indicators specified at the above links were achieved. Services may also choose to discuss changes implemented as a result of consumer surveys and other consumer, carer and community engagement work

Quality and safety

1. Using the principles of quality and safety in healthcare² public health services should identify at least four key measures to report on annually. These should include:
 - preventing and controlling healthcare associated infections
 - medication safety
 - preventing falls and harm from falls
 - preventing and managing pressure injuries
 - clinical indicators for dental services
 - safe and appropriate use of blood and blood products.

Health services operating residential aged care services should also report against their performance over time for each of the five public sector residential aged care quality indicator domains. The indicators are:

- pressure ulcers
- falls and fractures
- use of physical restraint
- multiple medication use
- unplanned weight loss.

The resource manual for the residential aged care service quality indicators is available at: <http://www.health.vic.gov.au/agedcare/publications/resourcemanual.htm>

Registered community health services should report on **infection control** and cleaning and **clinical indicators for dental services**, where these services are provided.

2. A report of the health service's review of their local clinical governance policy against the *Victorian clinical governance policy framework* is required in the annual quality of care report. An organisational readiness checklist, guidebook and toolkit are provided to assist health services in meeting this requirement and can be found at: http://www.health.vic.gov.au/clinrisk/publications/clinical_gov_policy.htm.
3. Accreditation status across all service areas.
4. Reports should also refer to quality improvement and applied research projects and describe how the findings from research will be applied to improve ongoing service delivery.

2 Australian Commission on Safety and Quality in Healthcare 2010, *Australian quality and safety framework*. Australian Commission on Safety and Quality in Healthcare, viewed 3 June 2011, http://www.safetyandquality.gov.au/internet/safety/publishing.nsf/Content/com-pubs_NSQF-con

Helpful resources

Continuity of care

The report should show how all health services respond to the needs of consumers, their families or carers and the community across the continuum of care. Examples of responses to the growth in the number of people with Ambulatory Care Sensitive Conditions, including through partnerships with other providers are expected. Health services should provide examples or stories that show how these initiatives work in practice. This may include:

- preventative
- acute
- rehabilitation
- residential care flows and linkages
- clinical networks
- Aboriginal Community Controlled Health Organisations
- primary
- rural consumers travelling for care
- subacute
- integrated cancer services
- vulnerable children and families
- human and community services

Other areas of interest for the community include how health services ensure access and discharge or transfer practices meet the needs of consumers. Common examples of indicators in this area are:

- the percentage of general practitioners notified of emergency admissions within 24 hours
- if general practitioners receive discharge summaries within one week
- percentage of consumers with chronic and complex conditions with care plans
- results of the Statewide Service Coordination Survey <http://www.health.vic.gov.au/pcps/coordination/cqi.htm>

Consumers are also interested in **health promotion** activities. Registered, and all other health services, are encouraged to include progress in this area in their quality of care report. Resources are located at: http://www.health.vic.gov.au/communityhealth/health_promotion.htm

1. Aboriginal Health Promotion and Chronic Care partnership initiative details and tools can be found at http://www.health.vic.gov.au/aboriginalhealth/programs/partnership_program. To request a copy of the *ICAP and Koori mental health liaison officer developmental review* (June 2011) please contact the Department of Health's Aboriginal Health branch via email at: aboriginalhealth@health.vic.gov.au.
2. Aboriginal health resources at: <http://www.health.vic.gov.au/aboriginalhealth/>
3. Best care for older people everywhere – The toolkit at: <http://www.health.vic.gov.au/older/toolkit/>
4. Centre for Culture Ethnicity and Health <http://www.ceh.org.au/resources/index.html>
5. Children at risk resources including 'Best Practice Framework for Acute Services' <http://www.health.vic.gov.au/childrenatrisk/>
6. Clinical Networks resources at: <http://www.health.vic.gov.au/clinicalnetworks/>
7. *Credentiailling and defining the scope of clinical practice for medical practitioners in Victorian health services – a policy handbook and Partnering for performance: A performance development and support process for senior medical staff* available at: <http://www.health.vic.gov.au/clinicalengagement>
8. Dental care clinical indicators are available at: <http://www.dhsv.org.au/default.asp>
9. Health service accreditation for Victorian public health services at: <http://www.health.vic.gov.au/accreditation>
10. Integrated Cancer Services resources are at: <http://www.health.vic.gov.au/cancer/>
11. Primary and community health clinical governance and credentialling resources at: <http://www.vha.org.au/> (also includes: *Community participation in community health quality of care reporting*)
12. Pressure ulcer resources for reporting at: <https://www.health.vic.gov.au/pressureulcers/puci.htm>
13. Primary health program and initiative resources at: <http://www.health.vic.gov.au/pch/index.htm>
14. Quality Improvement and Community Services Accreditation Inc: <http://www.latrobe.edu.au/aipc/qicsa/>
15. Quality of Care Report Training for Stand Alone Community Health Services 2006 resources located at: <http://www.health.vic.gov.au/consumer/pubs/training.htm>

16. Quality use of medicines (QUM) program has a range of resources including high risk medicines initiatives and tools to measure medication safety systems accessible at: <http://www.health.vic.gov.au/qum/index.htm>
17. National Prescribing Service resources at: <http://www.nps.org.au/>
18. Residential Aged Care Accreditation Standards at: <http://www.accreditation.org.au/AccreditationStandards>
19. *Review of existing models of reporting to consumers on health service quality: summary report and guidelines*. The full text is available at: <http://www.participateinhealth.org.au/clearinghouse/#R>
20. Rural consumers travelling for health care resources are at: http://www.health.vic.gov.au/consumer/rural_consumers.htm
21. Safe and appropriate use of blood and blood products resources are at: <http://www.health.vic.gov.au/bloodmatters>
22. Safe and appropriate use of blood and blood training products- BloodSafe eLearning Australia at: <https://www.bloodsafelearning.org.au/>
23. Statewide Emergency Program resources at: <http://www.health.vic.gov.au/emergency/>
24. The Centre for Cultural Diversity in Ageing has resources for encouraging and enabling participation of culturally diverse older people at: <http://www.culturaldiversity.com.au/>
25. Victorian Quality Council has a range of resources including: *Talking with your doctor: A guide for older people; consumer health literacy tools; The next steps: Having conversations on life and death* (a training resource for doctors); and the Victorian Patient Safety Climate Survey available at: <http://www.health.vic.gov.au/qualitycouncil>.
26. Well proud: A guide to gay, lesbian, bisexual, transgender and intersex inclusive practice for health and human services at: <http://docs.health.vic.gov.au/docs/doc/Well-Proud:-A-guide-to-gay--lesbian--bisexual--transgender-and-intersex-inclusive-practice-for-health-and-human-services>
27. Workshop resources on consumer, carer and community participation standards and indicators 2011: <http://www.health.vic.gov.au/consumer/conferences.htm>

Consumer reporting—relevant websites

<http://www.pcori.org/> (new research to assist consumer decision making)

<http://www.nihpromis.org/> (new tools to measure consumer reported outcomes)

<http://www.safetyandquality.gov.au/>

<http://www.healthissuescentre.org.au/>

<http://www.health.vic.gov.au/consumer>

<http://www.latrobe.edu.au/chcp/>

<http://www.aushealthreview.com.au/publications>

<http://www.kingsfund.org.uk/>

<http://www.health.state.ny.us/nysdoh/healthinfo/index.htm>

http://www.health.state.ny.us/nysdoh/heart/heart_disease.htm

<http://www.nhmrc.gov.au/publications/synopses/cp72syn.htm>

<http://www.mhsip.org/about.html>

<http://www.ahrq.gov/>

To receive this document in an accessible format phone Sector Performance, Quality and Rural Health Branch on 03 9096 6176.

Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

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