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Highlights and Achievements

• The 2009–10 reporting year has been a dynamic year for The Ambulance Service of New South Wales, with numerous positive changes evolving within the organisation.

• Significantly, positive cultural change is gaining momentum throughout Ambulance, the culmination of numerous staff-focused reforms implemented throughout recent years. A noticeable cultural shift is now emerging, and extensive Statewide training and internal publications continue to advocate staff support services and Our Values – the communal document through which our shared organisational values are promoted.

• Further driving this positive cultural shift within Ambulance are extensive developments across clinical, operational and corporate sectors of the organisation.

• The clinical practice improvements of recent years have continued, and are summarised in the highlights section. The Clinical Assessment and Referral (CARE) project has been expanded to provide non-emergency alternatives to low risk, low acuity patients – and 785 paramedics across the State are now able to provide this model of care. The Extended Care Paramedic (ECP) program now extends its operational coverage to 11 locations across both metropolitan and regional areas, enabling ECPs to deliver extended care to patients, thereby alleviating pressures on emergency responders. Finally, 77% of the paramedic workforce have now received Mental Health training – with 1,921 paramedics authorised to exercise powers under the Mental Health Act (2007).

• In addition, the Ambulance Research Institute (ARI) is established with a substantial research program underway and scholarships awarded to research fellows. The ARI has completed a number of large epidemiological studies into chest pain, stroke and spinal cord injury and there have been multiple papers submitted to peer-reviewed clinical journals.

• Operational changes during the year included the introduction of the Special Operations Team paramedics, which has resulted in the expansion of rapid response capability. The specialist training and mobilisation of these single paramedic response units has enhanced the response and access capabilities of Ambulance. In addition, the Control Centre Improvement Project delivered Statewide standardisation of Control Centre procedures, a new training curriculum, improved communications with Control Centre staff, new uniforms, new dedicated Control Centre trainers and implemented technological upgrades and associated training. The Improvement Project also delivers the benefit of separating the Non-Emergency Patient Transport functions of the Control Centres, which will contribute to improved call answering times and reducing emergency response times.

• These major operational reforms have directly benefited how quickly we respond to medical emergencies; helping to absorb pressures from increased hospital delays and enabling Ambulance to largely maintain response performance. Accordingly, I would like to commend the resilience and professionalism shown by Ambulance staff, despite these increasing pressures.

• Upgrades and technological enhancements continue to be implemented throughout Ambulance. New equipment is now in use, including mechanical restraining devices, 60 new ambulance stretchers and a further two Megalift vehicles for use in bariatric and special operations. The Dispatch system was successfully completed in February 2010, providing a platform for further improvements in Triple Zero call taking and ambulance dispatch. In addition, the Ambulance electronic medical record has been successfully trialled at eight Ambulance stations, and preparations are underway for a Statewide rollout to be delivered over the next two years.
• The Ambulance Service of NSW has not only embraced these changes, but we have proactively facilitated internal communication channels in support of each project roll out. Our internal staff publication, Sirens, has significantly assisted with this process and it was re-launched in February 2010 as a hard copy, monthly publication. Since its launch, Sirens has received widespread supportive written feedback from staff who are responding positively to this new level of open and robust internal communication.

• Our commitment to our organisation is further strengthened by our focus to do the best for our patients, and this is reflected by our core values: team work, professional standards of behaviour, responsibility and accountability, care and respect. Thank you to every member of the Ambulance Service, our health system and emergency service colleagues and Government members for their support during this year – and indeed, every year.
Highlights and Achievements

Assessment

• 2009 QSA Statewide and individual PHO reports completed
• Verification of 2009 results underway
• 2010 QSA thematic survey under development
• Education and Training
• Clinical Leadership Program
• DETECT Supertrainers program
• Hand Hygiene Gold Assessors and Ward Auditor training under the auspices of the National Hand Hygiene Initiative
• Conference and seminar presentations

New Project Focus Areas

• Between the Flags: Recognition and Management of the Deteriorating Patient launched
• Between the Flags: Recognition and Management of the Deteriorating Paediatric Patient under development
• Antibiotic Stewardship in ICUs
• Health Literacy

Public Reporting

• Incident Information Management in the NSW Public Health System July-Dec 2008 (IIMS)
• Clinical Incident Management in the NSW Public Health System Jan-June 2009 (IIMS)
• Chartbook 2008 released
• Chartbook 2009 in preparation
• Activities of the Special Committee Investigating Deaths Under Anaesthesia – 2008
• Collaborating Hospitals Audit of Surgical Mortality (CHASM) Case Booklet: January 2008 – June 2009
• Individual Report to A Participating Surgeon January 2008 – June 2009
• Quality Systems Assessment Statewide Reports completed and awaiting release

Partnerships

• Regular meetings with Agency for Clinical Innovation (ACI), Clinical Education and Training Institute (CETI), Bureau of Health Information (BHI) and the Clinical Excellence Commission (CEC) who make up the Four Agencies recommended by the Garling Report
• The Clinical Excellence Commission and the Agency for Clinical Innovation have a joint Board
• Citizens Engagement Advisory Council
• Clinical Council
• Shared quality and safety reporting function with NSW Department of Health
• Hospital Alliance for Research Collaborative (HARC)
• Centre for Health Record Linkage (CHeReL)
• Regular meetings with Australian Commission for Safety and Quality in Health Care (ACSQHC)
• Conduct quality and safety seminars in conjunction with ACSQHC
Research

• Ian O’Rourke PhD Scholar
• Database to support Collaborating Hospitals’ Audit of Surgical Mortality (CHASM)
• Hospital Alliance for Research Collaborative (HARC)
• Centre for Health Record Linkage (CHeReL)

Strategic Planning and Development

• The new joint Board of the CEC and ACI held a planning meeting to review the Strategic Plans (2009–2012) of both organisations to identify areas of synergy and/or overlap
• Development of Information/Communication Technology Strategic Plan
• Recruitment of Director, Patient Based Care

Publications

• Annual Report 2009
• Chart Book 2008
• Clinical Focus reports from Review of RCAs and/or IIMS Data:
  - Recognition and Management of Sepsis
  - Retrieval and Inter-hospital Transfer
  - Should I resuscitate? ’No CPR’ orders
• Medication Incidents Involving Hydromophone (authored with NSW TAG)
• Quality Use of Antimicrobials in Intensive Care – fact Sheet One – Quality Use of Lincosamide Antibiotics
• Incident Management in the NSW Public Health System January-June 2008
• Incident Information Management in the NSW Public Health System July-Dec 2008 (IIMS)

• Position Paper – agreed way forward. Review of Serious Clinical Incident Investigation Processes (RCA) in NSW
• Eleven area health service specific (IIMS) reports (NSW IIMS Data Report for Health Services) for July – December 2008
• Clinical Incident Management in the NSW Public Health System Jan-June 2009 (IIMS)
Justice Health

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Chief Executive: Julie Babineau

Chief Executive’s Year in Review

The year under review has been a rewarding one for Justice Health. The numerous achievements throughout the organisation highlight the variety of work undertaken by Justice Health staff and the impact this work has had on our patients. Justice Health continues to provide high quality, safe and effective clinical care to patients in the context of an increasing population.

This year a Health Reform Committee was established to oversee a range of important health service reforms. Clinicians from various areas throughout Justice Health are representatives on the Health Reform Committee. The Health Reform Committee is currently overseeing and providing expert advice on the implementation of the Caring Together Action Plan throughout Justice Health worksites.

In 2009 a staff climate survey was conducted by external researchers Best Practice Australia. The results of this survey highlighted improvements the organisation has made since the previous organisational survey in 2005.

Justice Health is committed to continually improving the organisational culture and staff satisfaction levels throughout all worksites. To consolidate improvements since the 2005 survey and identify additional opportunities for improvement, a team of Justice Health staff are undertaking a comprehensive consultation process obtaining feedback from staff. The feedback obtained during this consultation process will be used to develop a culture change strategy that will be applied throughout Justice Health.

Successful operations of the Long Bay Hospital and Forensic Hospital continued in 2009–10. Since commissioning of these two hospitals Justice Health has continued to consolidate gains and improvements in the services we provide to our patients. Ensuring patient and staff safety continues to be a priority in both these Hospitals.

During 2009 the Centre for Health Research in Criminal Justice completed the NSW Inmate Health Survey. This survey highlights the current challenges for Justice Health and contributes to previous research studies on the health of prisoners in NSW. The Inmate Health Survey will inform policy and planning for both Justice Health and other agencies who provide services to custodial populations in NSW.

I am pleased to report that The Hon Patricia J. Staunton AM has been appointed by the Minister for Health as the new Chair of the Justice Health Board. Ms. Staunton is a former Deputy President and Judicial member of the Industrial Relations Commission of NSW and was Chief Magistrate of the Local Courts of NSW for three years from 1999 to 2002, having being appointed a Magistrate in 1997.
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Highlights and Achievements

- The Children’s Hospital at Westmead is now home to Australia’s first Chair of Adolescent Medicine, Prof Kate Steinbeck. Prof Steinbeck is an internationally recognised authority on adolescence, with a special research interest in the endocrinology of puberty, obesity and insulin resistance and transition from paediatric to adult care in chronic illness and disability.
- The Heart Centre for Children has introduced a new treatment, using a catheter to replace deteriorating heart valves. This paves the way for major changes in the way children with cardiac conditions are treated, removing the need for risky open heart surgery and lengthy recovery periods.
- A new MRI machine was purchased and installed in 2010. NSW Health funded the purchase of the machine and the Sargent’s Pies Charitable Foundation donated another $2.2 million for the building works needed for installation. This new machine replaces the old MRI machine which is now 14 years old and will be decommissioned.
- The Children’s Hospital at Westmead marked an important milestone – 100 kidney transplants. Since the first transplant was performed at the Hospital in 1995, this life-saving surgery has been refined by the Transplant Team and the increase in living related donors and improvements in post-operative care has revolutionised treatment of young patients.
- The Butterfly Wing was opened, an Australian first in the treatment of eating disorders. The wing consists of two purpose-built accommodation units that allow whole families to stay for two to four weeks so parents and siblings can play an active and positive role in the physical and psychological treatment and recovery of their child from an eating disorder.
- The Kids Research Institute was officially launched, cementing The Children’s Hospital at Westmead’s place in the global research community. Researchers at the Kids Research Institute are committed to discovering new ways to help improve the health of children and to becoming a world leading translational research centre for children.

- Researchers made a major breakthrough in the treatment of Cystic Fibrosis, a major cause of shortened life-span in young people in Australia. The Children’s Hospital at Westmead was one of the largest trial sites for this clinical trial to increase lung function for Cystic Fibrosis patients, allowing them to lead a better and longer life.
- The Children’s Hospital at Westmead has always played a pivotal role in advocating for the health, safety and wellbeing of all children in our community. This year, the Hospital has been instrumental in various community awareness campaigns and government lobbying on a number of important issues, including the prevention of window falls, revised car seat laws and vaccination, particularly against the H1N1 virus.
- The Children’s Hospital at Westmead was commended by NSW Health for being one of the best performing area health services for Emergency Department (ED) access and was commended for performance against ED indicators and extensive work to deal with the influx of patients with H1N1 virus.
- 107 Visiting Medical and Dental Officers were appointed for a four-year period, 1 July 2009 to 30 June 2013.
- A new ward security system was introduced, with wards now locked overnight to enhance security for patients, families and staff.
Agency for Clinical Innovation

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Chief Executive’s Year in Review

In March 2009 the NSW Government published Caring Together: the Health Action Plan for NSW in direct response to the Final Report of the Special Commission of Inquiry into Acute Care Services in NSW Public Hospitals. One of the key initiatives was the establishment of the Agency for Clinical Innovation (ACI) in January 2010 as a board-governed statutory health corporation with a Statewide remit.

The role of the ACI is to identify optimal models of care for the treatment of patients within the NSW health system and to support implementation of these models of care across the system to drive innovation, reduce inappropriate clinical variation, improve efficiency in the delivery of health care and to build sustainability of ‘best practice’ into the health system.

As recommended by Peter Garling, the ACI has built on the work of the Greater Metropolitan Clinical Taskforce (GMCT) and is using the ‘clinical network model to involve clinicians and patient representatives in continuous clinical redesign to deliver safer and better patient care’. Throughout its transition from the GMCT to the ACI, the ACI has worked hard to maintain the engagement of doctors, nurses, allied health professionals and managers that work in the NSW public health system and community representatives including patients, carers and non-government organisations. Clinician and consumer members of ACI Clinician Networks meet on a regular basis to identify common barriers to delivering optimal care across a wide range of specialty areas and to research, design and deliver improved models of care.

The ACI Board was announced in March 2010 and is chaired by Professor Carol Pollock. Common board membership with the Clinical Excellence Commission (CEC) has strengthened collaboration and co-operation between the two agencies. Since its establishment the ACI Board has developed a Strategic Plan 2010-2014 that sets out seven strategic themes and a range of initiatives and actions. To advise its decisions the ACI Board has set up a Clinical Council, a Citizens Council and a Research Subcommittee which is jointly chaired by the ACI and CEC.

The ACI works in close collaboration with the Bureau of Health Information, the CEC and the Clinical Education and Training Institute and has contributed to a framework for collaboration between them and the Area Health Services and the NSW Department of Health.
Highlights and Achievements

- Bureau of Health Information established in September 2009 and Chief Executive appointed in October 2009. The Bureau’s functions were formally determined by The Hon Carmel Tebbutt MP, NSW Minister for Health in November 2009.

- Inaugural Bureau of Health Information Board appointed in 2009. The Board confirmed the Bureau’s strategic plan, work plan for the calendar year 2010 and established the governance structures for the Bureau.

- Release in May 2010 of the Bureau’s first public report Insights into Care: Patients’ Perspectives on NSW Public Hospitals and accompanying documents as a suite of products for the community, clinicians and healthcare professionals. The report looks closely at the care experiences of patients who spent a day, or one or more nights, in NSW public hospitals in 2009. The Bureau published this report on its website and issued a Statewide media announcement to inform its stakeholders. This generated wide media coverage across metropolitan and regional newspapers, online news, radio and metropolitan television programs.

- Establishment of the Bureau’s first website in 2009 with major enhancements and content published in March 2010.

Chief Executive’s Year in Review

The Bureau of Health Information is a board-governed statutory health corporation established under the Health Services Act to be the leading source of information on the performance of the public health system in NSW.

The Bureau provides healthcare professionals, the community and the NSW Parliament with timely, accurate and comparable information about the performance of the NSW public health system in ways that enhance the system’s accountability and inform efforts to increase its beneficial impact on the health and wellbeing of people in NSW.

The year under review has been a rewarding and productive period for the Bureau. I commenced in the position of Chief Executive with the Bureau in October 2009 having moved from Canada where I worked in healthcare for more than 20 years, holding leadership positions in organisations dedicated to monitoring and reporting on the performance of healthcare systems.

The Bureau’s Board was established in 2009 and its Chairperson is Professor Bruce Armstrong AM. Three Board meetings were held in 2009–10 and the Board has approved the Bureau’s Work Plan for the delivery of public reports in 2010 and strategic plan due to be released in early 2010-11.

In 2009–10, we recruited our key staff members and we are on track to produce public reports scheduled for release throughout 2010. We’ve developed policies and practices to operate effectively and efficiently and meet all ethical, legal and policy requirements required of health information organisations.

Stakeholder engagement is an essential element of the Bureau’s mission and we have consulted actively with Chief Executives and senior clinicians within the NSW Area Health Services, the NSW statutory health corporations including the Clinical Excellence Commission and the Agency for Clinical Innovation, major clinical groups and health research organisations. In doing this, I have worked with patients, doctors, nurses and healthcare administrators to learn more about their priorities for information about the NSW public health system.
Our new website now includes information about the Bureau’s mission and role, its Board members, our reports and contact details for those wanting information about the Bureau.

The Bureau’s reports are its key means of delivering independent, accurate and comparable information about the performance of the NSW public health system. The Bureau will inform the community regularly to encourage an understanding of the NSW public health system’s performance and to inform efforts to improve the health and wellbeing of people in NSW. Our publications are produced with the guidance of advisory committees whose members include patients, doctors, nurses and administrators.

The Bureau’s first report Insights into Care: Patients’ Perspectives on NSW Public Hospitals was published in May 2010 and we have published the schedule for the Bureau’s upcoming reports for the remainder of 2010. Work towards the Bureau’s August 2010 quarterly hospital report was well underway in 2009–10.
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