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## Review Director-General's year in review

The Queensland Health vision is to provide, and be recognised for providing, the best health care services in the nation.

I wish to highlight the following achievements in the past year which have contributed to this vision.

### Our clients

Queensland Health is a client-focussed organisation. To fully understand patient needs, a comprehensive survey involving approximately 10,400 patients who were discharged from 55 public hospitals showed there was a 92.6 per cent satisfaction rate with the care they received in hospital.

The survey also pointed to some areas where we can improve and over the coming 12 months they will be addressed at zonal, district and local service level to ensure we are continually improving our services to the public.

Progress in our Quality Enhancement and Improvement Program, outlined on page 21, is testament to the high priority the organisation places on the safety and quality of service we provide to the people in our care.

One of the continuing challenges in health care is to enhance health outcomes for Indigenous clients.

Progressively, Queensland Health staff are undertaking cultural awareness training so they are better equipped to deliver culturally sensitive care to Indigenous peoples. Approximately 3500 employees completed the department's Reconciliation Learning Circles and cultural awareness training.

Another significant milestone was signing a Memorandum of Understanding for the Queensland Aboriginal and Torres Strait Islander Health Alliance.

Through this alliance, nine agencies are working collaboratively at all levels from general practice to the community-managed health sector to improve primary health care for Indigenous peoples. The emphasis throughout is to involve Indigenous peoples in designing the services that best suit their needs.

### Our staff

The provision of high quality health care is a direct reflection of the dedication and professionalism of the 63,000 people who work for our organisation. To ensure staff can meet the challenge of excellence, we have invested heavily in developing clinical, communication and leadership skills across all employment streams.

All districts are now well advanced in delivering core training modules in evidence-based practice, risk management and the use of

data to assist decision making. The Clinician Knowledge Network (CKN) is central to the provision of the most up-to-date information to support decision-making by clinicians in 140 hospitals and primary health centres.

During 2002 the Rural Health Training Units conducted CKN training throughout the State. In the Northern Zone, a trainer covered 16,000km in visiting 67 rural and remote sites to train clinicians on the use of the network. The service is particularly beneficial to isolated clinicians who can confidently access the same information as their counterparts elsewhere in the State.

In nursing training, Queensland Health led Australia in implementing transition programs for a number of nursing specialties such as emergency services, intensive care and aged care.

The implementation of the Emergency Nursing Transition Program in 20 hospitals across the State was integral to the Emergency Services Strategy to improve waiting times in Queensland Health public hospital emergency departments.

In addition, the Nursing Re-entry Scheme was launched. It provides up to six months paid retraining for former enrolled and registered nurses to allow them to meet competency requirements to regain registration.

The Queensland Health

Leadership Development Program entered the fourth year of developing leadership skills for frontline operational and middle management staff.

This year it was joined by a mentoring program which identified future leaders and provided a structured program to expose them to good practice and relevant challenges through which they could develop individual leadership skills.

The Queensland Health State Strategic Forum in 2001 was used to commence a new program in leadership development for senior executives across the State. This was the Success Program which aims to create leadership success using a consistent approach to managing leadership performance and development through the application of clear accountabilities and distinctive leadership capabilities.

A significant achievement of the Success Program for the year was a values clarification process, with the values outlined on the inside cover now being embraced by leaders throughout the organisation.

### Our technology

In updating medical technology, Queensland Health has focussed on deploying upgraded technology to improve diagnosis and treatment across a range of clinical conditions.

The Queensland Picture Archiving and Communications System (QPACS) commissioned at the Royal Brisbane Hospital has now completed the network of QPACS envisioned for all Queensland Health tertiary referral hospitals. This

networked system has revolutionised radiography services by providing clinicians connected to the system with immediate access to patient images on computer screens in wards, outpatient clinics and operating theatres.

In striving for dynamic solutions to the State's health care challenges, Queensland Health is increasingly recognised internationally for innovation and technical capabilities.

Through 200 sites, the world's largest Telehealth network provided services such as mental health, ophthalmology, primary care, emergency medicine, intensive care, paediatrics, cardiology and dermatology to ensure clients outside the south-east corner had equitable access to specialist support.

Queensland Health entered into a partnership to establish a Centre for Excellence in Magnetic Resonance Imaging (MRI) at The Prince Charles Hospital. The centre will be part of a world-wide cardiac research network. This investment in cardiac technologies means faster and more accurate diagnosis and treatment for patients.

In addition, a new MRI at the Royal Brisbane Hospital forms part of a \$10 million project involving Queensland Health, the University of Queensland and the Wesley Hospital in advanced research studies and treatment of dementia, stroke, heart disease and Parkinson's disease.

Queensland Health has also increased its capacity to diagnose and treat cancer by commissioning two linear accelerator machines at a new Radiotherapy Unit at the Princess Alexandra Hospital and a new

linear accelerator at Townsville General Hospital. Advanced treatments using linear accelerators are central to the *Radiation Oncology Services Plan 2000-03*.

### Our future

In July 2001 Queensland Health commenced a process to develop a new long-term vision and strategic policy framework for the public health system. The framework takes into account the interrelationships between the public, private and community-based health sectors.

The *Smart State: Health 2020* project commenced to identify the major health care challenges for Queensland. Consumers, community leaders and health care providers participated in workshops which led to a discussion paper that was circulated for comment.

The final stage of the project will be to produce a directions statement for consideration by the Queensland Cabinet, and to develop a series of action plans to address targeted health needs and priorities.

It is expected this project will inform the planning priorities in successive strategic plans for Queensland Health.

**Dr Robert Stable**  
Director-General

Executive  
Senior executive



Dr Robert Stable



Dr John Youngman



Dr David Filby



Professor Bryan Campbell

*Director-General and Chief Executive Officer*

**Dr Robert Stable**

Adjunct Professor (University of Queensland and James Cook University) MBBS (Qld), MHP (NSW), D Univ (QUT), FRACGP, FRACMA, FCHSE, CHE, FAIM

Dr Stable was appointed Director-General of Queensland Health in January 1996.

The Director-General is responsible for:

- provision of strategic advice to the Minister on policies and legislation
- leadership to implement a strategic approach to management
- efficient and effective delivery of health services throughout Queensland which achieve government policy outcomes
- ensuring management and budgetary operations are accountable and consistent with good practice, government policies and legislative requirements.

*General Manager, Health Services*

**Dr John Youngman**

MBBS (Qld), MPH (Harvard), FRAGP, FRACMA, FAIM

Dr Youngman was appointed Deputy Director-General, Health Services in 1996, with the position redesignated to General Manager, Health Services in 1999.

Responsibilities include:

- strategic leadership and management of the Health Services Division
- executive management of health planning and procurement
- assessment and enhancement of health services and processes
- delivery of specific health outcomes, priorities and targets through service agreements negotiated with health service providers, including the non-government sector.

*Deputy Director-General, Policy and Outcomes*

**Dr David Filby**

BA (Flinders), PhD (Monash)

Dr Filby was appointed Deputy Director-General, Policy and Outcomes in October 1999.

Responsibilities include:

- development of the strategic plans for Queensland Health
- acquisition of funds from State and Commonwealth sources and management of the budget
- planning, developing and maintaining the capital infrastructure for health service delivery
- information and business management policy and strategy.

*Chief Health Officer*

**Professor Bryan Campbell**

AM, MD, FRACP, FRACMA

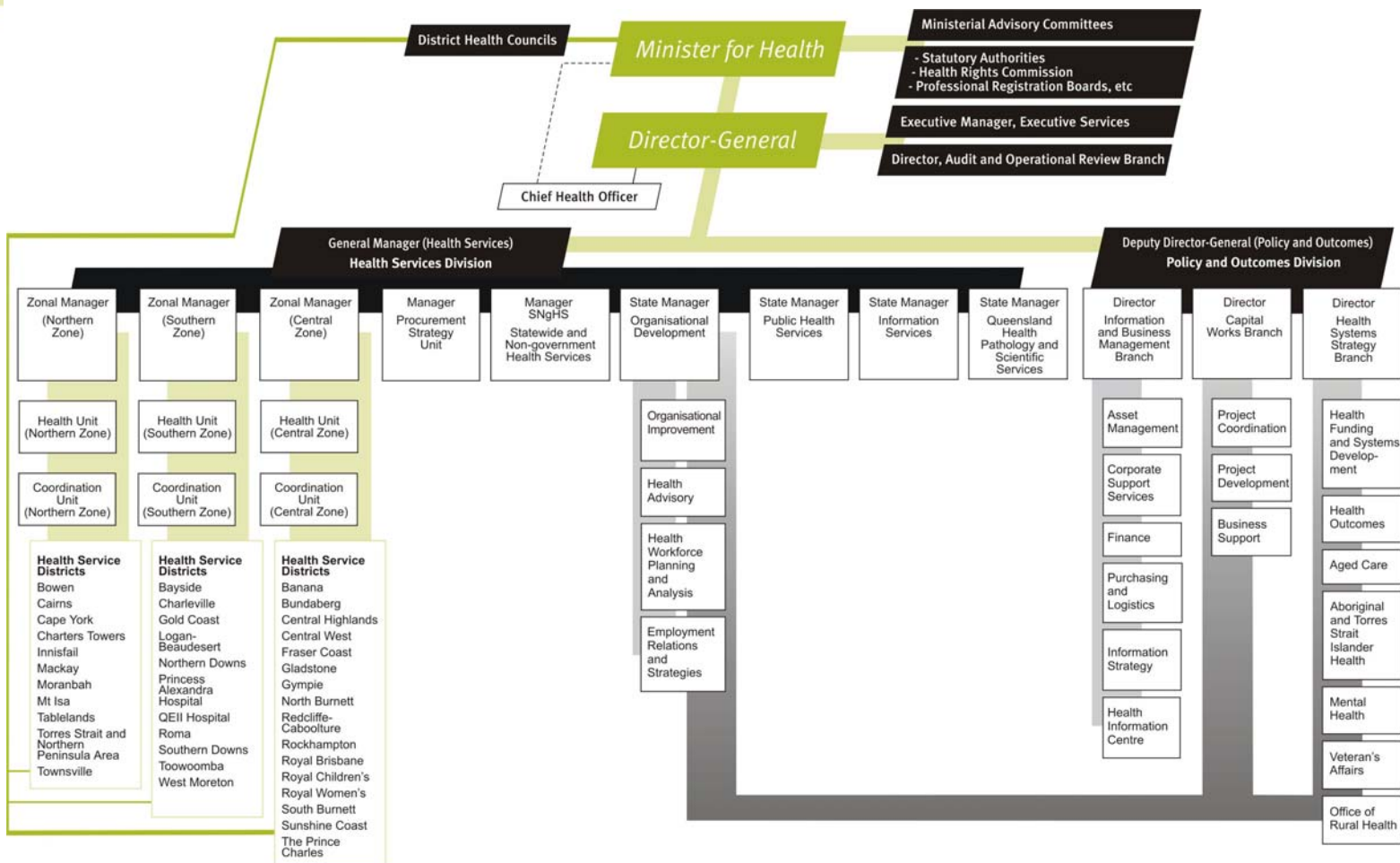
Professor Campbell was appointed Chief Health Officer in May 2000 following three years as Head of School at the Graduate School of Medicine, University of Queensland.

Responsibilities include:

- provision of advice on health issues and matters relating to quality, standards and clinical risk management as well as ethics and research
- provision of administrative and professional support to the statewide clinical audit process
- coordination of health and medical research and development activities through a framework linking statewide and national activities
- providing advice on and licensing private health facilities according to the *Private Health Facilities Act 1999*
- provision of direction for professional medical education
- provision of administrative management services to the Mental Health Tribunal and the Patient Review Tribunal.

## Structure

Organisational structure



## Services

How we deliver services

All Queenslanders have access to free health care services through the most decentralised network of health facilities in Australia. Queensland Health has the largest operating budget of any Queensland organisation and is the State's largest employer with 63,000 people.

Queensland Health has 188 hospitals providing outpatient clinics and emergency services as well as comprehensive inpatient services in locations as far north as Thursday Island, west to Camooweal and south to Texas.

Inpatient services are

complemented by extensive outreach services that take specialists and allied health staff to rural and remote locations to conduct outpatient clinics and provide medical and surgical services.

The Queensland Health Pathology and Scientific Services sector provides the largest network of clinical science services in the State and directly supports State and private hospitals and public health services.

There are approximately 480 community health services throughout the State which focus on preventive measures to benefit the health and well-being

of the public. The services include child health, school-based health programs, aged care and Home and Community Care, oral health, mental health, alcohol and drug services, women's and men's health programs, ethnic health and health services targeted to Indigenous peoples, sexual health services, environmental health, and population services such as immunisation and other locally identified health issues.

The department and more than a thousand community-based organisations work in partnership to ensure Queenslanders have access to care and services in their own homes and community settings.

Administration for service delivery is provided by a corporate office which determines the major direction, policies and procedures for health service delivery, and a three zone structure to coordinate efficient and effective health services across 38 health service districts. Each zone provides a full range of primary, secondary and tertiary services that strive to meet contemporary social and community expectations.

Queensland Health is shifting the focus from treatment of major diseases and injury in hospitals towards prevention, early detection and improved management of chronic disease in the primary care sector. In the longer term, this model of service delivery will achieve greater health outcomes for our population.

leaders and health service providers, and identified major challenges for Queensland communities and their health care needs.

Through the workshops, there was a clear commitment to ensure Queensland's future public health system ranks with the world's best. This position strongly supports the Government's commitment to the broader societal determinants of health addressed through the *Charter of Social and Fiscal Responsibility*.

In May 2002 the *Smart State: Health 2020 Discussion Paper* was circulated for consultation and comment.

It posed a series of questions about how to respond to the challenges facing the health system and how the health system, businesses, the community and individuals can work together to improve the health of Queenslanders, including those most at risk of ill health.

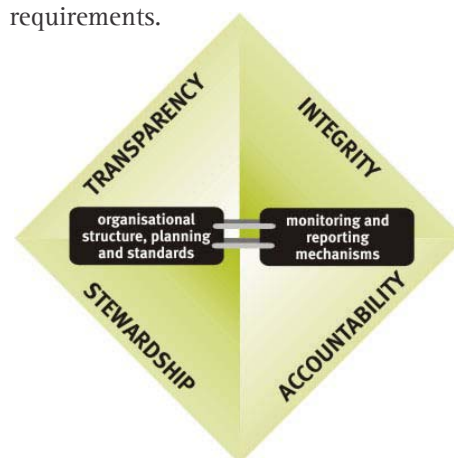
The next phase will incorporate feedback from the consultation phase to develop a *Smart State: Health 2020 Directions Statement* to submit for State Cabinet consideration as an outline of the Queensland Government's vision for health and the health system in Queensland to the year 2020.

Key directions for the Government to develop a sustainable health system to meet the needs of Queenslanders into the future will be identified.

While the strategic directions for future action will be broad and long-term, Queensland Health will develop a series of detailed strategies and recommendations for initiatives to address areas of need over the medium term (three to five years). These will be incorporated in successive strategic plans.

## Governance Corporate governance

Queensland Health is committed to maintaining high standards of corporate governance. The Corporate Governance Framework aligns corporate planning, strategy development, resource allocation and service delivery with government policy, legislation and other requirements.



Queensland Health achieves its mission through the delivery of a wide variety of services, at all times respecting the rights of patients, clients, and employees.

## Strategic directions

The Director-General chairs the Strategic Directions Group which comprises the senior executive staff of Queensland Health. This group provides essential integration and uniformity of approach to health service outcomes and ensures appropriate leadership, standards and a quality culture throughout the organisation.

Activities of the group are to:

- determine and coordinate departmental priorities and business

## Challenge Meeting the challenge

In July 2001 the Queensland Government commissioned the *Smart State: Health 2020* project which was overseen by the Directors-General of Queensland Health, and the Departments of Premier and Cabinet, Treasury, Education Queensland, Families and Innovation and Information Technology.

The first stage of the project investigated future directions in health and health care nationally and internationally and clarified the key issues likely to impact on the Queensland health care system to the year 2020.

A series of workshops held in December in Emerald, Townsville and Brisbane involved consumers, community

- set and monitor performance against strategic directions and annual plans
- coordinate the major strategic framework relating to government priorities, strategic plans and critical health issues
- guide health reform and enhancement.

Queensland Health also operates a number of executive committees to address issues of key strategic importance in achieving organisational goals and objectives. These executive committees include the Queensland Health Council on Safety and Quality in Health Care, Health Services Council, Information Steering Committee, Strategic Asset Steering Committee, Audit and Risk Management Committee, and the Finance Committee.

### Planning for excellence

The foundation of the department's planning framework is the *Queensland Health Strategic Plan 2000-2010* which was recently complemented by the *Smart State: Health 2020* project.

Progress on what was achieved during 2001-02 by the *Smart State: Health 2020* project and its ongoing role in determining health futures is detailed on page 6.

Other key strategic plans include the *Queensland Health Business Plan*, *Information Management Strategic Plan* and the *Capital Investment Strategic Plan* developed in accordance with the *Financial Management Standard 1997*. The results of integrated planning are reflected in the annual *Ministerial Portfolio Statements*



which articulate the budget, outputs, performance measures and targets.

### Queensland Health Success Program

In recognition of the crucial role that leadership plays in achieving corporate goals, the Queensland Health State Strategic Forum 2001 was used to commence a new program investing in the leadership skills and performance of the department's senior executives. The Queensland Health Success Program has been established as the blueprint for ensuring success through leadership development and performance.

The Success Program provides an accountability framework for planning and development and aims to create leadership success through the uniform application of clear accountabilities, distinctive leadership capabilities, as well as a program of flexible development options for senior executives.

During 2001-02 the program completed a values clarification process, with new values being introduced in a systematic way throughout the organisation, and progressed the concept of 360° feedback for all senior executives.

### Quality of health services

Queensland Health's *Quality of Health Services Framework* focuses on the continuous improvement of processes, services and products through the adoption of quality management principles and standards.

This framework is designed to enhance the capacity for continuous improvement in health service delivery, and is linked to a national framework and action plan for raising health care delivery standards. An integral part of this framework is the implementation of a three-year Quality Improvement and Enhancement Program. Major achievements during 2001-02 are outlined on page 21.

### Policies, procedures and accountability

Up-to-date information on Queensland Health's policies and procedures is available to Queensland Health staff on the electronic publishing service. On joining Queensland Health, new employees attend induction programs and are shown how to access this information.

Queensland Health maintains policies, practices and

procedures for effective delegation of authority in accordance with the *Financial Management Standard 1997*. Delegations enable Queensland Health officers to perform their duties effectively in accordance with legislative and policy requirements.

Queensland Health is subject to a number of external accountability and reporting measures, including Treasury reporting, audit by the Auditor-General, Cabinet Budget Review Committee processes, and Parliamentary Estimates Committee hearings.

In addition, the Auditor-General reviewed Queensland Health's corporate governance and risk management practices, along with those of 11 other Government departments.

The review confirmed that Queensland Health is reasonably progressed in its implementation of corporate governance and risk management systems and practices, and compares favourably with other agencies. The overall results of the review are reflected in the Auditor-General's *Audit Report No.1 2001-02* in Parliament.

### Maintaining an ethical workplace

Queensland Health regards ethical behaviour as a fundamental component of its

corporate governance practices.

In line with the *Public Sector Ethics Act 1994*, Queensland Health's *Code of Conduct* sets out guiding principles, obligations and standards of conduct to promote an organisational culture of professionalism focused on client service and employee awareness.

In addition, the Queensland Health *Financial Management Practice Manual* sets out financial policy with respect to ethical standards, potential conflicts of interest, and reportable gifts.

Queensland Health employees receive training and development on equal employment opportunity, anti-discrimination, sexual harassment and cultural awareness and reconciliation, to manage these issues appropriately in the workplace.

### Risk management

An Audit and Risk Management Committee promotes a risk management culture within the organisation and identifies and monitors strategic risk exposure. It also advises on audit and audit-related matters on a statewide basis to assist the Director-General in his discharge of financial management responsibilities imposed by the *Financial Administration and Audit Act 1977* and the *Financial Management Standards 1997*.

The committee is chaired by the Deputy Director-General (Policy and Outcomes) and comprises four members of senior management, a district health council representative, and an independent representative from internal audit. It meets

quarterly and reports to the Director-General. During 2001-02 the Director-General:

- approved and monitored the 2000-2001 Audit and Operational Review Branch annual work plan and budget
- reviewed and endorsed findings from Audit and Operational Review reports
- endorsed an action plan for risk management within the department.

### Audit and operational review

The Audit and Operational Review Branch provides an independent, objective assurance and consulting function. Activities focus on assisting the organisation to address its risks by providing a systematic and disciplined approach to evaluating and improving the effectiveness and efficiency of management controls, risk management practices and corporate governance processes.

The branch uses a risk-based approach to evaluate:

- relevance, reliability and adequacy of financial and non-financial management information and the capability and capacity of systems to provide the information on an ongoing basis
- capacity of resources to contribute to the ongoing relevance and achievement of the organisation's objectives
- cost-effectiveness of the controls employed in managing risk
- improvements to the corporate governance



Figure 1  
Internal Audit client feedback results  
(low 0, high 5)



framework and ethical workplace practices.

It also liaises with the Crime and Misconduct Commission and conducts investigations on behalf of the Director-General.

### Major achievements

- Development and completion of an annual work plan for 2001-02 which assisted in improving departmental financial and non-financial operations
- Implementation of a Graduate Auditor Program with 100 per cent retention of graduates since inception three years ago
- Registration and licensing to commercial interests of the *Queensland Health Fraud Prevention and Control Kit* and completion of its introduction across the department
- ISO 9001 certification of the quality of processes for the provision of services
- Reliance placed by the Queensland Audit Office on branch work with respect to the financial statements

- Comparison of performance with international best practice as provided through the Institute of Internal Auditors' Global Auditing Information Network.

In undertaking activities, client feedback is used constantly as a mechanism to improve services and processes. The results of this feedback is summarised in the above figure.

### Future challenges

- Establish partnerships to ensure completeness and relevance of health service delivery processes and administrative processes
- Ensure the cost-effectiveness of audit techniques and processes in light of technological developments
- Ensure resource capability and capacity to meet requirements and improved techniques
- Work with managers to ensure ethical workplace behaviour
- Respond to Triple Bottom Line accounting

## Whistleblower protection

The *Whistleblowers' Protection Act 1994* (Qld) provides an avenue for redress for people who suffer a reprisal as a result of reporting alleged unlawful, improper or negligent conduct in the public sector by lodging a public interest disclosure.

During the year, 16 public interest disclosures were made to Queensland Health regarding allegations of improper conduct. The allegations encompass a wide variety of issues including alleged assault, theft, fraud and breach of confidentiality.

Investigations resulting from this reporting led to three substantiated disclosures and seven unsubstantiated disclosures. At present, six disclosures are still being actively investigated.

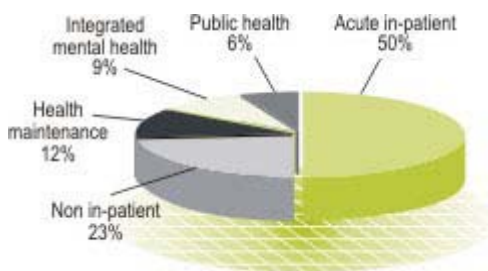
## Finance Financial highlights

During 2001-02, Queensland Health delivered its five departmental outputs within the limits of its total available revenue.

### How the money was spent

The services provided by Queensland Health are organised into five outputs. The department's outputs and their relative share are shown in figure 2.

Figure 2  
Expense by output 2001-02



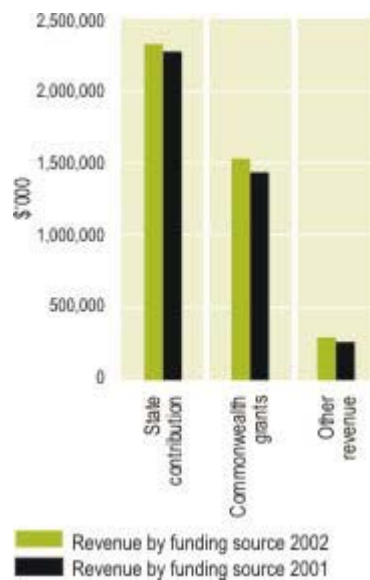
### Revenue

The department's revenue is sourced from three areas:

- the State Budget contribution
- grants from the Commonwealth Government
- funding generated from user charges, donations, grants from non-Commonwealth sources and other revenue.

Figure 3 details the extent of these funding sources for 2001-02.

Figure 3  
Revenue by funding source



Queensland Health had final operating revenues for 2001-02 of \$4.186 billion consisting of:

- State contribution of \$2.347 billion (56.07 per cent)
- Commonwealth grants totalling \$1.544 billion (36.88 per cent)
- own sourced revenue of \$0.295 billion (7.05 per cent).

### Expenses

Total expenses – including borrowing costs – were \$4.180 billion, averaging \$11.39 million a day to provide public health services. This represents an increase of 4.63 per cent from last year.

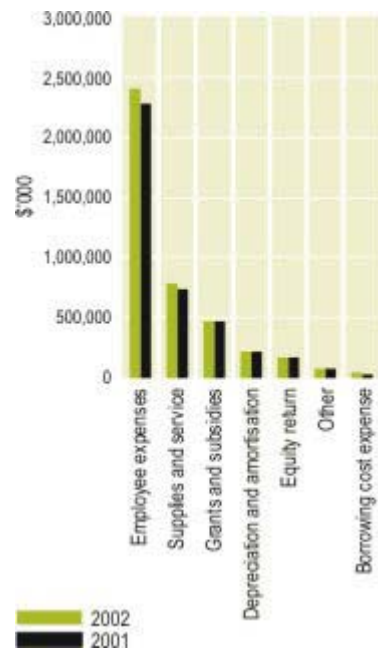
Most of the increase in expenses resulted from employee expenses (3.24 per cent) – which mainly reflects

the full-year impact of salary increases which were staggered in 2000-01.

Supplies and services also increased, following a similar trend to previous years' increases of 1.12 per cent.

Figure 4 provides a comparison of major expense types over two years.

Figure 4  
Expenses – two year comparison



### Capital investment

Total acquisitions of \$372 million were made on rebuilding and maintaining the level of health infrastructure, averaging \$1.0 million per day.