

performance

Addressing the burden of disease: develop a corporate culture of evidence-based health care

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strategy 1

Develop a corporate culture of evidence-based health care.

Evidence-based health care means health-care decisions which are based on all available evidence of the benefits and harms of health-care interventions compared with alternative methods. By making evidence-based health care part of our corporate culture, Queensland Health ensures that patients have access to the best possible health care.

The concept of burden of disease has been used to measure the impact of premature death and disability from a disease or condition. For some conditions, such as lung cancer, the burden of disease is made up primarily of premature death, while for others,

such as asthma or depression, the burden of disease is mainly disability. In the context of burden of disease, disability means any departure from full health, and this is a much broader definition than is commonly used.

Key achievements

- Published Australia's first public report on the quality of a State's hospital services. *Leading the way: Queensland hospitals in the twenty-first century* was a key project of Queensland Health's Quality Improvement and Enhancement Program (QIEP)

The study found that, in general, Queensland public hospital clinical indicator rates were as good or better than those throughout the rest of Australia. *Leading the way* is available on the Queensland Health website at www.health.qld.gov.au

Projects under the QIEP banner use rigorous quality improvement research methodologies and comprehensive risk reduction systems based on the best available evidence. They include:

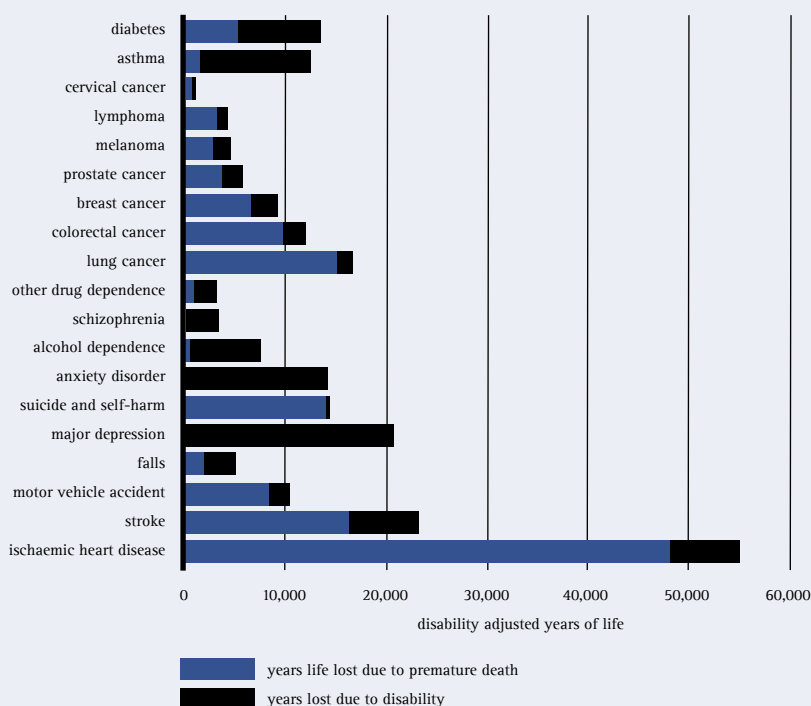
- informed consent. A new suite of consent forms was introduced throughout Queensland to ensure patients fully understand the implications of procedures or treatment about to be performed
- Patients' rights and safety will be protected because consistent information about their care will be communicated, and clinicians will find it easier to communicate with patients about the procedures to be performed
- the pressure ulcer prevention project. This project is aiming for a 50 per cent reduction in the prevalence of pressure ulcers in Queensland Health acute and

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fast facts

Heart disease causes the greatest burden of disease in Queensland communities and offers the greatest opportunities for health gain through prevention, treatment and rehabilitation

Average annual burden of disease for National Health Priority Area Indicators Queensland 1996 to 1998



Source: Health Information Centre, Queensland Health



residential facilities, and will achieve this through consistent risk assessment tools, best practice ulcer/wound care guidelines, standardised incident reporting protocols, and standardised selection and use of pressure ulcer devices and products

- the Prevention of Falls Program, which aimed to reduce the number of falls and related injuries in people aged 60 years and over in public hospitals and government residential aged-care facilities

Data from the Princess Alexandra Hospital, for example, indicates that falls rates decreased by six per cent, from 3.98 falls per 1000 occupied bed days prior to implementation of the guidelines, to 3.75 falls per 1000 occupied bed days by June 2003

The guidelines have been endorsed for distribution nationally by the Australian Council for Safety and Quality in Health Care

- Quality Use of Medicines. This program introduced STOCCA, a statewide pharmacy information management system which enables medication data to be shared between health providers and the patient
- Clinical Informatics Program, which makes information available to clinicians in real time at the point of care. With better access to information, clinicians will be able to place electronic orders for pathology, radiology and pharmacy services, electronically view pathology results and radiology reports, access simple rules-based decision support, and produce

automated discharge summaries, thus reducing the risk of adverse events

- Clinician Development Program. More than 14,000 clinicians undertook around 39,000 hours of training in areas such as clinical indicators, continuous quality improvement, discharge planning, doctor-patient communication, clinical documentation and evidence-based practice

- Implemented the *Queensland Health Research and Development Strategic Plan 2002- 2007* and the *Research Strategic Framework*. The plans were developed to ensure that research and development goals:

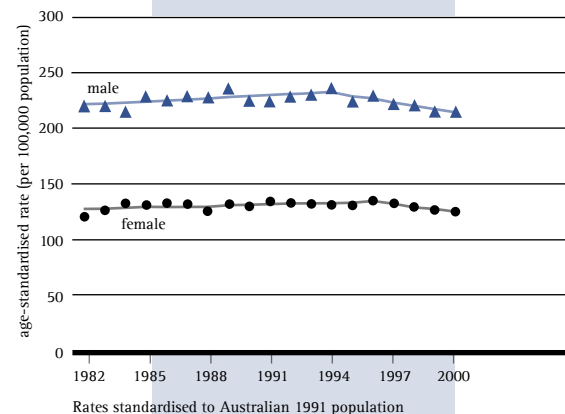
- reflect national and state health priorities
- promote innovative, sustainable and accountable research processes
- implement the principles of the *National Statement on Ethical Conduct in Research Involving Humans* and the *Code of Ethical Practice for Biotechnology in Queensland*

- Produced the draft *Queensland Health Research Management Policy and Guidelines*, which will allow Queensland Health to manage and monitor its research and development investment and to streamline ethical assessment and approval processes

- Completed Phase 1 of the Review

Mortality from cancer is decreasing among both men and women

All cancers, mortality Queensland, 1982 to 2000



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of Health and Medical Research in Queensland, in collaboration with government agencies, universities, medical research institutes and industry. The review will identify the strengths and weaknesses, funding sources, potential returns and future development options for health research in Queensland

- Hosted the second annual Queensland Health and Medical Scientific Meeting in December 2002. This forum is now the major health research conference in Queensland and one of the largest in Australia. The 2002 conference attracted over 500 researchers, medical practitioners and health system managers

- Launched the Evidence Based Practice on-line learning program which was developed in partnership with Med-E-Serv and the University of Queensland. Queensland Health clinicians can access the program at any time of the day or night from work or home

The program suits the clinician with no previous exposure to evidence-based practice as well as the more experienced person who wishes to explore critical appraisal in some depth or the process of developing clinical guidelines. Approximately 1330 staff have registered with the program

- Offered the Aged Care Step Up program for 25 staff from residential aged care facilities across Queensland

Conducted by Australasian Auditing and Certification Services, the course educated staff in the application of best-practice in the aged care environment, as well as data collection, analysis and benchmarking. For more information about initiatives for older Queenslanders, see page 24

- Implemented a project at QEII Jubilee Hospital to evaluate methods of transport home following total hip replacement surgery. Sending patients home by ambulance following this procedure has been estimated to cost approximately \$150,000 per year in Queensland. The project found that travelling by car did not increase the risk of dislocation. This study has the potential to reduce ambulance costs by up to 50 per cent

- Appointed a Risk Management Coordinator who will be responsible for reducing absences by high-risk patients from mental health services, and for managing the clinical and safety needs of high-risk patients who fail to comply with limited community treatment conditions

- Surveyed 1670 food businesses and premises in metropolitan, rural

and regional areas to evaluate the implementation of the national Food Safety Standards. A key finding was that only 47 per cent of businesses surveyed possessed a thermometer, despite it being a legislative requirement

- Introduced an X-sensor pressure mapping tool to treat pressure sores in Cairns Health Service District. Funded through the Clinician Development Program, the sensor analyses pressure on patients' skin so that the pressure can be redistributed to less vulnerable areas

- Trained 60 per cent of permanent remote area nurse clinicians in Cape York Health Service District in evidence-based clinical skills enhancement in acute and life threatening care response. This has improved clinical nurse competence and confidence appropriate to isolated practice setting

- Achieved Baby Friendly Hospital status for Mackay Base Hospital and Proserpine Hospital (Cairns Base Hospital became Queensland's first Baby Friendly Hospital in May 2002). Baby Friendly Hospitals support mothers' informed choice and comply with the World Health Organisation's Ten Steps to Successful Breastfeeding

- Implemented the Paediatric Indicator Project in the Royal Children's Hospital Health Service District to improve children's post-operative management, particularly for pain and nausea

- Using a new clinical audit framework, conducted two clinical audits and developed and trialled a clinical audit education package for clinicians

Clinical audit is a systematic evaluation of health care which measures and benchmarks clinical performance to either improve or confirm the quality of service. Since 2001, two audits have been completed and one is currently in progress

- Implemented the Neonatal and Perinatal Emergency Management Training Project to improve emergency care of newborns and the stabilisation of women with high-risk pregnancy. Funded through the State Government's Emergency Services





Strategy, the program has so far trained over 150 doctors and nurses in Southern Zone regional and rural centres

- Conducted a clinical study at QEII Jubilee Hospital which found that continuous ambulatory analgesia following various surgical procedures was safe, effective and economical. Continuous ambulatory analgesia involves a pain control infusion pump which delivers pain relief medication to the patient on a regulated basis

The study concluded that this method provided safe and adequate analgesia, especially when patients were becoming mobile. This has implications for earlier discharge from hospital and associated cost-savings

- Through the Mental Health Outcomes initiative, introduced standardised clinician and consumer outcome measures across all public mental health services

This will enable these services to measure and compare clinical outcomes of clients. A statewide Outcomes Information System will collect and report information at clinical, district and state levels. Over 50 per cent of staff have so far attended training in the system

Outlook

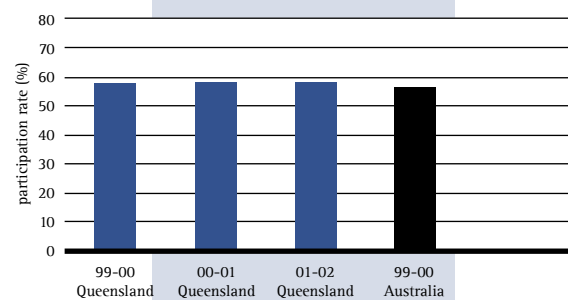
- Conduct the third annual Queensland Health and Medical Scientific Meeting in November 2003. This event is expected to attract over 600 participants, including key public and private decision makers in biomedical research and development
- Implement the Quality and Safety Program (Quality Improvement and Enhancement Program, Phase 2), which will focus on enhancing a culture of patient safety through a number of targeted areas, particularly clinical and non-clinical risk management
- Research opportunities for brief interventions for young injecting drug users at risk of detention to further inform hepatitis C education and prevention activities. The issue of preventing hepatitis C transmission among injecting drug users has been

proposed to the Australian Health Ministers' Council for inclusion in the Priority Driven Research program

- Develop findings of the research into young women and smoking (see Women's Initiatives, page 53) into specific interventions. Cancer control has been identified as one of the National Health Priority Areas, which is Australia's response to the World Health Organisation's global strategy on health reform
- Evaluate the informed consent trial, which has been proposed as a national strategy
- Commence or finalise the following health technology assessments:
 - Economic impact of drug eluting coronary stents
 - Multi-detector computer tomography
 - Intra-coronary brachytherapy
 - Cardiac radio frequency ablation
 - Implantable cardiac devices
 - Radi coronary artery pressure wires
- Enter into nursing research partnerships between Toowoomba Health Service District and the University of Southern Queensland's Rural and Remote Area Health Care Centre. Planned projects include a breastfeeding study and research into the triaging of adult emergency patients
- Train additional medical and nursing staff in the Neonatal and Perinatal Emergency Management Training Project and evaluate the program for possible statewide implementation

In 2001-2002 (latest available data) participation in the BreastScreen program in Queensland was slightly higher than the national average

Participation in the BreastScreen Program Queensland and Australia 1999/00 to 2001/02



Source: Women's Cancer Screening Services, Queensland Health