

3 Our performance

Delivering our services

The Sunshine Coast Hospital and Health Board is responsible for the delivery of the organisation's strategy and monitoring of performance.

We measure our success by our ability to achieve the objectives set out in our Strategic Plan 2016-2020. The Sunshine Coast Hospital and Health Service performance is also monitored through a Service Agreement with Department of Health.

In 2016-2017 the health service delivered increased services to our growing population. The table below provides information on the volume of services provided.

Our performance against the Service Delivery Statements is outlined below.

Table 8: Service Delivery Statement

	Notes	2016-2017 Target/Est.	2016-2017 Actual
Percentage of patients attending emergency departments seen within recommended timeframes:			
• Category 1 (within 2 minutes)		100%	99.7%
• Category 2 (within 10 minutes)		80%	76.2%
• Category 3 (within 30 minutes)		75%	62.2%
• Category 4 (within 60 minutes)		70%	72.4%
• Category 5 (within 120 minutes)		70%	93.4%
• All categories		-	69%
Percentage of emergency department attendances who depart within four hours of their arrival in the department		>80%	71.5%
Median wait time for treatment in emergency departments (minutes)		20	21
Median wait time for elective surgery (days)		25	28
Percentage of elective surgery patients treated within clinically recommended times:			
Category 1 (30 days)		>98%	96%
Category 2 (90 days)		>95%	94%
Category 3 (365 days)		>95%	98%

CONT.	Notes	2016-2017 Target/Est.	2016-2017 Actual
Percentage of specialist outpatients waiting within clinically recommended time			
Category 1 (30 days)		80%	67.39%
Category 2 (90 days)		55%	49.1%
Category 3 (365 days)		70%	87.11%
Total weighted activity units (WAUs):	1		
Acute inpatient		81,628	76,876
Outpatients		19,633	13,870
Sub-acute		7411	6538
Emergency department		17,401	17,309
Mental health		8511	12,979
Prevention and primary care	2	4424	4767
Number of Telehealth outpatient occasions of service		New Measure	2181
Average cost per weighted activity unit for activity based funding facilities	3	\$5231	\$5150
Rate of healthcare associated Staphylococcus aureus activity (including MRSA) bloodstream (SAB) infections/10,000 acute public hospital patient days	4	<2.0	0.56
Rate of community follow-up within 1-7 days following discharge from an acute mental health inpatient unit		> 65 %	64.38%
Proportions of readmissions to an acute mental health inpatient unit within 28 days of discharge		< 12 %	12.82%
Ambulatory mental health service contact duration (hours)		67,780	58,034

Service delivery statement notes:

Notes:

1. A WAU is a measure of activity and provides a common unit of comparison so that all activity can be measured consistently. Service agreements between the Department of Health and HHSs and other organisations specify the activity to be provided in WAUs by service type.
2. The health service achieved a total of 144,010 WAU (including Procedures and Interventions) compared to a target of 139,008.
3. The 2016-17 Estimated Actual figure reflects 1 July to 31 December 2016 activity based costs and actual activity based funded activity. The Target/Estimate reflects the activity based funding less Clinical Education and Training and Specified Grants and activity within the finance and activity schedules of the Final Round Service Agreements Contract Offers. Target/Est. for cost per Queensland WAU includes HHS activity forecast over delivery in 2016-17, funded by the Commonwealth at a marginal rate of 45%. As a result, funding per Queensland WAU in 2017-18 is generally lower than the 2016-17 Target/Est cost per Queensland WAU. The impact of this is partially offset in some HHSs due to changes in Own Source Revenue classification between 2016-17 and non- Queensland WAU investments. 2016-17 Est Actual cost per Queensland WAU is a point in time measure which includes the first 6 months of HHS expenditure and activity. It includes the impact of one-off investments in 2016-17.
4. This is a National Performance Agreement indicator and a measure of effectiveness of infection control programs and services in hospitals. Staphylococcus aureus are bacteria commonly found on around 30 per cent of people's skin and noses and often cause no adverse effects. Infections with this organism can be serious, particularly so when they infect the bloodstream. The data reported for this service standard are for bloodstream infections with Staphylococcus aureus (including methicillin resistant Staphylococcus aureus) and are reported as a rate of infection per 10,000 patient days. The Target/Estimate for this measure aligns with the national benchmark of 2 cases per 10,000 acute public hospital patient days for each jurisdiction. The 2016-17 Estimated Actual figures are based on actual performance from 1 July 2016 to 31 March 2017.

Performance against strategic objectives

In early 2016 Sunshine Coast Hospital and Health Service reviewed and updated its strategic objectives to guide the work of the health service in a period of growth and change.

We remain committed to fundamentally changing and enhancing healthcare delivery across our region. The key strategic focus during 2016-2017 has been the successful commissioning of Sunshine Coast University Hospital and the resulting reconfiguration of services across the region.

Better care and experience for individuals

We are committed to ensuring our patients receive safe and reliable care. In 2016–2017 we worked to achieve this through:

- achieving interim accreditation of Sunshine Coast University Hospital
- conducting, and implementing the recommendations from, the BEaRS (Base Excess and Renal Substitution solution) study to decrease patients' length of stay in intensive care by designing a better, less complex system for patients on kidney support
- piloting the SPOT ON program (in collaboration with the Queensland Ambulance Service and Central Queensland, Wide Bay and Sunshine Coast Primary Health Network) to reduce the number of unnecessary admissions to emergency departments
- creating an enriched environment to provide stimulation for stroke patients, where there is access to physical, social and cognitive activity while they recover
- participating in a Queensland University of Technology led study to determine patients' risk of developing heart disease.

Better use of resources for healthcare

We endeavour to deliver healthcare by managing our resources as efficiently as possible. In 2016-2017 we achieved this through:

- delivering a favourable budget result as well as significantly increased activity, enabling investments in 2017-2018 in initiatives like stage 2 of the Electronic Medical Record program
- implementing the Patient Flow Manager system to provide staff with a convenient digital view of patient status from admission through to discharge

- successfully opening the new Sunshine Coast University Hospital and progressing the refurbishment of Caloundra Health Service and Nambour General Hospital to better meet community needs
- implementing a Minor Injury and Illness Clinic at Caloundra Health Service to meet community needs
- continuing to expand our Telehealth service which has improved patients' hospital access, enabling them to see clinical specialists from home.

Better outcomes for our local population

We are working to better connect our services to improve access to health and care for our population. To facilitate this, the health service has adopted a 'one health service, many campuses' model. In 2016–2017 achievements include:

- commencement of the nurse navigator service. Nurse navigators focus on patients with complex healthcare needs and provide end-to-end care coordination to ensure their needs are met
- implementing a nurse-led breast cancer review clinic at Gympie Hospital to complement specialist management and provide more holistic care to patients, emphasising the psychosocial and physical effects of a patient's diagnosis and treatment
- establishing the Acute and Restorative Care service for older people at Nambour General Hospital, to provide care to older people with both acute and chronic diseases who are finding it difficult to manage in the community.

Better organisational capability

Our people are our greatest asset as we continue to grow to meet the challenges of future health needs. This year has seen record workforce expansion to support the successful opening of Sunshine Coast University Hospital, including:

- 54 medical interns
- 70 nursing and midwifery graduates
- more than 1000 new staff for Sunshine Coast University Hospital.

SPOT ON with patient care

Our Supporting Patient Outcomes through Organised Networks (SPOT ON) team were finalists at the 2016 Queensland Health and Department of Health Awards for Excellence in Brisbane.

SPOT ON is an innovative collaboration between Queensland Ambulance Service (QAS), General Practitioners (GP) and the Central Queensland, Wide Bay, Sunshine Coast PHN, as well as the emergency departments, the Safety and Quality redesign team, Silverchain and the Queensland Health Improvement Unit.

The SPOT ON pilot was established to trial the adoption of integrated care pathways for patients who request ambulance transport for minor injury or illness.

The model of service delivery focuses on a greater role for primary care staff and paramedics in reducing lower acuity (category 4 and 5) presentations to health service emergency departments.

During the pilot, QAS transported 890 patients directly to Medical Centres rather than hospital. Approximately 60 per cent were transported to their own GP and 40 per cent to a Tier 2 GP practice (extended scope/hours).

An additional 500 patients were referred by QAS to a GP, and not transported, either to patient's own GP or Tier 2 GP practice.



Sunshine Coast Hospital and Health Service

The private patient

Queensland Ambulance Service

Exclusion from transport to General Practice

☛ Potentially life threatening conditions requiring immediate management in an Emergency Department. This includes all cardiac chest pain, acute respiratory, cerebral events, and trauma requiring urgent assessment.

Considerations for transport to General Practice

The patient has private health insurance OR a DVA Gold Card (DVA White Cards apply to only specific conditions and must be pre-approved by DVA) and is requesting or likely to need admission into hospital.

- Recent discharge from a private hospital
- Patient requiring respite care
- Patients requesting voluntary admission into a mental health facility (Cooma at Sunshine Coast Private Hospital or Caloundra Private Clinic).

Private hospitals on the Sunshine Coast and Gympie

Sunshine Coast and Gympie Private Hospitals offer a range of clinics as well as direct admissions from General Practitioners.

- Sunshine Coast University Private Hospital, Birtinya
- 24/7 direct admit line
Phone: 1300 OR ADMIT (1300 37 23646).

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Clinical pathways

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