

WA Health Operational Plan 2009-2010



May 2009

Introduction

The WA Health Operational Plan details the key targets and initiatives to be delivered for the 2009/10 year. The key initiatives align with the Strategic Intent to enable ongoing review of our performance and ensure the 2005-2010 strategic directions are achieved.

The annual operational planning cycle is intrinsically linked with financial planning, performance reporting and risk management to ensure these complex processes are internally aligned.

Whilst building on the successes of the previous four years, the 2009-10 Operational Plan includes a number of new priorities and initiatives. As these new initiatives emerge, the operational plan offers a vehicle to capture approved initiatives and include them in the annual budget build process.

Quarterly evaluation takes place to monitor achievement against the operational plan targets with progress reported to the State Health Executive Forum (SHEF). As a working document, the Operational Plan may be updated each quarter to reflect updated targets or new initiatives that require capturing.

Accountabilities noted in the plan in the “Delivered by” column refer to the SHEF members accountable for the overarching coordination of that operational plan target. Where SHEF is noted in the plan this identifies all SHEF members as having accountability. It is important to note that where an individual SHEF member is identified as accountable for a target, the actual implementation of the target may not be their sole responsibility. Furthermore, other divisions and area health services often play a key role in implementation of targets.

The release of the annual Operational Plan signals all WA Health divisions and area health services to prepare area/division specific operational plans within the context of this broader system-wide plan. This ensures alignment of priorities and activities throughout WA Health.

Healthy Workforce

Our Key Initiatives	Our Targets for 2009-10	Delivered by
1.1 Attraction & Retention	<ol style="list-style-type: none"> 1. Achieve a 3% point reduction in employee turnover 2. Develop and implement a statewide leave management policy 3. Undertake Performance Development Reviews for 80% of employees 	DEV SHEF SHEF
1.2 Workforce Planning	<ol style="list-style-type: none"> 1. Implementation of workforce planning for medical specialists 2. Implement education and training framework for medical workforce 3. Implement FTE reporting and an establishment system 4. Complete implementation of the Equity and Diversity Plan 5. Undertake workforce modeling and transition planning for new capital developments 6. Deploy 20 Rural Generalist Pathway Post Graduate Year One doctors 7. Implement WACHS workforce plan 	DEV DEV DEV DEV DEV WACHS WACHS
1.3 Whole of Government Mandatory Occupational Safety and Health Targets	<ol style="list-style-type: none"> 1. Target zero fatalities in the workplace 2. Target zero or 10% reduction on 2008-09 lost time injury/disease (LTI/D) incidence rate 3. Target zero or 10% improvement on 2008-09 lost time injury severity rate 4. Report on the percentage of injured workers returned to work within 28 weeks. 5. Target at least 50% of managers to be trained in OSH and injury management responsibilities 	DEV DEV DEV DEV DEV
1.4 Aboriginal and Torres Strait Islander Strategies	<ol style="list-style-type: none"> 1. Aboriginal employment strategy <ol style="list-style-type: none"> 1.1. Increase numbers by 100 additional staff 2. Implement the Aboriginal and Torres Strait Islander Employment Framework Business Plan <ol style="list-style-type: none"> 2.1. Implement Aboriginal Health Workforce Practitioners Training Program 2.2. Implement succession planning and development strategies for the Aboriginal workforce 2.3. Implement Aboriginal Health cultural awareness training for WA Health 3. Implement Reconciliation Action Plan 	OAH OAH OAH
1.5 Health Professions	<ol style="list-style-type: none"> 1. Implement the clinical governance framework for allied health 2. Implement scope of practice management for podiatry and occupational therapy. 	IHSR IHSR
1.6 Nursing and midwifery	<ol style="list-style-type: none"> 1. Implement Operating Department Technician's pilot 2. Implement the <i>Nursing and Midwifery in WA Strategic Framework</i> 	IHSR IHSR
1.7 Registration & Accreditation	<ol style="list-style-type: none"> 1. Completion of a national registration and accreditation scheme for WA 	DEV

Healthy Hospitals, Health Services and Infrastructure

Our Key Initiatives	Our Targets for 2009-10	Delivered by
2.1 Hospital Reform	<ol style="list-style-type: none"> 1. Implement 'Four Hour Rule' program 2. 85% of patients attending ED are seen and admitted, discharged or transferred within four hours of arrival for stage one sites by April 2010 	IHSR CEs
2.2 Elective Surgery	<ol style="list-style-type: none"> 1. Achieve elective surgery targets <ol style="list-style-type: none"> 1.1. 90% of Category One cases within 30 days 1.2. Maintain all Category Two cases within 90 days 1.3. Maintain all Category Three cases within 365 days 2. Manage COAG/State Elective Surgery Waitlist initiatives 	CEs IHSR
2.3 Safety & Quality	<ol style="list-style-type: none"> 1. Implement initiatives outlined in WA Strategic Plan for Safety and Quality in Health Care 2008-2013; Year 2 (2009-10) (reporting to OSQH on an area level basis) 2. Implement Year four of the SQulRe Program targeting expansion of Tier two 3. Continued implementation of clinical risk management programs, targeting <ol style="list-style-type: none"> 3.1. 100% of sentinel event final reports are received by OSQH within 45 working days of event notification 3.2. 70% of possible preventable deaths are investigated to confirm preventability and remedial action agreed within three months of date of death 3.3. 80% of complaints are resolved within 30 working days 4. Monitor sentinel event notification and reporting in accordance with the Sentinel Event and WA Review of Mortality policies 	CEs CEs CEs CEs
2.4 Infrastructure	<ol style="list-style-type: none"> 1. Revise 10 year state infrastructure plan 2. Continue implementation of the metropolitan projects on schedule 3. Continue implementation of the WA Country Health Service projects on schedule 4. Continue implementation of the statewide service capital projects on schedule 5. Continue implementation of the Mental Health capital program on schedule 6. Continue implementation of New RPH 7. Continue implementation of FSH 8. Finalise Rockingham General Hospital transition plan 9. Commence implementation of the new children's hospital at the QEII site. 	DEV CEs WACHS DEV MHD DG DG SMAHS CAHS

Our Key Initiatives	Our Targets for 2009-10	Delivered by
2.5 Emergency Service	<ol style="list-style-type: none"> 1. Achieve emergency care activity targets 2. Achieve emergency care service targets <ol style="list-style-type: none"> 2.1. 100% of ATS Category 1 patients seen within recommended time 2.2. 80% of ATS Category 2 patients seen within recommended time 2.3. 75% of ATS Category 3 patients seen within recommended time 2.4. 70% of ATS Category 4 patients seen within recommended time 2.5. 70% of ATS Category 5 patients seen within recommended time 	CEs CEs
2.6 Inpatient Service	<ol style="list-style-type: none"> 1. Achieve total inpatient activity targets 2. Achieve palliative care service targets 3. Attain 80% of all eligible mental health inpatient episodes with outcome assessments completed by clinicians 	CEs CEs CEs
2.7 Ambulatory Service	<ol style="list-style-type: none"> 1. Achieve outpatient service activity targets 2. Reduce Did-Not-Attend rates to 13% for outpatient clinics at public facilities 3. Achieve new to follow-up appointment ratio to 1:3 at metropolitan surgical and medical outpatient clinics 4. Reduce over boundary cases to less than 5% for all outpatient urgency category patients 5. Achieve target outpatient wait time between referral and first appointment <ol style="list-style-type: none"> 5.1. All outpatient urgency category patients (i.e. Category 1-3 conditions) 5.2. All Category 1 outpatient cases seen within 30 days 6. Attain 80% of all eligible mental health ambulatory episodes with outcome assessments completed by clinicians 	CEs CEs CEs CEs CEs
2.8 Managing Demand on Traditional Hospital Services	<ol style="list-style-type: none"> 1. Achieve ambulatory service targets for <ol style="list-style-type: none"> 1.1. hospital in the home service 1.2. rehabilitation in the home service 2. Increase GP after hours clinic visits compared to 2008-09 3. Increase metropolitan AHS day surgery activity to 60% 4. Achieve Ambulatory Surgery Initiative RAM target 5. Implement WACHS clinical coordination service 	CEs CEs CEs CEs WACHS
2.9 Patient Transport	<ol style="list-style-type: none"> 1. Achieve 90% of metropolitan Priority One calls being responded to within 15 minutes 2. Achieve 80% of RFDS Priority One calls being responded to within 75 minutes 	HF WACHS
2.10 Disability Access and Inclusion Policy	<ol style="list-style-type: none"> 1. Complete implementation of <i>Disability and Access Inclusion Plan 2007-2010</i> 	DEV

Healthy Partnerships

Our Key Initiatives	Our Targets for 2009-10	Delivered by
3.1 Health Planning	<ol style="list-style-type: none"> 1. Produce one clinical practice guideline to support the implementation of each model of care that has been agreed for implementation 2. Implement 2009-10 strategies of agreed Models of Care through CE and Health Network partnerships 3. Develop the State Cancer Plan by health region for chemotherapy, radiation therapy and outpatient specialist consultation services 	<p>CMO</p> <p>CEs</p> <p>CMO</p>
3.2 Service Agreements	<ol style="list-style-type: none"> 1. Sign and implement service level agreements between WACHS and metropolitan area health services 	CEs
3.3 Enhance Aboriginal and Torres Strait Islander Health	<ol style="list-style-type: none"> 1. Implement the Trans-Tasman Sister business plan 2. Develop and implement Aboriginal chronic care strategy 3. Implement COAG Indigenous Early Years Work Plan 	OAH OAH OAH
3.4 Health and Medical Research	<ol style="list-style-type: none"> 1. Facilitate implementation of outcomes from the first round of <i>Research Translation Projects</i> 2. Complete the third round of the <i>Research Translation Projects</i> 3. Initiate the fourth round of <i>Research Translation Projects</i> 	<p>CMO</p> <p>CMO</p> <p>CMO</p>
3.5 Rural and Remote Health	<ol style="list-style-type: none"> 1. Complete implementation of the <i>WA Country Health Service Foundations for Country Health Services 2007-10 Plan</i> 2. Deploy the rural and remote community engagement strategy 3. An Executive DHAC Reference Group will be established with representation from the seven regions 4. Establish the Rural Health Reference Group 5. Establish the Aboriginal Health Forum 6. Endorse and implement pilot of pooled Commonwealth-State funding for identified Western Australian communities funding arrangements 	<p>WACHS</p> <p>WACHS</p> <p>WACHS</p> <p>WACHS</p> <p>WACHS</p> <p>WACHS</p>
3.6 Partnerships with Non Government Organisations	<ol style="list-style-type: none"> 1. Implement the WA Health Non-Government Organisations purchasing framework 	HF
3.7 Prevention	<ol style="list-style-type: none"> 1. Progress implementation in WA of COAG National Partnership Payment for Prevention 	PHD
3.8 Commonwealth/ State Initiatives	<ol style="list-style-type: none"> 1. Improve workforce capacity and planning through utilisation of COAG funds to expand clinical education and training opportunities, implement workforce redesign initiatives and establish nationally consistent statistical resources 	DEV

Our Key Initiatives	Our Targets for 2009-10	Delivered by
	<ol style="list-style-type: none"> 2. Finalise and gain agreement on plans for use of Commonwealth funds available for subacute care and emergency department services under the COAG National Partnership Agreement on Hospital and Workforce Reform 3. Develop and implement strategies utilising State funds to meet State obligations under the COAG National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes 4. Commence utilising Commonwealth funds available to Western Australia through the COAG National Partnership Agreement on Preventive Health 5. Review and update the Western Australian Public Hospital Public Patients' Charter to ensure it satisfies obligations under the National Healthcare Agreement 6. Satisfy reporting requirements under the Australian Health Care Agreement and National Healthcare Agreement 7. Analysis and implementation of outcomes (relating to Health) from the Commonwealth Grants Commission's major method review of State Finances 8. Comply with data provision requirements for public hospitals to be able to fulfil reporting requirements under Commonwealth health insurance legislation and provide insurers with data to enable the processing of claims for private patients 9. Continue work to implement Commonwealth election commitments including: <ol style="list-style-type: none"> 9.1. Implementation of the Commonwealth <i>Bringing Nurses Back to the Workforce Scheme</i> 9.2. Implementation of the Commonwealth/State strategy to establish GP Super Clinics 9.3. Access funds to implement Stage 3 of the Commonwealth's elective surgery program 10. Western Australia to access funding available from the Commonwealth for health infrastructure projects 	<p>IHSR</p> <p>OAH</p> <p>PHD</p> <p>DEV</p> <p>HIN</p> <p>DEV</p> <p>CIO</p> <p>DEV</p> <p>NMAHS</p> <p>IHSR</p> <p>DEV</p>

Healthy Communities

Our Key Initiatives	Our Targets for 2009-10	Delivered by
4.1 Aged Care	<ol style="list-style-type: none"> 1. Implementation of the <i>Friends in Need-Emergency</i> (FINE) election commitment 2. Progress COAG Long Stay Older Patient Initiative (LSOPI) to improve transition between hospital and aged care for older Australians 3. Implement the COAG Transitional Care initiatives 	<p>IHSR</p> <p>IHSR</p> <p>IHSR</p>
4.2 Mental Health	<ol style="list-style-type: none"> 1. Develop and approve the Mental Health Strategic Plan 2010-20 for WA 2. Develop and approve the State Mental Health Policy 3. Finalise the WA Suicide Prevention Strategy 4. Conduct a review into the adequacy of current mental health services in WA 5. Provide access to new places created in supported mental health community residential facilities 6. Achieve 60% of clients diagnosed with mental health disorders to have contact with public community based mental health non-admitted services within seven days post discharge from public mental health inpatient units 7. Achieve 70% of clients diagnosed with mental health disorders to have contact with public community based mental health non-admitted services within 14 days post discharge from public mental health inpatient units 	<p>MHD</p> <p>MHD</p> <p>MHD</p> <p>MHD</p> <p>MHD</p> <p>MHD</p> <p>MHD</p>
4.3 Australian Better Health Initiative	<ol style="list-style-type: none"> 1. Complete implementation and evaluation of the Australian Better Health Initiative programs 	<p>CMO</p>
4.4 Prevention & Promotion	<ol style="list-style-type: none"> 1. Continue implementation of the <i>Health Promotion Strategic Framework 2007-2011</i> 2. Continue implementation of the <i>WA Tobacco Action Plan (WA TAP) 2007-2011</i> 3. Implement priority health promotion and prevention program for alcohol and illicit drug use with a 35% awareness of the campaign messages by the target population 4. Decrease hospitalisation rates related to alcohol and illicit drugs 5. Screen 70% of target population for breast cancer every two years 6. Achieve immunisation rates <ol style="list-style-type: none"> 6.1. 90% of children are fully immunised at 12 months 6.2. 90% of children are fully immunised at 24 months 6.3. 80% of people 65 and over to receive influenza vaccination 	<p>PHD</p> <p>PHD</p> <p>DAO</p> <p>DAO</p> <p>NMAHS</p> <p>PHD</p>

Our Key Initiatives	Our Targets for 2009-10	Delivered by
4.5 Community Care	<ol style="list-style-type: none"> 1. 342 per 1,000 HACC target population to receive HACC services 2. Achieve specific HACC program client satisfaction at 85% 3. Achieve an annual cost of HACC service per person with long term disability at \$2,783 	<p>IHSR</p> <p>IHSR</p> <p>IHSR</p>
4.6 Aboriginal Health	<ol style="list-style-type: none"> 1. Continue implementation of the <i>Aboriginal Primary Health Care Resource Kit</i> <ol style="list-style-type: none"> 1.1. Deploy urban Aboriginal Health strategy 1.2. Implement the Indigenous Mental Health Strategy 2. Continue implementation of the <i>National Strategic Framework for Aboriginal and Torres Strait Islander Health</i> <ol style="list-style-type: none"> 2.1. Implement the <i>Indigenous Health Equality Summit Statement of Intent</i> (Close the Gap) strategies 2.2. Implement the Department of Indigenous Affairs Bilateral Agreement strategies 3. Develop and implement the <i>COAG Maternal and Child Health Action Plan</i> <ol style="list-style-type: none"> 3.1. Implement counseling services for Aboriginal children at risk 3.2. Implement increased Aboriginal ante-natal and post-natal care services 3.3. Implement the 0-8 years Aboriginal child health strategy 	<p>OAH</p> <p>OAH</p> <p>OAH</p>
4.7 Dental Health	<ol style="list-style-type: none"> 1. The DMFT for 12 year old children to be comparable to the international benchmark of 0.90 - 1.5 2. Achieve percentage of enrolments and children under care in dental health programs <ol style="list-style-type: none"> 2.1. Pre-primary 84% 2.2. Primary 85% 2.3. Secondary enrolled 80% with greater than 60% under care 2.4. 65% of children free of active dental caries on recall 3. Achieve greater than 20% of the targeted population of financially disadvantaged people accessing Government subsidised dental care 4. Reduce waiting time to access non-emergency dental care to 12 months 	<p>NMAHS</p> <p>NMAHS</p> <p>NMAHS</p> <p>NMAHS</p>
4.8 Primary Care	<ol style="list-style-type: none"> 1. Implement the rural primary health care strategy 2. Implement engagement strategies between Primary Care and General Practice via the Primary Care Health Network 	<p>WACHS</p> <p>CMO</p>

Healthy Resources

Our Key Initiatives	Our Targets for 2009-10	Delivered by
5.1 Health Budget	1. Attain 2009-10 WA Health budget parameters	SHEF
5.2 Resource Allocation Funding Model	1. Finalise the 2009-10 population and output based resource allocation program	HF
5.3 New Initiatives	1. Complete the first phase of the Patient Blood Management Project and progress with phase two	CMO
5.4 Information & Communication Technology	1. Implement 2009-10 targets for the Information and Communication Technology Strategy	HIN
5.5 Data and Coding	1. Code 80% of cases for inclusion in the HMDS within two weeks of discharge	HIN
5.6 Align with Australian Government health initiatives	1. Continue implementation of Aged Care Assessment reform initiatives 2. Continue implementation of HACC reform initiatives	IHSR IHSR
5.7 Medical Technology Strategy	1. Complete and commence implementation of the Medical Technology Strategy	CMO

Healthy Leadership

Our Key Initiatives	Our Targets for 2009-10	Delivered by
6.1 Developing leadership capacity and capability	<ol style="list-style-type: none"> 1. Develop leadership capacity and capability <ol style="list-style-type: none"> 1.1. Continue delivery of leadership development programs 1.2. Facilitate personal development plans for identified target groups such as SHEF members and Executive Directors 2. Progress succession planning by providing development opportunities that assist in succession planning 3. Design and deliver strategic change support mechanisms 4. Evaluation of the impact of key leadership development interventions 	<p>IHL</p> <p>IHL</p> <p>IHL</p> <p>IHL</p>
6.2 Improving WA Health Communication	<ol style="list-style-type: none"> 1. Implement WA Health communication strategies 	DEV
6.3 Governance and accountability	<ol style="list-style-type: none"> 1. Address 100% of all Audit Committee 'extreme' and 'high' risk rated items on time 2. Finalise 2009-10 performance agreements and reporting between the Director General and State Health Executive Forum members 	<p>SHEF</p> <p>HIN</p>
6.4 Strategic Intent	<ol style="list-style-type: none"> 1. Develop and implement 2010-15 Strategic Intent 	IHSR

Legend of Acronyms

ATS	Australian Triage Score
CAHS	Child and Adolescent Health Service
CE	Chief Executive of Metro and WA Country Health Services
CMO	Chief Medical Officer
COAG	Council of Australian Governments
DAO	Drug and Alcohol Office
DEV	Development Division
DG	Director General
DMFT	Decayed Missing Filled Teeth
ED	Emergency Department
FSH	Fiona Stanley Hospital
FTE	Full Time Equivalent
GP	General Practice
HACC	Home and Community Care
HF	Health Finance Division
HIN	Health Information Network
HMDS	Hospital Morbidity Data System
IHL	Institute for Healthy Leadership
IHSR	Innovation and Health System Reform
MHD	Mental Health Division
NMAHS	North Metropolitan Area Health Service
OAH	Office of Aboriginal Health
OSQH	Office of Safety and Quality in Health Care
PHD	Public Health Division
QEII	Queen Elizabeth II Medical Centre
RAM	Resource Allocation Funding Model
RFDS	Royal Flying Doctor Service
RPH	Royal Perth Hospital
SHEF	State Health Executive Forum
SMAHS	South Metropolitan Area Health Service
WA	Western Australia
WACHS	WA Country Health Service

Delivering a **Healthy WA**



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Department of Health