



WEDNESDAY 7TH DECEMBER 7:30 - 9:00am

SMC CONFERENCE AND FUNCTION CENTRE, 66 GOULBURN STREET SYDNEY



# 'DOCTORS LEADING CHANGE' BREAKFAST

The Whole of Health Program (WOHP) in partnership with the Agency for Clinical Innovation (ACI) and the Clinical Excellence Commission (CEC) is hosting a 'Doctors leading change' breakfast session.

This is an opportunity to **meet colleagues, share knowledge** and **discuss innovative ideas** as we work together to improve health care delivery and inspire change whilst driving quality improvement to support **improving patient flow** and **access to care** across the entire patient journey.

We're excited to be partnering with Victoria Health and are pleased to announce **The Alfred Hospital** team will be in Sydney to present their quality improvement journey.

**TARGET AUDIENCE:** Medical Staff.

**FOR FREE TICKETS AND WEBINAR REGISTRATION VISIT:**

<https://www.eventbrite.com.au/e/doctors-leading-change-breakfast-tickets-28749559707>



Health

# 'DOCTORS LEADING CHANGE' BREAKFAST

## WHY?

The NSW State Health Plan: Towards 2021 provides a strategic framework which brings together NSW Health's existing plans, programs and policies and sets priorities across the system for the delivery of 'the right care, in the right place, at the right time'.

The NSW State Health Plan highlights strategies to deliver on health priorities and improved health outcomes, and builds on previous reforms focusing on devolved decision-making, health system integration and increased transparency of funding and performance. It outlines in detail not only how we're continuing to roll out and extend our reforms in clinical care, funding and governance, but the next steps we need to take to keep delivering world-class care in NSW.

The focus here is on **Strategic Direction 2: Driving World Class Clinical Care**

Collectively our aim is to improve how we deliver high quality patient focussed care.

What does this mean for patient, clinicians and the system?

### **PATIENT/CARER PERSPECTIVE**

- Timely access to Care
- Involved in clinical decision making
- Involved in planning for discharge

### **CLINICIAN PERSPECTIVE**

- Patients receive 'right care, right time & right place'
- Shorter stays in the ED lead to:
  - decreased LOS in hospital,
  - decreased falls
  - decreased incidents
  - decreased Mortality

### **SYSTEM PERSPECTIVE**

- Ensuring the health system is set up for the provision of safe, high quality and equitable care
- Building capacity for those who need it most by ensuring patients receive timely access to care in the right place
- Provision of better value healthcare

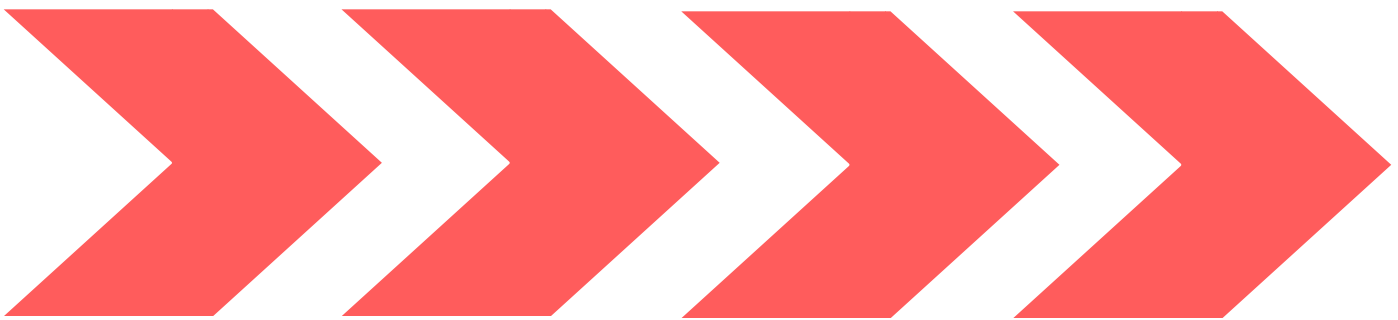
**This requires clinician engagement, leadership and accountability at every stage of the patient journey**

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## WHY?

Globally, hospitals face strong operational imperatives that require doctor involvement. Meeting emergency and elective access targets and cost saving mandate demands process changes and redesign. Such process changes often require new medical workflows. For the doctors to succeed, doctors must lead process design and implementation and agree to comply with the results. 'The Advisory Board Company, International Clinical Operations Board, Engaging the Medical Staff; Partnering with Doctor to Achieve Mutual Goals; 2014; page 15'

## CURRENT NSW MEDICALLY LEAD MODELS



### ED

ED Senior Assessment and Streaming  
Team based care  
Fast track  
Direct to ward admission policy

### ADMISSION

MDT daily Electronic Patient Journey Board  
Rounds focussed on EDD and discharge planning  
Patient focussed family meetings  
Patient focussed MDT meetings

### TREATMENT

In Safe Hands – Structured Interdisciplinary Bedside Rounds – involving the patient in their discharge planning  
Medical lead rounds focussed on specific groups on patient with a 6, 9 or 21 day length of stay – with a focus on resolving discharge issues.

### DISCHARGE

Criteria Lead Discharge – patients can be released from care based on the Doctors documented plan.

In NSW there are currently multiple Medical Lead models that drive quality improvement and system change to ensure the 'right patient, receives the right care; at the right time, in the right place.

Why then is this not consistent across the board? How do we reach a consistent approach?

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## AGENDA

TIME	PRESENTATION	PRESENTER
0730	Welcome and introduction	Dr Sarah Dalton, Clinical Lead, ACI
0735	NSW overview on medical engagement (ACI, CEC & MOH)	Dr Harvey Lander, Director Systems Improvement, CEC  Dr De Villiers Smit (Director ED), ED Physician  Rebecca Atkins, Nurse Manager Emergency  Dr Simone Alexander, Clinical Service Director
0745	The Alfred team	Emergency and Acute Medicine  Josh Stuart, Operations Support Manager  Dr Harvey Newnham, Program Director, Acute and Emergency Medicine, General Physician
0805	SWSLHD perspective on medical engagement	Associate Professor Stephen Della- Fiorentina, Clinical Lead, Campbelltown Hospital
0815	HNELHD perspective on medical engagement	Professor Michael Hensley, Clinical Lead, HNELHD
0825	Q&A session/ panel discussion	Facilitated by Dr Sarah Dalton
0900	Close	

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## VENUE DETAILS



**Sydney Masonic Centre**  
66 Goulburn Street, Sydney

### PUBLIC TRANSPORT

TRAIN: The closest is Museum Station (300 metres or 4 minute walk) and then Central Station (700 metres or 8 minutes) which are also an easy walk to the Sydney Masonic Centre (SMC).

To walk from Museum Station, simply take the Castlereagh Street “EXIT” out of Museum station, then turn LEFT heading south down Castlereagh Street. At the first intersection (Castlereagh & Goulburn Streets), turn right to SMC main entrance on Goulburn Street

### PARKING



Parking is available for \$50 per day at Goulburn Street car park,  
Cnr Goulburn & Elizabeth Street, Sydney  
Goulburn Street Parking

### LOCATION MAP



<http://www.smcfc.com.au/images/SMCFC-Location-Map.pdf>

### ACCOMODATION



<http://www.smcfc.com.au/images/SMCFC-Accommodation.pdf>