Clinical Redesign
Ella van Raders
Vega
Innovation

- The establishment of a department within an healthcare organisation to facilitate continuing service improvement and innovation for improved patient care
- Senior clinician oversight ensures interdependencies between change management projects are recognised and appropriate action taken
- Service change facilitation
Summary

- Statewide focus on clinical redesign
- Coordinate clinical redesign activities throughout the HHS
- Establish Clinical Safety Innovation and Redesign Unit
- Queensland Clinical Redesign Award
- Review opportunities
- Service Improvement
- Build capacity
- Facilitate change
Key problem

- Statewide focus on Clinical Redesign, but lack of coordination in the organisation
- Diagnostics with not solutions
- Service improvement but unable to be sustained
- Lack of transparency regarding clinical projects
- Lack of patient focus to service improvement
- Implemented solutions not addressing cause
Aim

- Central oversight of all clinical projects
- The patient at the heart of everything we do
- Use CARU methodology

Ability to:
- recognise concerns
- diagnose problems,
- prioritise issues,
- plan projects,
- measure outputs, outcomes and benefits,
- leading to sustained service improvements
Baseline data

- Centrally driven, external consultant run projects
  - iPATTH (improving Patient Access Through Townsville Hospital)
  - iPATTH2
  - Lots of diagnostics, little sustained improvements
- Projects undertaken in isolation with no leverage on interdependencies
  - PFM with little input from HomeWards
  - XX
Changes

- Establishment of unit responsible for clinical redesign
- Integration of existing skills
  - LEAN, Six Sigma, Productive Ward, XX
- Training in CARU clinical redesign methodology
- Training in PRINCE2 project management
- Established processes for oversight of projects undertaken outside of the Unit
Outcomes

- Difficult to measure facilitation
- Review opportunities
  - OPT – Outpatients review
  - Cardiology review
- Service improvement
  - Discharge Planning
  - Discharge Summaries
  - Pre procedure preparation
- Build capacity
  - 14 QuICR projects currently ongoing
- Queensland Health Clinical Redesign Award
Lessons learnt

- Listen to lessons learnt
- Involve the patient at every stage
- You can never have enough clinical engagement
- Ensure you engage even those difficult clinicians
- Invite the world to challenge your assumptions
- Data, data, data
  - Voice of the patient
  - Voice of the organisation
For further information

Kieran Keyes
Chief Operating Officer
Townsville Hospital and Health Service
(07) 4433 0080

Gessie Mannea
Advanced Redesign Practitioner
Clinical Safety Innovation and Redesign Unit
(07) 4433 1183