# **Quality of Care Summary: July to December 2024**

#### Between 1 July and 31 December 2024, South West HHS's key achievements included:

- ✓ Driving forward opportunities to engage staff, communities and partners in development of key strategic priorities including:
  - o a new Equity and Diversity Action Plan to build a more sustainable and inclusive workplace
  - o a co-designed <u>Disability Strategy and Action Plan</u>, co-designed with people who use our services and staff to ensure a more equitable and inclusive service.
  - development of a <u>local health and service needs assessment</u>, providing further opportunities for state and national advocacy of rural and remote services and the needs of the communities we serve.
- Ongoing meetings of the South West HHS First Nations Health Equity Committee, comprising Chief Executive Officers of our key partners, to drive forward <u>First Nations Health Equity</u> commitments.
- ✓ Continued delivery of our <u>Clinician and Employee Engagement Strategy</u> and <u>Consumer and Community Engagement Strategy</u> you can find six month progress updates at respective pages on our website.
- ✓ Alongside our key partners, continuing to provide a range of health, mental wellbeing and resilience promotion activities across South West communities.
- ✓ Progressed a range of key infrastructure projects, including formal opening of our new Community Clinic at Morven, and Community and Allied Health Service buildings at St George and Charleville.
- ✓ Almost 150 peer nominated colleagues recognised at annual staff awards celebration.

### In keeping with other health providers, our challenges included:

- Ongoing demands on our staff, particularly within the context of national workforce pressures and increasing demands on patient services - including difficulties in securing external staffing and locums - which continue to be appropriately risk managed to ensure continuity of safe and effective services.
- However, through the hard work and dedication of our staff and teams, South West HHS has continued to deliver high rates of performance against our key targets and measures.

#### Looking ahead for the next six months to 30 June 2025 we will:

- Progress First Nations Health Equity Our Way Together commitments, including a of zero tolerance statement for racial discrimination and / or institutional racism, supporting communications and staff awareness activities and participating in a statewide review of Cultural Practice training.
- Continuing to ensure models of care meet local needs in a sustainable manner.
- ❖ Further progress our commitments towards reducing historical health inequalities, promoting partnership working, improving our working environments and defining new models of service and care for the benefit of South West communities.
- Continuing the work of the South West Queensland Primary Care Collaborative, Darling Downs-South West HHS Medical Pathway and other nursing, allied health and profession specific initiatives to enable our staff work to top of scope in a clinically safe and sustainable way.



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## Performance snapshot – as at 31 December 2024

During the six month period between 1 July and 31 December 2024, South West HHS continued to deliver strong levels of safe, effective, and equitable care against its performance expectations.

The following table below provides a summary of our performance against key performance indicators as at 31 December 2024 (unless otherwise indicated)

	y Performance Indicators	Why is this important?	Target	Our performance			
Emergency Presentations							
*	Emergency Department (ED) length of stay: % of emergency stays within 4 hours	Measures the timely transfer of emergency patients to an inpatient bed or discharged home - reflecting overall effectiveness of hospital patient flow processes from ED	≥ 80.0%	89%			
	ED wait time by triage category	Time in minutes for each ED presentation to commencement of treatment - at 2 / 10 / 20 / 60 / 120mins - with Category (CAT) 1 being highest priority	Cat 1: 100%	100%			
			Cat 2: ≥ 80%	99.7%			
			Cat 3: ≥ 75%	97.6%			
			Cat 4: ≥ 70%	97.9%			
			Cat 5: ≥ 70%	99.1%			
	Patient Off Stretcher Time	Timely transfer of patient from an ambulance stretcher to ED bed within 30mins	≥ 90%	97.2%			
Surgical	procedures <sup>1</sup>						
	Elective surgery: category 1 patients (30 days)	Measures the percentage of patients who received their elective surgery within clinically recommended time with CAT 1 being the highest priority.	CAT 1: ≥ 98%	82.7%			
	Elective surgery: category 2		Cat 2: ≥ 95%	92.4%			
	and 3 patients (90 / 365 days)		Cat 3: ≥ 95%	95.2%			
	Category 4 gastrointestinal endoscopy patients (GIE) treated within 30 days	Percentage of patients who received their GIE within clinically recommended times, with CAT 4 being the highest priority.	Cat 4: 98%	69.5%			
	Category 5 and 6 GIE treated		Cat 5: 95%	78.0%			
	within clinically recommended time (90/365 days)		Cat 6: 98%	46.2%			
Dental S	ervices						
	Access to oral health services	The percentage patients waiting less than two years for treatment	≥85%	100%			
	Preventative Oral Health activity (at 31 October 2024)	A healthy mouth also has general health benefits. Preventive services delivered to public dental patients, help improve and maintain the health of teeth, gums and soft tissues	17%	20.5%			
	Access to emergency dental care for adult public dental patients (at 31 May 2024)	Measures the percentage people who received emergency dental care with Code 1 being the highest priority	Code 1 (1 day): 100%	100%			
			Code 2 (3 days): ≥95%	Nil patients			
			Code 3a (5 days): ≥85%	98.5%			
			Code 3bc (10 days) ≥80%	96.2%			
			Code 3d (31 days): ≥75%	100%			

<sup>&</sup>lt;sup>1</sup> Ensuring all South West Elective Surgical and GIE patients received treatment within their clinically recommended timeframes has, at times, proved challenging over the past six months. However, due to high levels of demand, South West has provided an additional 80 elective surgeries (50 of which were provided within clinically recommended time) compared to the July-December 2023 period.

In total 272 people received a GIE, of whom 246 were seen within their clinically recommended time.

Of note, the 33.3% rate for CAT 6 GIE patients is due to the total of numbers of patients seen – with two (2) of six (6) patients treated within their required 365 days.



Access t	o Services			
	Telehealth utilisation rates	To achieve a full year target of 5,534, approximately 363 occasions of service/mth are required.	100%	106.5% 2,319 provided as at 31 December 2024
	Smoking cessation clinical pathway – public hospital inpatients, dental clients	Supporting people who access our hospital, dental or mental health services	Inpt: ≥85%, with ≥60% completed	93.2% / 87.1% At 30 Sept 2024
			Dental: ≥80%, with ≥60% completed	95.9% / 99.3% At 31 Dec 2024
	and community mental health episodes	who wish to quit smoking	Mental Health: ≥85%, with ≥60% completed	48.4% / 99.3% At 30 Nov 2024
<b>İ</b> Tİ	Proportion of mental health service episodes with a documented care plan	Ensuring mental health clients have a current care plan	≥85%	<b>70</b> %²
Quality a	nd Safety			
×ţ	Hospital Acquired Complications	Total number of complications arising from care in a SW facility (across 14 categories)	N/A	<b>6</b> At 30 Nov 2024
	National Sentinel events	Specific patient safety events that are wholly preventable and result in serious harm, or death (across 10 categories)	Nil	Nil
	SAC reporting	Completion of Severity Access Code 1 reviews within 90 days – incidents that have or could have caused serious harm or death	≥ 70%	Data for the reporting period not available – see note 3
	Healthcare-associated Staphylococcus Aureus (including MRSA) rates	Rate of healthcare associated infections per 10,000 acute public hospital patient.	≤2 per 10,000 bed days	Nil At 30 September 2023
•••	Complaints resolved within 35 calendar days	Percentage of submitted complaints within 35 days	≥ 80%	94% In total, 51 complaints were formally submitted, and 103 compliments received, during the reporting period



Further information regarding our performance is also maintained on the **Queensland Health website** 

If you require more information, or would like to suggest further measures for inclusion in this summary please contact us at: <a href="mailto:SWHHS-EDGSP@health.qld.gov.au">SWHHS-EDGSP@health.qld.gov.au</a>

<sup>&</sup>lt;sup>3</sup> With centrally collated data for the first six months of the reporting period not yet published by Queensland Health at the time of preparing this report, please contact <u>SWHHS-EDGSP@health.gid.gov.au</u> if you require further information. Alternatively, details for the current financial year will be included in the next available update, anticipated to be published mid-2025.



<sup>&</sup>lt;sup>2</sup> With data as at November 2024, South West HHS continues to work towards achieving the 85% target through improved management of scheduled review dates for clients so that these are reviewed and refreshed within 91 days. A new Information Support position commenced on 21 October 2024 to further assist with client triage and management.