



## Part A – Nine Priority Programs

No.	Program Name	Deliverables	Strategies (What and how)	Measures (What will improve and how we will measure)
1.	Patient Charter of Rights	<ul style="list-style-type: none"> <li>➤ National Charter outlining patient rights to safety and quality in health care</li> <li>➤ All healthcare staff have the knowledge required to promote and protect patients' rights to safety and quality.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Analyse existing Australian and international charters and patients' rights documents</li> <li>➤ Establish engagement with patients and other groups to develop National Charter</li> <li>➤ Develop any materials required for better implementation of the National Patient Safety Education Framework</li> <li>➤ Develop tools for clinicians to understand the dynamic of how they make the clinical setting safe</li> <li>➤ Develop National Charter</li> </ul>	<ul style="list-style-type: none"> <li>➤ Creation of National Charter</li> <li>➤ Level of implementation of the National Patient Safety Education Framework</li> <li>➤ Consumer survey for pre and post development of the National Charter</li> </ul>
2.	Open Disclosure	<ul style="list-style-type: none"> <li>➤ Advice to AHMC on next national actions informed by internal and external evaluations of the Open Disclosure pilot</li> </ul>	<ul style="list-style-type: none"> <li>➤ Evaluate various models pertaining to the implementation of the Open Disclosure Standard</li> <li>➤ Determine effectiveness of models in various settings</li> <li>➤ Determine laws and practices regarding adverse events as pertaining to open disclosure and safety and quality improvement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Internal evaluation of pilot sites</li> <li>➤ External evaluation of effectiveness of different Open Disclosure implementation models</li> <li>➤ Analysis of laws and practices regarding adverse event management</li> </ul>
3.	Hygiene (Healthcare Acquired Infection)	<ul style="list-style-type: none"> <li>➤ National Plan for hygiene and infection control</li> </ul>	<ul style="list-style-type: none"> <li>➤ Determine the potential benefits of a national approach to healthcare acquired infection</li> <li>➤ Explore capabilities of current reporting and control mechanisms</li> <li>➤ Develop a National Plan</li> <li>➤ Test the National Plan with stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>➤ To be developed as part of Project Plan</li> </ul>

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4.	Patient Identification Issues	<ul style="list-style-type: none"> <li>➤ Paper to the Commission</li> </ul>	<ul style="list-style-type: none"> <li>➤ Enquiry of the jurisdictional Chief Executives in relation to public hospitals (March 2007)</li> <li>➤ Enquiry of the private hospitals regarding current processes</li> <li>➤ Expert examination of root cause analyses pertaining to misidentification</li> <li>➤ Field work in all States/Territories (public and private hospitals) to examine details of work practices</li> <li>➤ Assessment of findings by human factors experts to identify possible improvement solutions</li> </ul>	<ul style="list-style-type: none"> <li>➤ To be developed as part of the Project Plan</li> </ul>
5.	Handover	<ul style="list-style-type: none"> <li>➤ A successful national clinical handover initiative to produce significant, sustained and measurable reductions in communication gaps</li> </ul>	<p>A series of projects will develop, implement and evaluate transferable product in one, or more, of four areas:</p> <ul style="list-style-type: none"> <li>➤ Improvements to handover for specific handover scenarios</li> <li>➤ Electronic tools and processes</li> <li>➤ Communication training and team training</li> <li>➤ Tools for ongoing observation, monitoring and evaluation of handover</li> </ul>	<ul style="list-style-type: none"> <li>➤ Evaluation is a required part of each project</li> <li>➤ A separate national evaluation will also be undertaken</li> <li>➤ Standardised operating protocols (encompassing standardised solutions, tools and strategies) will be produced for the WHO Collaborating Centre for Patient Safety, Joint Commission International (WHO) High Fives Initiative</li> </ul>
6.	Medication Safety	<ul style="list-style-type: none"> <li>➤ Feasibility study for improved post market surveillance of medications</li> <li>➤ Evaluation of potential for improvement for professional support for medication prescribing</li> <li>➤ Determination of the future electronic form for the National Inpatient Medication Chart</li> <li>➤ Investigation of the effectiveness of current patient medication education programs and provision of</li> </ul>	<ul style="list-style-type: none"> <li>➤ Feasibility study for post market surveillance of medications</li> <li>➤ Evaluation of MATES program and relevant international experience</li> <li>➤ Map the processes involved in prescription and potential points of error in a range of e-prescribing implementation scenarios</li> <li>➤ Conduct an extensive consumer consultation process regarding medication education</li> </ul>	<ul style="list-style-type: none"> <li>➤ Potential improvement in the effective and safe use of medication</li> <li>➤ Advice to AHMC that includes identification of the most useful ways of improving and coordinating existing initiatives that aim to improve the quality and safety of medication use</li> </ul>

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		recommendations for further action		
7.	National Review of Safety and Quality Accreditation Standards	<ul style="list-style-type: none"> <li>➤ Advice to AHMC on national accreditation issues and proposed reforms</li> </ul>	<ul style="list-style-type: none"> <li>➤ National consultation and engagement with stakeholders</li> <li>➤ Determine a package of accreditation reforms</li> </ul>	<ul style="list-style-type: none"> <li>➤ Report on recommended accreditation reforms</li> </ul>
8.	Quantitative & Benchmarking	<ul style="list-style-type: none"> <li>➤ Broad national agreement on key building blocks including registries, indicators and incident reporting</li> </ul>	<ul style="list-style-type: none"> <li>➤ Provide national coordinated system of agreed standardised information to improve management of safety and quality</li> <li>➤ Scan and review the health information environment and needs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Use of information by policy makers, health practitioners and consumers</li> <li>➤ Numbers and significance of safety and quality interventions based on improved information</li> </ul>
9.	Harness Information Technology and Communication	<ul style="list-style-type: none"> <li>➤ Work program to provide safety and quality input for NeHTA</li> <li>➤ Acceleration of adoption of new technology that will improve safety and quality</li> </ul>	<ul style="list-style-type: none"> <li>➤ Formalise engagement with NeHTA</li> <li>➤ Select existing jurisdictional or private sector pilots utilising innovative use of information technology and communication to improve safety and quality</li> <li>➤ Evaluate existing jurisdictional or private sector pilots determine potential national benefit of expansion of these pilots</li> </ul>	<ul style="list-style-type: none"> <li>➤ Reporting on results and implications of pilots using a standard evaluation methodology</li> </ul>

## Part B – Legacy Programs

No.	Program Name	Deliverables (What will improve)	Strategies (How we will do it)	Measures (How we will measure)
1.	Safer Systems Saving Lives	<ul style="list-style-type: none"> <li>➤ Implementation of "Safer Systems – Saving Lives" program</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHS Victoria to project manage and coordinate collection of data across 40 hospitals nationally under contract with Commission</li> </ul>	<ul style="list-style-type: none"> <li>➤ Report findings to Inter-Jurisdictional Committee for decision-making across jurisdictions</li> </ul>
2.	Indigenous Health Partnerships	<ul style="list-style-type: none"> <li>➤ Develop and deliver education and training to Indigenous Primary Health Care organisations to improve quality of chronic disease management in indigenous communities</li> </ul>	<ul style="list-style-type: none"> <li>➤ Menzies School Report findings on effective strategies to Inter-Jurisdictional Committee</li> </ul>	<ul style="list-style-type: none"> <li>➤ Commission advice to AHMC on achieved outcomes</li> </ul>
3.	Centre for Research Excellence	<ul style="list-style-type: none"> <li>➤ Establish a Centre for Research Excellence for Safety and Quality to develop a health services research agenda for patient safety, build research capacity and promote and develop resources to improve patient safety</li> </ul>	<ul style="list-style-type: none"> <li>➤ Alignment of CRE research with core safety and quality Commission's priorities (eg registries)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Research agenda and capacity by 2009/10 taking account of broader health research agenda</li> </ul>
4.	Midwifery Care	<ul style="list-style-type: none"> <li>➤ Develop and test a national process for reviewing the standard of care provided by midwives</li> </ul>	<ul style="list-style-type: none"> <li>➤ Verification of midwives' competence, performance and professional ability across Australia</li> </ul>	<ul style="list-style-type: none"> <li>➤ National process for reviewing standard of care provided by midwives</li> </ul>
5.	General Practice Partnership	<ul style="list-style-type: none"> <li>➤ Training module based on educational and organisational support package for National Open Disclosure Standard</li> </ul>	<ul style="list-style-type: none"> <li>➤ Consultation</li> <li>➤ Review of Open Disclosure Standard</li> </ul>	<ul style="list-style-type: none"> <li>➤ Production of support packages and delivery of training to professionals in GP</li> </ul>
6.	National Inpatient Medication Chart – and further development	<ul style="list-style-type: none"> <li>➤ Develop, maintain and assist national enforcement of a common national inpatient medication chart</li> <li>➤ Remove risks to patient health caused by transcription errors, by ensuring prescription information is</li> </ul>	<ul style="list-style-type: none"> <li>➤ Common Medication Chart to be used in all public hospitals by end 2006</li> <li>➤ To be included in Health Services Accreditation to measure compliance with a single version across the nation</li> <li>➤ Electronic linkage of inpatient and PBS prescription data</li> </ul>	<ul style="list-style-type: none"> <li>➤ Private hospitals to have at least equal processes in place by 2007-2008</li> </ul>

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		<p>automatically registered as both a PBS prescription and an entry on the inpatient medication chart</p> <ul style="list-style-type: none"> <li>➤ Advocate for the adoption of electronic prescribing with decision support (EPDS) across health care settings</li> </ul>	<ul style="list-style-type: none"> <li>➤ Implementation of electronic health records and guidelines will incorporate safety and quality components</li> </ul>	
7.	Eight Uniform National Actions to improve patient safety (agreed by Ministers)	<ul style="list-style-type: none"> <li>➤ Actively monitor and report progress of public hospitals against Ministerial direction on: <ul style="list-style-type: none"> <li>➤ Common medication chart</li> <li>➤ Patient safety risk management plan</li> <li>➤ Hospital reporting on sentinel events</li> <li>➤ State and Territory reporting on sentinel events</li> <li>➤ Pharmaceutical review</li> <li>➤ Adopting five step right patient, right site, right procedure protocol</li> <li>➤ Incident management system</li> <li>➤ Provision to each hospital patient <i>"10 tips for safer health care: what everyone needs to know"</i></li> </ul> </li> </ul>		<ul style="list-style-type: none"> <li>➤ Inter-Jurisdictional Committee to report to Commission</li> <li>➤ Progress reports to AHMC</li> </ul>