

Person-centred Care Insights

Welcome to the sixth edition of Person-centred Care Insights. This issue is packed with uplifting stories that highlight the range of ways healthcare organisations across Australia are providing person-centred care. Dive in and be inspired by the remarkable efforts of those making a difference!

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Local updates and innovations

We are pleased to receive such a broad variety of submissions for this issue, each offering a unique glimpse into how person-centred care is delivered across different health services and settings. For the first time, submissions were invited to share top tips and lessons learnt. Inclusion does not imply an endorsement or recommendation by the Commission, but we hope you'll find these stories inspiring and insightful.

Ready Set Surgery: Developing a Prehabilitation program for elective surgical patients

Western Sydney Local Health District (WSLHD)

When consumer representatives shared challenging past surgical experiences, and a desire for better guidance on how to prepare for surgery, Blacktown Hospital's Perioperative healthcare team listened. A Prehabilitation program 'Ready Set Surgery' was developed. This quality improvement project aims to optimise health behaviours and modifiable risk factors before elective surgeries, to reduce the risk of perioperative complications and help patients feel more confident about their surgical journey.

A patient information booklet was created, offering guidance on seven preoperative interventions: exercise, nutrition, smoking and alcohol cessation, wellbeing, frailty management, preventing infections, and preparing for recovery. By using the Health Literacy Lab and supportive graphics, the booklet was designed for everyone — including patients from culturally and linguistically diverse backgrounds. The booklet was presented to consumers during a Prehabilitation workshop, receiving positive feedback. Consumers shared that they found the content beneficial, easy to follow, and something they would recommend to others waiting for elective surgery.

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Top tips and lessons learned

- This project demonstrates how collaboration with consumers can improve the quality of surgical care and experience for patients.



Contact andrea.lee2@health.nsw.gov.au if you'd like to know more.

Is virtual care right for me and my family... today?

NSW Agency for Clinical Innovation

As part of the Virtual Care Informed Decision Framework, the Agency for Clinical Innovation (ACI) has published a [consumer guide](#). This guide supports consumers to determine if virtual care is suitable for them by providing:

- information on what virtual care is and the benefits
- examples of where and when virtual care could be used
- a checklist to support a self-assessment of their suitability for virtual care
- a range of conversation starters to empower them to lead a conversation with their healthcare provider.

Find more information on the [virtual care for me and my family resources](#) and about [virtual care](#).

Virtual care: Is it right for me and my family?

Learn more and start a conversation with your healthcare provider.



Contact aci-virtualcare@health.nsw.gov.au if you'd like to know more.

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Co-designing improvements in national maternity care: Linking research, health professionals and consumers via a dedicated Consumer Fellow and Expert Consumer Group

Curtin University

The [Measuring what Matters to Australian Mothers \(MMAMs\) project](#) is a five-year national collaborative linking researchers, health professionals, policy leads and consumers to improve the safety and quality of maternity care in Australia. Led by Curtin University researchers, the Investigator Team includes a dedicated Consumer Fellow, Karen Schlage, the first maternity Consumer Fellow role in Australia. The Consumer Fellow chairs the MMAMs Expert Consumer Group (ECG), comprised of maternity consumers representing a diverse range of backgrounds, maternity care experiences and perspectives.

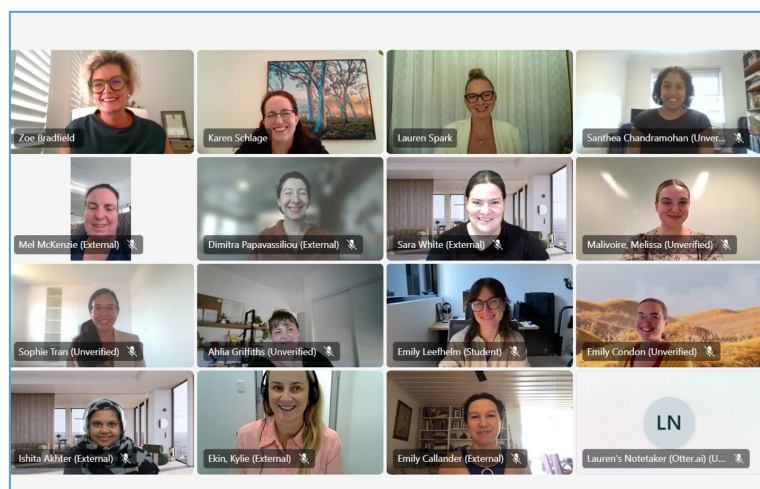
The Consumer Fellow plays a key role in gathering information and insights from the ECG. Then sharing and representing this consumer voice within other project advisory groups including national health system and policy leads, peak organisations and maternity care health professionals. With contribution from maternity consumers, this project will deliver the first consumer co-designed maternity patient-reported experience measures (PREMs) and patient-reported outcome measures (PROMs) in the world.

Read more on [Measuring what Matters to Australian Mothers](#).

Top Tips and lessons learned:

- Importance of a designated Consumer Fellow role appointed as part of the core Investigator Team, with equal contribution to the project
- Development and recruitment of Consumer Fellow position including creation of the core skill and value set, was supported by successfully working in partnership with an independent external member on the interview panel
- Learn from other successful programs and adopt a rigorous process of recruitment and establishment of an Expert Consumer Group to ensure a diverse representation of backgrounds, experiences and perspectives
- The importance of dedicated project funding assigned to employ a Consumer Fellow and cover honorarium payments for consumer contribution via an Expert Consumer Group for the duration of the project
- The importance of refining the range of skills and values that the Consumer Fellow role needs to succeed in this role
- The value and impact of engagement and contribution from an inspiring and committed ECG to help ground the project in lived experience
- The importance of a consensus-making process to meet the values, perspectives and insights from a diverse range of system, practice and consumer voices.

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Contact Zoe.Bradfield@curtin.edu.au if you'd like to know more.

Gym and Swim: a person-centred exercise program for people living with severe mental illness

Sydney Local Health District (New South Wales)

High rates of cardiometabolic disease and poor physical health outcomes contribute to a life expectancy gap of up to 30 years for people living with severe mental illness. Individualised exercise interventions are known to improve both physical and mental health outcomes. Common barriers to engagement are a lack of social support, lack of appropriate and/or accessible facilities and high costs of private services.

'Gym and Swim' is an exercise program co-facilitated by exercise physiologists and peer support workers. It is person-centred by design, delivered in the community with low cost to participants. Outcomes were collected using a co-designed evaluation protocol that included a 3 time-point questionnaire to assess engagement, confidence, and achievement of personal exercise goals. Participants were remunerated for their time at each assessment point. Results from the evaluation showed that program participants increased their average weekly exercise, improved their confidence to exercise independently and within groups, and achieved their personalised goals.

More information is available in this [published article](#).

Top tips and lessons learned

- Co-facilitation by both exercise professionals and lived experience workforce was well received by consumers and can lead to positive outcomes in a low resource environment.
- Mental health programs delivered in accessible community locations are appealing to consumers and have the potential to promote deinstitutionalisation and community integration for marginalised people.

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- Future research should focus on evaluating the impact of these health-positive behaviours on long-term health outcomes.

Contact slhd-lwll@health.nsw.gov.au if you'd like to know more.

Delivering person-centred care in diabetes assessment and management

Royal North Shore Hospital (Northern Sydney Local Health District, NSW Health)

The Royal North Shore Hospital (RNSH) Diabetes Assessment Clinic is a nurse-practitioner led ambulatory care clinic that provides assessment and management of adults with Type II Diabetes. The Clinic implemented patient reported measures (PRMs) using the Health Outcomes and Patient Experience (HOPE) IT platform in February 2024.

Implementing the PRMs aimed to:

- Help patients identify and communicate areas of most concern related to diabetes distress
- Help the nurse practitioner to identify areas of most concern for patients and to help deliver individualised treatment
- Promote patient-clinician partnership and shared decision making
- Help evaluate the impact of the service on patient diabetes distress.

Over the first 12 months since implementation, 99 PRMs were completed with feedback indicating that their implementation has helped to better understand areas of concern for patients, helped to engage patients in their care, and helped to inform ongoing management. The data has also been used by the service to inform patient GPs about the level of diabetes distress for their patients with the aim of integrating care across services.

Top tips and lessons learned:

- The implementation of PRMs in the Diabetes Assessment Clinic has provided a valuable source of learning for the local team and for broader health service
- RNSH have learned more about the proportion of patients who report diabetes distress, the areas of most concern, and that ongoing management by the service helps to improve distress levels
- Clinician sponsorship and administrative support is essential for successful implementation.

Read more information about the [NSW Patient Reported Measures Program](#).

Contact nsldh-prms@health.nsw.gov.au if you'd like to know more.

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Sip Til Send: transforming perioperative care, one sip at a time

Blacktown and Mount Druitt Hospital (Western Sydney Local Health District)

The Sip Til Send (SipTS) initiative challenges outdated nil-by-mouth fasting practices by allowing patients to sip clear fluids until surgery enhancing comfort, hydration, and overall experience. Blacktown and Mount Druitt Hospital were early adopters of this NHS-inspired model in May 2024. Whereas previously, patients fasted up to 36 hours, the median fasting time is now just 2 hours.

The initiative has been shaped by the consumer voice to be patient-centred:

- A dedicated group of eight representatives provided valuable input to improve the clarity of instructions, make patient materials more accessible, ensure the initiative represented lived experience and addressed the diverse needs of patients.
- Their insights contributed to the development of clear, user-friendly patient materials, created with the Health Literacy Lab.
- Ongoing consumer engagement confirmed sustained satisfaction and endorsement. Patient surveys have shown 89% of participants have improved experiences and 88% rated SipTS instructions as clear and easy to follow.

The work has been endorsed by [Centre for Perioperative Care \(UK\)](#) and [NSW Agency for Clinical Innovation](#).

Top tips and lessons learned:

Engaging consumers early is key as patient input was pivotal to shaping SipTS policy, implementation and ensuring its success.



Contact aruthy.saseendran@health.nsw.gov.au if you'd like to know more.

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Learning from and knowing our Royal Melbourne Hospital community: Codesigning our Community Engagement Strategy with the Australian Multicultural Health Collaborative

The Royal Melbourne Hospital and the Australian Multicultural Health Collaborative

The Royal Melbourne Hospital (RMH) has launched a new [Community Engagement Strategy](#), 'In This Together' 2025 – 2030. RMH wanted to demonstrate to community and staff that they were listening and willing to hear diverse perspectives to ensure the strategy led to change in the way they engaged with community.

A key element in this approach was the partnership with the Australian Multicultural Health Collaborative (AMHC), which held community-based consultations with migrant and refugee groups supported by bi-cultural workers.

In parallel, consultations were also held with patients, consumers, carers and staff from identified priority groups. The perspectives of more than 300 people from different backgrounds, cultures and experiences were captured through focus groups, workshops, surveys and interviews. A co-design workshop brought multiple stakeholders together to reflect on findings of the consultations. The key pillars of cultural safety, intersectionality and trust were decided at the workshop, as were the focus areas for change comprising, information sharing/communication, access and navigation, attitudes and awareness, and partnership.



Top tips and lessons learned:

- Health services can challenge their perceptions of partnership in health care to achieve more meaningful engagement and collaboration with patients, consumers, carers and community for improved and equitable health outcomes
- A meaningful co-design approach starts with the communities served to understand their perceptions, barriers, fears and expectations. It then works its way back to involve executives, staff and consumer groups to build a meaningful strategy that is deeply rooted within the target communities
- The collaborative development process has built meaningful, reciprocal relationships across the health service and community
- Embracing an intersectional approach allowed voices not often heard to be woven into the fabric of decision making. It's important the journey continues to be in partnership with First Nations communities and all those marginalised by systemic barriers.

Contact Jenny.Barr@mh.org.au or mbalansari@gmail.com if you'd like to know more.

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What patients say matters: Experiences linked to readmissions and ED care

Bureau of Health Information

The Bureau of Health Information (BHI) has released new analysis that focuses on using patient-reported measures (PRMs) to enhance healthcare outcomes. Using data from the NSW Patient Survey Program, BHI – alongside researchers from UNSW Sydney and Sydney University – identified patient experience associated with key outcomes like hospital-acquired complications, delayed discharge, returns to ED and readmission to hospital.

The research found that adult admitted patients were far less likely to be readmitted or return to ED if they reported adequate pain management. Patients who received comprehensive instructions on new medications were half as likely to return to hospital.

Other recent data from BHI revealed that patients treated within clinically recommended timeframes, and spent less time in the ED, were significantly more likely to rate their overall care as 'very good'. Patients who reported well-managed pain and positive interactions with ED health professionals were significantly more likely to rate their care as 'very good', regardless of timely access.

Read an article on the [Growing evidence on the link between patients' experiences and outcomes](#) and about the BHI's [Emergency Department Patient Survey](#).

Top tips and lessons learned:

- Improving patient experiences can help reduce readmission and delayed discharge
- Adequate pain management and counselling on new medications reduce the risk of readmission
- Improving timeliness, teamwork and being kind and caring in the ED can lead to better patient experiences.



Contact BHI-Communications@health.nsw.gov.au if you'd like to know more.

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Nowlanvil Championing Oral Health for General Health

Seniors Dental Care Australia

The 2023-2024 Nowlanvil Championing Oral Health for General Health project aimed to optimise oral health awareness, education, screening and referral using a digital health platform, [Smilo.ai](https://smilo.ai), at [Blue Care's Nowlanvil residential care facility](#). The project enabled person-centred, team-based care through resident and family education sessions and individualised oral health reports, product recommendations and referrals. The strengthened Aged Care Standards and AI technology were key components of this project that spanned research, implementation, customisation and commercialisation.

Contact info@sdcaust.com.au if you'd like to know more.

Bringing joy and connection to dialysis

Shellharbour Hospital Dialysis Unit

At our renal dialysis unit, we celebrated Harmony Week and Easter, focusing on cultural inclusion and patient wellbeing. For Harmony Week, we decorated the unit with vibrant posters of flags, hosted discussions about cultural heritage, and created a space for patients to share stories and traditions. During Easter week, we created smiles with morning bingo, festive gift bags, and a surprise visit from the Easter Bunny. These simple but meaningful activities lifted spirits, fostered connection, and sparked joy for patients and staff. They're a reminder that person-centred care isn't just clinical, it's about creating experiences that make people feel seen, valued, and celebrated.



Top tips and lessons learned:

- Small gestures can have a big emotional impact
- Celebrations in healthcare settings strengthen relationships and boost morale
- Planning ahead makes it easier to balance clinical care and events.

Contact Camila.Miranda@health.nsw.gov.au if you'd like to know more.

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Michael is very abled consumer rep

Calvary Tasmania

Michael Heffernan is a member of the Calvary Tasmania Consumer Advisory Group (CAG). Michael is a 70-year-old man who has an intellectual disability and many health challenges. Significantly, he has his own medical consent. Calvary Tasmania met Michael when the service was confused about his consent and sought verification from his personal care worker and his doctor.

Despite this rough start, Michael has been very generous in agreeing to join the CAG, helping to improve the St John's Day Surgery seating, checking the disability access in various facility areas and helping to advocate for better-located accessible car spaces. In little over a year, Michael has made a considerable impact as a Consumer Representative, and all with a terrific sense of humour.

[View an interview](#) with Tony Brennan, Regional Director of Mission and Partnering with Consumers and CAG member Michael Heffernan.

Top tips and lessons learned:

- Be sensitive around questions concerning medical consent
- Make reasonable adjustments for people with physical and intellectual disabilities
- Engage consumers with lived experience as expert advisors if they are generous enough to do so
- Improved care for the most vulnerable improves the care standard for all patients.



Contact tony.brennan@calvarycare.org.au if you'd like to know more.

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Improving CALD equity and consent for Newborn Bloodspot Screening programs:

The University of New South Wales (UNSW) & Department of Health Queensland

Informed consent is essential for ethical health care, yet current newborn screening consent processes in Australia often fall short for families. Researchers from UNSW's Implementation to Impact team (Faculty of Medicine and Health) are working to improve these processes by drawing on existing evidence, expert input, and engagement with priority populations. This includes culturally and linguistically diverse families, Aboriginal and Torres Strait Islander communities, and those living in regional or remote areas.

A student-led literature review and qualitative analysis of stakeholder feedback, including consumer voices, identified key challenges such as gaps in parental and clinical understanding, inconsistent consent practices, and systemic barriers to equity and inclusive communication.

Reform opportunities include embedding consent discussions into antenatal care pathways, co-designing multilingual and culturally appropriate resources, and enhancing clinician training in communication and cultural safety. This project emphasises real-world feasibility and lived experience to develop practical, inclusive, and culturally responsive recommendations for person-centred consent practices.

Top tips and lessons learned:

Key lessons for improving newborn screening consent:

- Integrate consent discussions into routine antenatal care pathways
- Use multilingual, culturally appropriate materials that align with community contexts and literacy levels
- Co-design resources with families and community advocates to build relevance and trust
- Provide service provider training to support inclusive communication and effective consent practices
- Offer flexible consent options, such as digital tools, visual aids, and interpreter support, to accommodate diverse needs
- Develop adaptable policies that support local implementation without compromising equity.

Contact m.pangestu@student.unsw.edu.au or Deborah.Johnston@unsw.edu.au if you'd like to know more.

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Bringing joy to both patients and staff

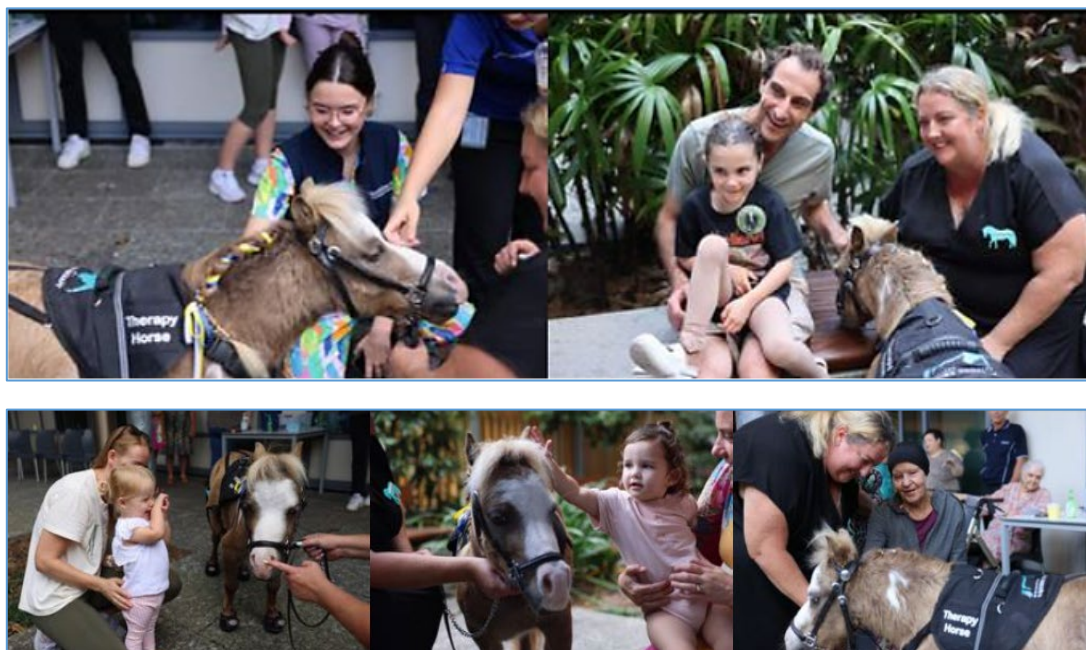
Sunshine Coast University Hospital

Sunshine Coast Health patients and staff enjoyed a visit from Halo the therapy horse in March thanks to Sue, a long-standing consumer representative of the service.

Sue first suggested the idea of a therapy horse visit to the Health Service Chief Executive, Dr Gillies, at the service's quarterly Consumer and Community Consultative Panel late last year, which was supported. Sue explained that the owner of Whinnies Wellness Equine Therapy had many years of experience offering healing and emotional support through sessions with gentle, well-trained miniature horses, and that this could be something worth exploring to improve patients' experience.

Sue and the Consumer Engagement Officer ensured the correct processes were followed, including a very thorough risk assessment, and worked with Wishlist, the local hospital charity, to arrange a roster for inpatient units to visit Halo in the fenced courtyard.

Patients from the Mental Health Unit, the Children and Adolescent ward, the Rehabilitation ward and the Stroke/Neuro ward were able to enjoy Halo's first visit. Sue and the Consumer Engagement Officer said that seeing the big smiles they brought to patient's faces was a day they will never forget.



Contact sc-engagement@health.qld.gov.au if you'd like to know more.

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Partnering with young consumers to advocate for change in mental health services

NSW Agency for Clinical Innovation, Mental Health Network

The new Rainbow Resource is a co-designed toolkit for mental health clinicians supporting LGBTIQ+ young people and helps them to deliver affirming, best-practice care. Up to three in five young people accessing Child and Adolescent Mental Health Services (CAMHS) in NSW identify as LGBTIQ+.

The new, first-of-its-kind Rainbow Resource was developed by the NSW Agency for Clinical Innovation's Mental Health Network, in partnership with LGBTIQ+ young people with lived experience, CAMHS clinicians and community advocates. Using a best practice co-design approach, this expert working group met fortnightly for six months to create the online resource.

The toolkit supports child and adolescent mental health clinicians working with LGBTIQ+ young people and their families to:

- Understand LGBTIQ+ communities, identity and experience
- Support LGBTIQ+ young people, parents and carers
- Foster an inclusive and effective therapeutic environment.

[View the toolkit](#) to learn more.

Top tips and lessons learned:

- Fully engaging with community networks was essential to the project's success. This included accessing LGBTIQ+ specific agencies, and engaging with young LGBTIQ+ First Nations folks and some LGBTIQ+ clinicians
- To ensure a safe and accessible environment for the young people with lived experience in the working group, the project team included:
 - Pre-briefing and debriefing before and after scheduled meetings
 - Additional drop-in sessions just for young people between meetings
 - Consideration of accessible language, topics and processes that were trauma-informed, culturally responsive and neuro-accessible.
- With appropriate safeguards, it was possible to include acutely unwell young people in the project
- Being an advocate is part of healing for many people, particularly where human rights are challenged
- Including families, carers and loved ones was vital the development of the resources.



Contact aci-mentalhealth@health.nsw.gov.au if you'd like to know more.

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Des and Wendy strike the right chord in retirement

Gold Coast Primary Health Network

Des Weatherhog, 79, and his partner Wendy Chappell, 74, are embracing retirement with music, movement, and adventure. After losing his wife a few years ago, Des found a new purpose through a local ukulele group, where he met Wendy.

Together, they've stayed active through the Bond University Allied Health (BUnyAH) program for healthy ageing, which includes tailored exercise, health education, and social connection. "We've done every aspect of it, it's fantastic," Des said and especially valued the camaraderie, expert tips from guest speakers, and supportive environment created by students and academics.

Today their active lifestyle extends beyond BUnyAH - they cycle daily, travel in their motorhome, even fossicking at Lightning Ridge. Whether strumming a handmade ukulele or exploring the country, the couple say the BUnyAH program reflects what retirement should be: meeting people, staying active, and enjoying life.

Learn more about the [Bond University Allied Health \(BUnyAH\) Interprofessional Healthy Lifestyles Program](#) and the [Healthy Ageing programs](#) funded by Gold Coast Primary Health Network.

Top tips and lessons learned:

- It's never too late to learn new things.

Contact kerrym@gcphn.com.au if you'd like to know more.

Rolling consumer engagement to support timelier, more efficient, and flexible feedback across a national digital mental health service.

MindSpot (MQ Health)

In late 2024, MindSpot introduced regular, rolling consumer engagement sessions to supplement (the then) existing project-specific consumer consultations. This was to respond to challenges in accommodating tight timelines or capturing feedback for minor service updates, or business-as-usual activities. The new approach enabled a timelier, more flexible and efficient collection of consumer insights on an ongoing basis.

Each fortnight, MindSpot purposefully selected two to three consumers from their Consumer Engagement Network for a 30-minute, one-to-one guided discussion comprising a core set of questions about the service journey and experience, and a changing set of focused questions on specific service features. Expected longer-term benefits include improved:

- Visibility of and responsiveness to consumer preferences and needs
- Integration of feedback across a wider range of projects/initiatives

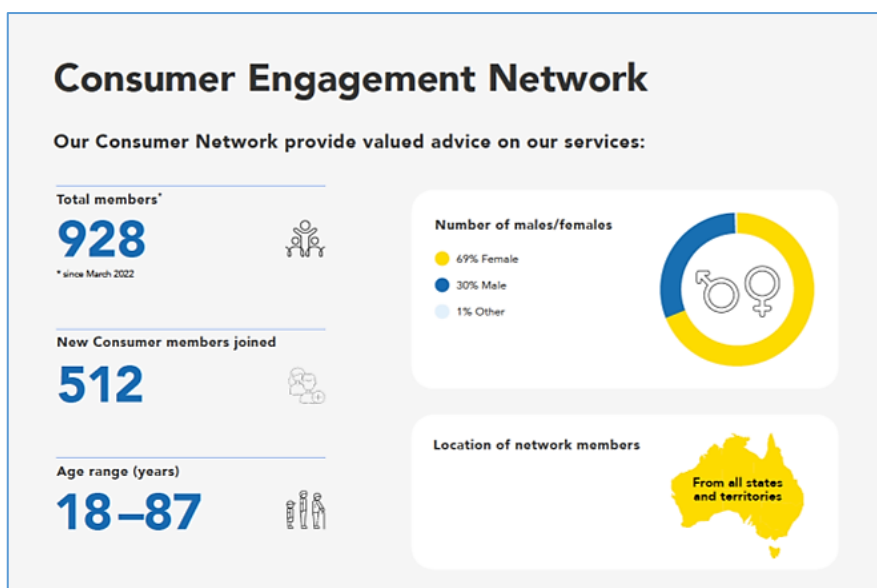
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- Alignment with our strategic objectives around quality, accessibility, and partnering with consumers.

View the report outlining the key achievements and outcomes of [MindSpot's digital mental health services in 2023](#).

Top tips and lessons learned:

- Leverage early engagement with service and network for consumer recruitment which has boosted response rates and interest
- Maintain a well-structured, flexible engagement process supported by responsive project leads/managers to enables quick turnaround of discussion guides, conducting sessions, and providing feedback
- Gather feedback iteratively and broadly across a range of service development features and at multiple stages of the project
- Address equity and capacity gaps so that under-represented groups are included
- Remunerate consumers in a prompt, low-burden way.



Contact alana.fisher@mq.edu.au if you'd like to know more.

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New Resources

Healthy Pregnancies for Women with Epilepsy

Epilepsy Action Australia

Pregnancy raises many issues for women with epilepsy. While most women with epilepsy deliver healthy babies, understanding possible risks is important so they can plan and work with their doctor to manage and lessen those risks.

Epilepsy Action Australia (EAA) has coordinated a webinar series featuring experts and people with lived experience discussing many crucial aspects of pregnancy and epilepsy, to help make the journey as smooth as possible. Episodes include:

- **Webinar 1:** 'Managing Medications' delivered by epilepsy expert Professor Lata Vadlamudi. [View the webinar recording](#)
- **Webinar 2:** 'Minimising seizure risk' given by epilepsy expert Associate Professor Cecilie Lander. [View the webinar recording](#)
- **Webinar 3:** 'Mind, body and baby' given by neuropsychiatrist Dr Christopher Randall, with a personal experience shared by new mum with epilepsy, Lily Hayter. [View the webinar recording](#)

To support women with epilepsy through their pregnancy journey, EAA has an [online peer support group](#) and epilepsy nurses to discuss any concerns on 1300 37 45 37 or email epilepsy@epilepsy.org.au.

For further epilepsy information, visit our website at epilepsy.org.au

Funded by: Investing in Queensland Women Grant Program, Office for Women, Queensland Government.



Contact epilepsy@epilepsy.org.au if you'd like to know more.

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Tailored in-language health education for migrant women, non-binary and gender diverse people

Multicultural Centre for Women's Health

For over 45 years, the Multicultural Centre for Women's Health (MCWH) has been delivering a health education program that addresses migrant and refugee women, non-binary and gender diverse people's barriers to accessing accurate, timely and appropriate health information and support services.

Our in-language, peer-led outreach program empowers participants to make informed choices on their own health and wellbeing. Our health education sessions are free, evidence-based and delivered by trained bilingual health educators, who speak over 20 languages on topics such as COVID-19, mental health, occupational health and safety, sexual and reproductive health, preventing gender-based violence and gender equality.



An MCWH Arabic speaking bilingual educator, delivering a health education session about sexual and reproductive health to a group of Arabic speaking participants in a community setting.

If you are interested in our health education program, please contact programs@mcwh.com.au or visit [Health Education Program - Multicultural Centre For Women's Health](#).

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Haemochromatosis Australia - helping with health literacy

Haemochromatosis Australia

[Haemochromatosis Australia](#) encourages newly diagnosed patients to have informed conversations with healthcare professionals and understand how they as individuals may be impacted. Patient resources, [Haemochromatosis: Your Questions Answered](#) and the [Family Letter](#) have been co-designed by people living with the condition. These and other resources are available at ha.org.au.

General practitioners are well-placed to recognise early symptoms of iron overload, and can provide patients with helpful resources. Trusted patient resources are included in *Haemochromatosis and High Ferritin Health Pathways* which are easily accessible and able to be shared with patients. Health practitioners can also guide their patients towards participation in the [Australian Haemochromatosis Registry](#) which is now open.

To find out more, to provide local feedback or submit stories for our quarterly newsletter please contact feedback@ha.org.au.



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New Resources from the Commission

MedicineInsight – Tackling COPD with data this flu season

As flu season approaches, the spotlight is once again on respiratory health, and for GPs, this means a renewed focus on Chronic Obstructive Pulmonary Disease (COPD). Following the release of the [MedicineInsight GP Snapshot: COPD](#), a customised Practice Report on COPD will soon be available to participating practices. This report will provide essential data and practical insights to help GPs improve the diagnosis and management of COPD, including reported rates, smoking, and vaccinations.

This initiative underscores the importance of person-centred care by allowing GPs to reflect on their own prescribing and patient care patterns and review their practice results alongside the aggregate data from all participating MedicineInsight practices. Additionally, participating practices will receive a Quality Improvement Guide, which can contribute to The Royal Australian College of General Practitioners (RACGP) Continuing Professional Development (CPD) points.

By focusing on person-centred care in COPD management, healthcare providers can tailor treatments to individual patient needs, preferences, and lifestyles. This approach ensures that patients with COPD receive comprehensive care that improves their quality of life and health outcomes.

For more information, you can visit safetyandquality.gov.au/MedicineInsight or email MedicineInsight@safetyandquality.gov.au.

Newly released PREM – AHPEQS-Parent

A free patient-reported experience measure (PREM) tool is now available for hospitals to ask parents and carers of children admitted to hospital about their experience of care.

The Australian Hospital Patient Experience Question Set for parents and carers (AHPEQS-Parent) asks 15 questions to capture the experience of parents and carers when their child has been admitted to hospital. The tool was developed and validated by the Perth Children's Hospital in partnership with the Australian Commission on Safety and Quality in Health Care.

For more information on AHPEQS-Parent, Patient-Reported Experience Measures (PREMs) and how to implement them, visit the Commission's newly updated [Patient Experience webpage](#) and watch the Person-centred Care in Practice webinar episode, [Giving consumers a voice in paediatric care](#).

Online education – Sepsis in Primary Care

Sepsis is a life-threatening medical emergency affecting 55,000 Australians each year and causing over 8,700 deaths. Early recognition and timely intervention are critical, but recognising and responding to sepsis in primary care can be challenging.

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The Commission, in partnership with The George Institute for Global Health, Sepsis Australia and Medcast has developed an online education module for primary health professionals. This free one-hour, CPD-approved course features three interactive case studies and three downloadable clinical resources to support primary health professionals recognise and respond to sepsis and post sepsis syndrome. [Watch this 1-minute video to find out more.](#)

A live webinar, hosted by Medcast on 18 June 2025 at 7pm AEST will reinforce the important role of primary care in recognising sepsis early, beginning time critical lifesaving treatments and providing support after sepsis. The webinar will include personal stories from sepsis survivors and people bereaved by sepsis.

Next steps

[Enrol in the webinar](#) or [online education](#) now and help improve sepsis outcomes in primary care.

More information

Visit the [National Sepsis Program](#) or contact sepsis@safetyandquality.gov.au.

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Events & News

Development of the third edition of the National Safety and Quality Health Service Standards

The National Safety and Quality Health Service (NSQHS) Standards lay the groundwork for consistent, high-quality healthcare delivery. The Commission is gearing up to develop the third edition of the NSQHS Standards, actively involving healthcare professionals and community representatives in the process.

The Commission will consult with key stakeholders, including the Australian Government, state and territory health departments, health services, clinicians, clinical experts, consumers, and peak bodies.

You're invited to share your insights! The upcoming initial consultation will concentrate on:

- Focus areas for the third edition of the NSQHS Standards
- Emerging and existing safety and quality issues
- Key learnings from the [NSQHS Standards \(second edition\)](#)
- Opportunities to improve the NSQHS Standards structure, support improved engagement and implementation
- Implementation resources to support the third edition of the NSQHS Standards.

Feedback is being gathered through quick online surveys, focus groups, and written submissions. Your input will help shape the third edition of the NSQHS Standards, set to be released for public consultation in 2026 and finalised by 2028. Get involved and make a difference!

Visit our [NSQHS Standards \(third edition\) Engagement Hub](#) to stay informed about the project and [sign up to the NSQHS Standards \(third edition\) subscriber list](#) to receive information about how to get involved in the consultation.

Person-centred Care in Practice webinars

In April 2025, we held the second episode of the current Person-centred Care in Practice webinar series. We heard from Metro South Health about their 'Have Your Say' initiative, which is an inclusive and person-centred system for handling complaints and compliments. This initiative maximises accessibility for consumers by offering multiple submission options available in ten different languages.

As the webinar generated more questions than our panel members could answer during the live Q&A session, the Metro South Health team has kindly provided written responses. Visit our [website](#) to explore the full set of [questions and answers](#) and watch the webinar recording.

A blue graphic with a large white arrow pointing right. The text 'Person-centred Care in Practice' is in white, and 'WEBINAR SERIES' is in white on a dark blue rectangular background.

Person-centred
Care in Practice

WEBINAR SERIES

Person-centred Care Insights

Looking back on first episode in this series

We're pleased to share that the team from Western Health, featured in our December webinar, have recently published their [Lived Experience Advisor Program initiative](#).

We encourage members to share their ideas for future topics or nominate speakers for upcoming webinars by contacting us via email, partneringwithconsumers@safetyandquality.gov.au.

Person-centred Care Insights

Recent publications

Below are some recent publications in the area of person-centred care that you may find useful.

Inclusion of publications in this section is not an endorsement or recommendation of any publication or provider. Access to documents may depend on whether they are Open Access and/or your individual or institutional access to subscription sites/services. Material that may require a subscription is included as it is considered relevant.

[A framework for the continuous monitoring of person-centred hospital care: validation of a checklist for participatory service improvement](#)

F. Cardinali, S. Carzaniga, L. Martini and et al.

[Healthcare leaders' perceptions of the contribution of artificial intelligence to person-centred care: An interview study](#)

Ingrid Larsson, Petra Svedberg, Jens M Nygren, and et al.

[Patient perspectives on multidimensional learning and person-centred care: interviews with persons living with type 2 diabetes](#)

Alma Dautovic, Eva Brink, Susanne Andersson, and et al.

[Possibilities and Limitations in Person-Centred Cancer Care: A Qualitative Study](#)

Cecilia Linnanen, Jessica Hemberg, Grethe H Bjerga, and et al.

[Enhancing Person-Centred Care in Suicide Prevention: A Nursing Perspective](#)

Matias Gay

[Mapping Leadership in a Person-Centred Care Context: A Scoping Review](#)

Marieke Deuling, Charlotte Bagchus, Gaby Jacobs, and et al.

[Person Centred Care: State of the Art and Future Perspectives](#)

Hanna Gyllensten, Matilda Cederberg, Sara Alsén, and at al.