

Acute Care Taskforce – March 2013

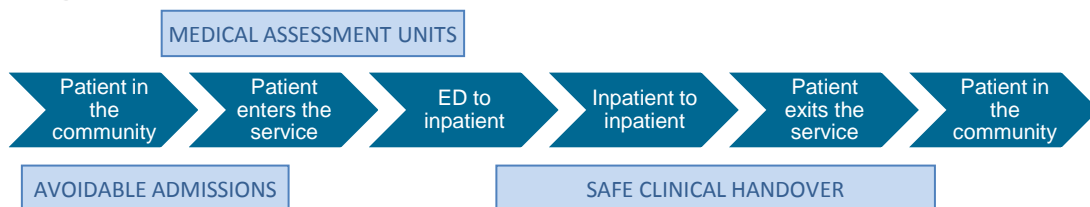
Improving the medical patient journey

Co Chairs - Vicki Manning / Jeremy Wilson

BACKGROUND

Since early 2005 the Acute Care Taskforce (ACT) has provided high level system-wide advice on *improving the medical patient journey*. The ACT has traditionally undertaken discrete projects concentrating on avoidable admissions, several Safe Clinical Handover projects and leading the establishment of 29 Medical Assessment Units (MAUs) across the state (Figure 1).

Figure 1 ACT and the medical patient journey (2005-2012)



2012: REPOSITIONING THE ACT

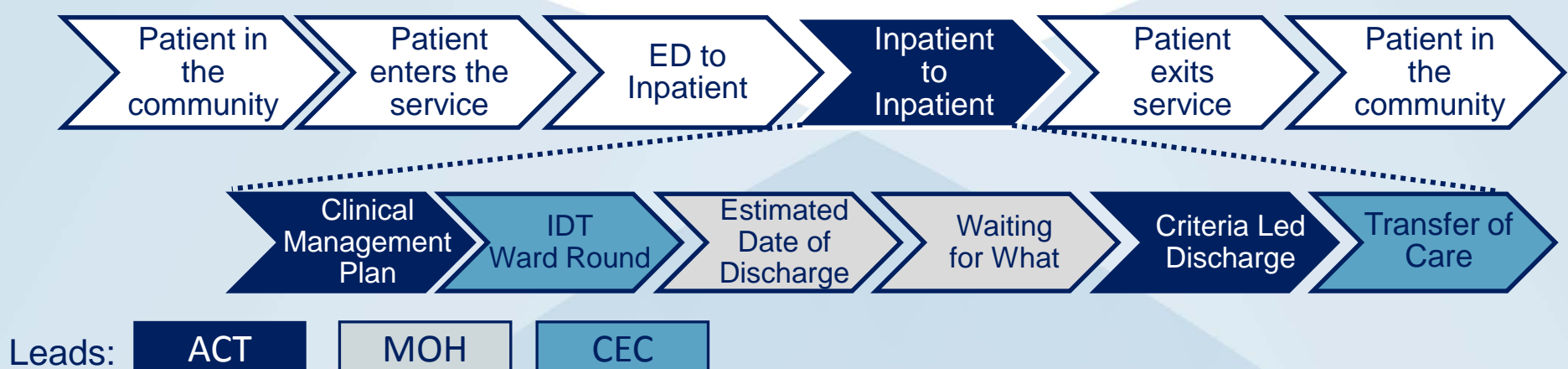
Following a transition to the NSW Agency for Clinical Innovation (ACI) in 2012 the ACT repositioned with Chief Executives from Local Health District and Specialty Networks (LHD/SNs) asked to nominate clinical (allied health, medicine, nursing) and managerial representatives. Consumer representation was also strengthened. Existing links with primary health care, the Clinical Excellence Commission (CEC), NSW Ambulance Service and other bodies that underpin NSW health care delivery were maintained.

2012/3: SETTING THE WORK PLAN

At an ACT workshop in November 2012 consumers, managers and clinicians recommended a focus on the medical inpatient journey. This approach was validated at the first state-wide ACT workshop on March 8, 2012. The elements of the medical inpatient journey were confirmed as:

- a **clinical management plan** that is commenced on admission and revised throughout the inpatient journey.
- **multidisciplinary ward rounds** that involve all members of the health care team including patients and their families (e.g. *In Safe Hands* - Structured Interdisciplinary Ward Rounds - SIBR).
- a meaningful **estimated date of discharge** that is entered on admission, revised throughout the patient journey and includes what a patient is waiting for (e.g. *waiting for what?*).
- **criteria led discharge** for patients with simple discharges.
- planned **transfer of care**, within and between care settings, which involves the patient, their families and/or carers.

Figure 2 The Acute Care Taskforce: improving the medical inpatient journey (2013)



CONTACT

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PROGRAM OF WORK

ACI is currently in the process of establishing working groups (WGs) for key pieces of work under the direction of the ACT. Nominations are currently being taken from interested consumers, clinicians and managers to be part of these working groups. All of the meetings will take place at the ACI offices in Chatswood with teleconference and video conference attendance possible. Nominations for these working groups close on **Monday April 8, 2013**.

MEDICAL ASSESSMENT UNITS

The NSW Health Medical Assessment Unit Evaluation will be published imminently. It recommends that:

ACI will undertake a broader consultation of the Medical Assessment Unit Model of Care 2012 to ensure the components are achievable across existing and future MAUs.

The initial MAU Model of Care Working Group will take place on Friday April 19 between 10:00 and 12:00.

CRITERIA LED DISCHARGE

Criteria led discharge (CLD) has been identified as an important element for improving the *medical inpatient journey*.

Two CLD WG meeting dates have been set for Thursday April 18 (9:30-11:30) and Thursday May 02 (14:30-16:30).

CLINICAL MANAGEMENT PLANS

The ACI will also lead on the development of tools to support the use of clinical management plans (CMP) for improving the medical inpatient journey. The CMP WG dates are set for Monday April 15 (14:00-16:00) and Thursday May 02 (9:30-11:30).

ACUTE CARE TASKFORCE: MEMBERSHIP

- Central Coast LHD
- Children's and Paediatric Services Network
- Hunter New England LHD
- Illawarra Shoalhaven
- Mid North Coast LHD
- Murrumbidgee LHD
- Nepean Blue Mountains LHD
- Northern NSW LHD
- Northern Sydney LHD
- South Eastern Sydney LHD
- South Western Sydney LHD
- Southern NSW LHD
- St Vincent's Health Network
- Sydney LHD
- Western NSW LHD
- Western Sydney LHD
- Agency for Clinical Innovation
- Ambulance Service of NSW
- An academic
- Clinical Excellent Commission (CEC)
- Consumers
- Health Education & Training Institute (HETI)
- Junior Medical Officers (HETI)
- NSW Ministry of Health (MOH)
- Primary Health Care, including Medicare Locals

In 2013 the state-wide ACT will meet quarterly on the second Friday of the month. The remaining meetings for 2013 are June 14, September 13 and December 13. An Executive will provide strategic guidance to the ACT, meeting monthly on the second Friday (except Mar, Jun, Sep and Dec).

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