



ACI NSW Agency
for Clinical
Innovation

Agency for Clinical Innovation Strategic Plan (2012 – 2015)

Foreword

In January 2012, the Agency for Clinical Innovation moved into the next phase of its development following an expanded role proposed in the Governance Review of NSW Health, a revised Determination of Functions and the appointment of a new Chief Executive. This was followed by the appointment of an Executive Team, each with responsibility for directing a portfolio identified in a revised organisational structure.

As a result of these changes it was important to develop a new three year Strategic Plan to provide a clear direction on the role of the ACI for our staff, networks, consumers and key partners in health. Over the past four months the Strategic Plan has been developed through a process of open consultation and advice in interviews and workshops from a broad spectrum of individuals including ACI staff, network managers and co-chairs, LHD Chief Executives, clinicians and managers as well as our colleagues from CEC, HETI, BHI, NSW Cancer Institute, Ministry of Health and the ACI Consumer Council and Forum.

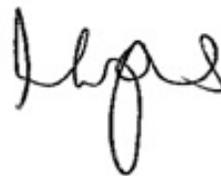
At a time of evolution for the ACI, the wide consultation process has provided us with the opportunity to listen to our staff and external stakeholders to ensure that we get our priorities right. We have been encouraged by the level of participation and the keen interest shown in this important planning initiative.

The Strategic Plan 2012 – 2015 was approved for implementation by the Board of the ACI at a meeting on 15th August 2012.

We would like to warmly thank everyone who has participated and for your continued involvement in helping us to deliver on the objectives identified in the Strategic Plan.



***Professor Brian McCaughan AM
Chairman***



***Dr Nigel Lyons
Chief Executive***

...leading to our vision

..the outcomes of which will exceed the expectations of our partners, patients & community..

..to facilitate quality health care ...

..we will invest in our clinicians, consumers and staff to effectively use our resources..

Aligned with ACI's purpose and values..

We will be valued as the leader in the health system for designing, evaluating and supporting implementation of innovative models of patient care

Our clinicians, patients, health care partners and the community

- The go to place for clinician and consumer led reform
- Effective partner in implementation
- Better health outcomes for all

Our processes

Effective Partnerships

- Work in collaboration with partners
- Understand needs, establish and align strategic priorities

Innovative Health Care

- Develop a rigorous approach to all aspects of innovation
- Create an environment and capability for innovation

Operational Excellence

- Ensure collaboration & alignment of key priorities across the organisation
- Develop high quality systems & processes that are continuously improved

Our resources

Our clinicians, consumers and staff

- Invest in our people to develop skills & expertise
- Create a vibrant & stimulating environment with a shared direction
- Promote our clinicians, consumers & networks to lead the clinical reform process
- Develop an ACI team with clear roles for our people
- Strengthen involvement & communication

Our financial stewardship

- Prioritise and maximise our use of resources

Purpose: We will work with clinicians, consumers and partners to design and drive evidence based innovation to ensure appropriate, effective and sustainable patient centred health care

Core values: Collaboration Openness Respect Empowerment

Focus Area	What ACI will achieve by 2015:			How ACI will achieve this: Strategic Initiatives
	Strategic Objective	Destination Statement	Performance Measure	

Our clinicians, patients, health care partners and the community

The go-to place for clinician and consumer led reform	Our leadership in identifying and delivering improved outcomes for patients through innovation is recognised locally and nationally by clinicians, consumers and managers who are eager to work with us to improve health care.	<ol style="list-style-type: none"> 1. Healthcare provider awareness & recognition 2. Website Usage 3. Healthcare providers contacting ACI for support 	<ul style="list-style-type: none"> • In the first 12 months, develop a reputation for delivery by focusing on completing strategic projects of significance to ACI and partners
Effective partner in implementation	We have developed a strong alliance with LHDs and other health care providers and there is a high level of satisfaction from these partners in working with us on improving the delivery of their health care programs.	<ol style="list-style-type: none"> 4. Partnership satisfaction 	<ul style="list-style-type: none"> • Develop clear communications about the role and work of ACI and its achievements • Review and evaluate partnerships annually • Measure and monitor impact on health outcomes
Better health outcomes for all	Working with our clinicians, patients and health care partners we contribute to improving the health of the population and the experience of care and in doing so, share accountability for health outcomes, quality and cost of care. We are committed to equity of access for all people.	<ol style="list-style-type: none"> 5. Clinical return on investment 6. % Implementation of new models of care, clinical pathways and guidelines 	<ul style="list-style-type: none"> • Develop a culture within ACI which demonstrates respect for the needs and priorities of Aboriginal people and other priority populations in all ACI projects and activities

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Our processes

<p>(i)</p> <p>Effective Partnerships</p>	<p>Understand needs, establish and align strategic priorities</p>	<p>We have mechanisms in place for engaging with LHDs and other health partners to adopt and work together on programs identified as important within the local and statewide context.</p>	<p>7. Partnership satisfaction</p>	<ul style="list-style-type: none"> • Clarify roles and align work programs with the Ministry of Health and other supporting agencies (eg CEC, BHI, HETI, Cancer Institute, NSW Kids and Families) • Establish mechanisms for determining priorities and working with: <ul style="list-style-type: none"> ○ LHDs ○ Clinical service networks ○ Other health care providers eg Medicare Locals ○ Consumer groups • Work with clinicians, consumers and partners (eg LHD Clinical Councils, Medicare Locals, AMS) on prioritised work programs
	<p>Work in collaboration with partners</p>	<p>We have established working relationships with our partners based on shared goals, clearly agreed responsibilities and identified outcomes.</p>	<p>8. Partnership satisfaction 9. % Service compact items with MOH met 10. % Agreed priorities with other partners met</p>	

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<div style="border: 2px solid #0070C0; border-radius: 15px; padding: 10px; text-align: center;"> <p>(ii)</p> <p>Innovative Healthcare</p> </div>	<p>Create an environment and capability for innovation</p>	<p>We have a strategic framework in place that provides a forum for innovative thinking to promote evidence based, cost effective, safe, high quality innovations in health care in addition to offering the tools and support clinicians need to develop and implement models of care.</p>	<p>11. Innovation and capability score 12. % Redesign School projects successfully implemented</p>	<ul style="list-style-type: none"> • Define “innovation” and clarify and communicate ACI’s role in innovation in the health care system • Develop a clear framework for each component of the innovation cycle • Facilitate and support the implementation of innovation with health care providers • Develop a prioritisation framework for innovation • Develop the innovation skills and capability of our health care partners.
	<p>Develop a rigorous approach to all aspects of innovation</p>	<p>We apply best practice standards and governance to all stages of our projects which follow the health innovation lifecycle comprising innovation, evaluation, adoption, optimisation and disinvestment.</p>	<p>13. % Compliance with the innovation framework</p>	

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<div style="border: 2px solid #0070C0; border-radius: 15px; padding: 10px; text-align: center;"> <p>(iii)</p> <p>Operational Excellence</p> </div>	<p>Ensure collaboration & alignment of key priorities across the organisation</p>	<p>Our clinical networks and teams are aligned with our strategic priorities and are collaborating on projects of common interest.</p>	<p>14. % Clinical network projects aligned to ACI strategic and operational plans 15. % Cross clinical network project collaboration</p>	<ul style="list-style-type: none"> • In the first year, develop and implement robust systems and processes to support our activities (eg prioritisation, alignment, evaluation) • Work with our clinical networks to determine priorities • Ensure continuous input and feedback mechanisms from consumers, clinicians and partners • Establish mechanisms to support collaboration across the clinical networks
	<p>Develop high quality systems & processes that are continuously improved</p>	<p>Governance, structures and processes are in place across the ACI and clinical networks ensuring that we are working together to deliver coordinated, consistent high quality services.</p>	<p>16. Staff satisfaction with operational effectiveness</p>	

Focus Area	What ACI will achieve by 2015:			How ACI will achieve this: Strategic Initiatives
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Our resources

Our clinicians, consumers and staff

Invest in our people to develop skills & expertise	We have systems in place to support our clinicians, managers and staff to develop their skills and expertise in order to optimise their participation and performance in all levels of the organisation.	17. Staff and clinical network satisfaction	<ul style="list-style-type: none"> • In the first year, establish a physical workplace that supports a vibrant and stimulating environment • Acknowledge and build on existing capability and implement a consistent approach to ongoing professional development
Create a vibrant & stimulating environment with a shared direction	Our clinical networks and staff identify with the ACI's values, purpose and vision and in doing so find the ACI a creative workplace with an inclusive and empowering culture.	18. ACI culture and climate score	<ul style="list-style-type: none"> • Acknowledge personal and professional contributions to the organisation • Involve staff and clinical networks in key decisions
Promote our clinicians, consumers and clinical networks to lead the clinical reform process	Our clinicians, consumers and clinical networks are well resourced with the tools and capacity to preserve and support their critical role in the design and implementation of innovative healthcare.	19. Clinical network effectiveness score	<ul style="list-style-type: none"> • Develop agreed behaviours to support and promote ACI core values

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(cont.) Our clinicians, consumers and staff	Develop an ACI team with clear roles for our people	We have structures and processes in place which empower our people to work in collaboration on projects with clearly identified responsibilities.	20. % Staff with annual performance development review	(cont.) <ul style="list-style-type: none"> • Involve clinical networks in the design and implementation of the innovation cycle • Develop and implement a communications strategy centred on broadening and strengthening existing engagement • Increase and broaden clinician and consumer representation to support the ACI strategy
	Strengthen involvement & communication	We have structures and two way communications systems in place to actively involve our staff, clinical network clinicians and consumers. Central to our communication is the innovative use of media technology and effective sharing of knowledge encouraging participation in our health reform activities.	21. ACI staff engagement 22. % Clinician and consumer clinical network members actively involved 23. ACI staff and clinical network member satisfaction with communication	
Our financial stewardship	Prioritise and maximise our use of resources	Systems are in place which ensure that our resources are allocated to meet identified needs, in accordance with agreed priorities, and utilized for maximum benefit.	24. Net cost of services (NCOS)	<ul style="list-style-type: none"> • Fully develop the organisational structure and map financial systems to structure • Develop robust and transparent systems for prioritisation and utilisation of our resources