

Communique

PURPOSE

This communique provides a summary of the third formal meeting of the Sustainable Health Review (SHR) Independent Oversight Committee (Committee) held Thursday 20 August 2020.

BACKGROUND

The Committee, established in 2019, provides external assurance and advice directly to the Minister for Health and Mental Health and the public on the progress of the Sustainable Health Implementation Program (the Program). Executive Sponsors and Recommendation Leads have been appointed for SHR Recommendations, who as members of the Program Steering Committee and Program Board, are responsible for driving the advancement of each Recommendation.

In response to delivering on SHR Recommendation 30, a Sustainable Health Implementation Support Unit was also stood up in July 2019, providing a dedicated team to support the Program with a robust, disciplined and integrated approach to Program scoping, partnerships, communication and governance.

From March to June 2020, the Sustainable Health Implementation Support Unit reapplied efforts to support the COVID-19 response, as did many of the key Program stakeholders. Through the COVID-19 response there have been learnings and accelerations for the Program, as well as some delays.

Re-forming in June 2020, the Sustainable Health Implementation Support Unit coordinated the Department of Health's submission to the WA Recovery Plan, with SHR providing the 'framework' for the WA health system recovery.

AREAS OF STRENGTH AND PROGRESS

SHR Progress through COVID-19

There was universal praise and congratulations from Committee members on the SHR work that has progressed and achieved to date – and an acknowledgement that in Western Australia, the community is well placed, a healthy sign of the way the WA health system has responded to COVID-19.

Executive Sponsors for Recommendations 11 and 12 outlined where there had been significant improvement through use of technology and digital-health for metropolitan and country patients. Recommendation 11 'improving timely access to outpatient services' has seen telephone and video conferencing consultations more than double between February and March 2020. Benefits from a reduced number of patients visiting hospitals include improved efficiency, patient satisfaction, social distancing and reduced risk of infection. Recommendation 12 'improving coordination and access for country patients' includes the mobilisation of the WA Country Health Service Command Centre that provides coordination of patient transport, speciality advice, and supports for patient assessments and clinical monitoring.

The approach to Recommendations 21 and 19 was also discussed with the Committee, outlining the investment in system-wide enabling functions that underpin the Program's success. Business Intelligence systems, analytical capability and data-sharing have been improved, delivering on components of Recommendation 21 that aims to ensure timely and targeted information is driving safety, quality and supports decision making. Under Recommendation 19, the Department of Health is continuing to seek a fair share of Commonwealth funding and negotiating new partnerships and agreements that contribute to a sustainable funding footprint. Through the COVID-19 response a collective payment agreement for the deployment of Western Australian nurses to Victoria was agreed and the COVID-19 private hospital agreement negotiated that provided security for those employed across the 72 registered hospitals in WA.

SHR Partnership Group

The Committee strongly supports the establishment of the SHR Partnership Group. The SHR Partnership Group will consist of representatives across the WA health system including consumers, people with lived experience, clinicians, non-government organisations, Health Service Providers and the Department of Health. Meeting on a bi-monthly basis, the SHR Partnership Group provides external advice to the Committee as well as to Executive Sponsors and Recommendation Leads on the Program and Recommendation implementation.

Committee Oversight and Advisory Function

The Committee discussed and agreed on their approach to undertaking oversight and advisory functions via an inputs and outputs model (attachment 1). For the Committee to provide oversight and impartial advice, inputs must be provided which include updates from the Program support office; a report and briefing from the Program Steering Committee Chair; outcomes metric reporting; presentations and discussions with Executive Sponsors; and a report from the SHR Partnership Group.

Drawing from their own experiences, the Committee can then provide outputs, including advice to the Program Steering Committee as well as the publicly available Committee communique and a briefing to the Minister for Health and Mental Health.

AREAS FOR IMPROVEMENT AND OPPORTUNITIES

Timeframes

The Committee noted that timeframes for SHR delivery should be updated, taking into account the impact of COVID-19. While revised timeframes suggest all SHR Recommendations will have commenced implementation and a Program reporting cycle commenced by January 2021, the Committee encourages the Program Executive to review these timeframes and commit to what is achievable. The Committee will be focused on tracking progress and forming independent advice against clear timeframes for delivery.

Measuring Outcomes

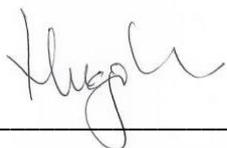
A presentation on the development of indicators for measuring SHR outcomes was provided to the Committee. The Committee noted the good progress, noting that further work to involve consumers in this work would be undertaken and that reporting on an initial set of system-wide indicators would be ready by November 2020.

COVID-19 Lessons Learned

Committee members also contributed to a report on observations and lessons learned through COVID-19. Collectively noting there will be challenges in reform following COVID-19, as well as a need to maintain broader stakeholder engagement and other opportunities presented throughout COVID-19 that will help drive the cultural shift required by the Program.

NEXT STEPS

The Committee will focus on the Program progress against clear timeframes and publicly reportable outcome metrics, as well as seeing partnerships with key stakeholders, including consumers, embedded throughout.



Professor Hugo Mascie-Taylor

Chair, Independent Oversight Committee

September 2020

Independent Oversight Committee Inputs and Outputs

Inputs will be provided to the Independent Oversight Committee to enable the assurance and oversight function as well as execution of their outputs to the Minister for Health and Mental Health.

