

Royal Children's Hospital Business Plan

2009-11

July 2009



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Message from the Chief Executive

Our Business Plan 2009-2011

The Royal Children's Hospital is one of the world's great hospitals - it is our vision and it is what drives us to achieve our goals.

This common vision and our goals underpin our business planning for the next two years and our move to the wonderful New Royal Children's Hospital in 2011. Importantly, and in the spirit of our values, this business plan has been developed by the hard work and creative thinking of RCH staff across all divisions, working together on our future.

In summary, the key tasks within our two-year business plan are to:

- improve access to all clinical services
- focus on improving quality and safety of our services
- improve transition processes to adult services
- enhance our research and education focus
- continue to improve organisational governance and accountability
- prepare for the successful transition to the New RCH
- further develop our partnerships in care

Each division will have its own two year business plan in support of the RCH Business Plan. This ensures that each and every one of us contributes in a very practical way to achieving our goals.

We are without doubt entering the most exciting time in our history. Our achievements in the past year have been significant and have tested our resilience and proven that we can achieve great things. I would like to thank you all for your commitment, your outstanding skills and dedication, and your passion for improving health outcomes for all children and creating a better working environment here at The Royal Children's Hospital.

I look forward to working with you to achieve our vision to be a GREAT children's hospital.



Christine Kilpatrick
Chief Executive Officer
Royal Children's Hospital

1. Introduction

The Royal Children's Hospital 2009-11 Business Plan was initially developed by the CEO, Executive and a broad range of staff at a consultative forum on the 8 May 2009. Since that time the plan has been reviewed and approved by the Executive and will structure our business activities for the two years 2009-2011 in the lead up to moving to The New RCH. The audience of the business plan is:

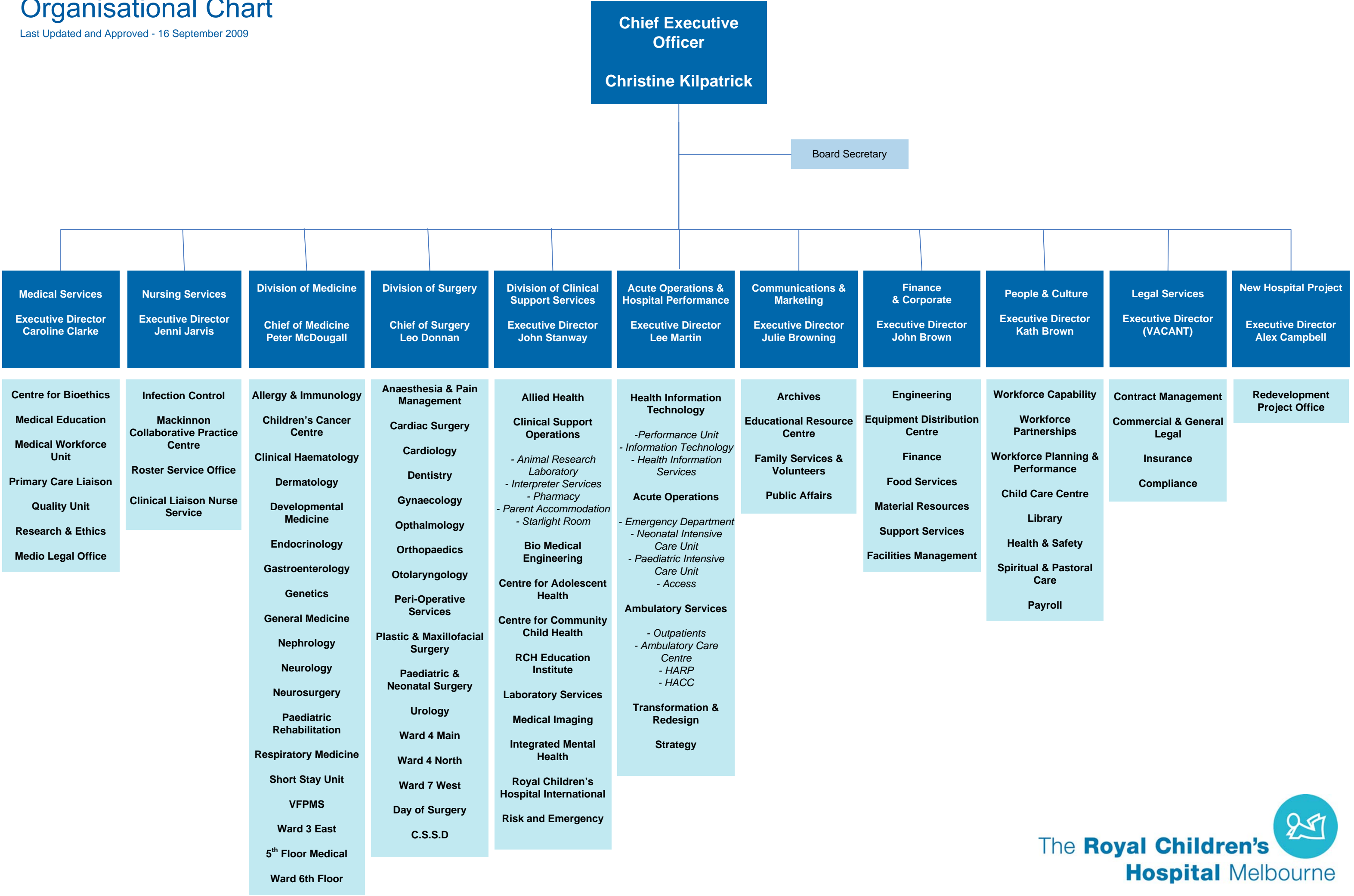
- Royal Children's Hospital Board
- Executive Team
- Heads of Departments
- Operational / Business Managers
- All RCH staff
- External partners

1.1. Current Organisational Structure

The current high RCH organisational structure is presented on the following page.

Organisational Chart

Last Updated and Approved - 16 September 2009



1.2. Royal Children's Hospital Planning Context

The Royal Children's Hospital (RCH) Business Plan is informed by the Royal Children's Hospital Strategic Plan 2007-2010, which articulates the desired future for the organisation.

The strategic plan provides an overview of where our organisation wants to go and the business plan provides the detail of how we plan to achieve the objectives of the strategic plan. Our 2009-11 business plan may also be referred to as our two-year "action plan" for the achievement of our strategic plan.

Our Vision

To be a great children's hospital.....among the best in the world.

Our Values

Unity

We work together to achieve our goals.

Passion

We are committed to improving children's health and caring for sick children.

Integrity

We act with transparency, honesty and fairness in all we do.

Excellence

We seek to provide high quality clinical care, research & education.

Respect

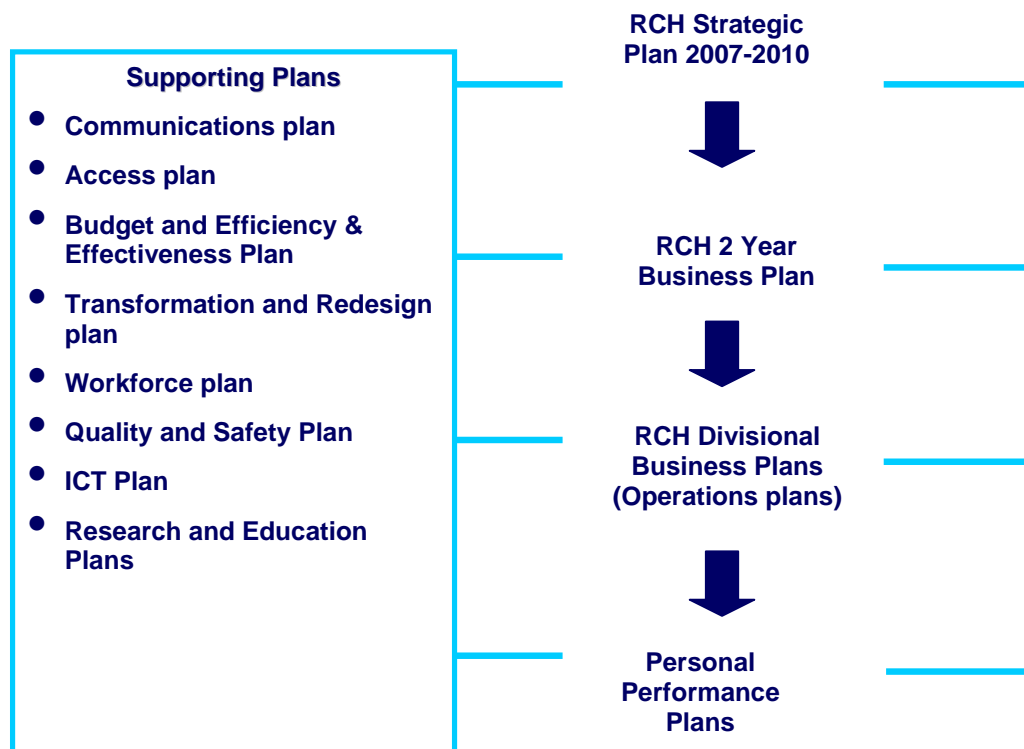
For everyone in our care, our partners and for each other.

The Strategic Plan for RCH has 5 strategic goals:

1. Excellence in healthcare
2. Leadership in research and education
3. Focus on quality and safety
4. Partners in paediatric care
5. Improve organisational environment

RCH Planning Process

The diagram below presents the planning process for RCH for 2009-11.



1.3. Reporting progress against our Business Plan

For 2009-11, reporting against business plans will be enabled online. This will simplify reporting processes and enable easy access and update of progress against business plan initiatives.

Reporting against business plans will occur on a quarterly basis. It will be the responsibility of Executive Directors to ensure quarterly progress reports are completed for their Division and the overall RCH business plan.

At the completion of the second quarter (half year mark), all Executive Director's will be asked to provide comment on their progress against their business plan and to revise their plans as required. If changes are required to the business plan, the CEO will ratify the changes.

1.4. RCH Performance Reporting

The current **RCH Compass Scorecard** has four reporting elements which provide a high level summary of how the organisation is performing across a range of indicators linked to our strategic goals:

1. Access - Excellence in Healthcare indicators
2. Financial – Improve organisational effectiveness indicators
3. Workforce – Improve organisational environment indicators
4. Quality and Safety – Focus on Quality and Safety indicators

The key performance indicators drive our operational plans and ensure that we are achieving our stated goals and objectives. The Scorecard is reviewed by the Board, CEO and Executive on a monthly basis.

2. 2008-09 RCH Business Plan Achievements and Opportunities for Improvement

This section presents the initiatives outlined in the 2008-09 RCH Business Plan that have been achieved, and the initiatives that remain opportunities for improvement.

2.1. Achievements

1. Excellence in Healthcare

- Access Committee established
- Access Action Plan developed and reported against
- New Hospital building is on schedule
- Organisational restructure completed
- Improvements in processes to ensure all clinical activity is documented
- Improvements in access to Cardiac Surgery
- The majority of key performance indicators for the Emergency Department have been achieved:
 - At least 80 percent of emergency patients admitted to an inpatient bed within 8 hours
 - At least 80 percent of non-admitted emergency patients with length of stay of less than 4 hours
 - All Triage Category 1 emergency patients seen immediately
 - At least 80 percent Triage Category 2 emergency patients seen within 10 minutes
 - At least 80 percent of Triage Category 3 emergency patients seen within 30 minutes
- RCH overall performance rating has improved since Quarter 1:
 - Quarter 1 - 50
 - Quarter 2 - 84
 - Quarter 3 - 82
 - Quarter 4 - 88

2. Leadership in Research and Education

- University Hospital concept explored
- Campus Council meetings continue
- Research and education framework in development

3. Focus on Quality and Safety

- 2008-09 Annual Quality Plan developed and reported against
- Open disclosure policy improved
- Risk management strategy developed

4. Partners in Paediatric Care

- Workshop held with FCC and staff
- Work continues between RCH and MMC

5. Improved Organisational Environment

- Organisational structure changed to improve accountability
- Improved financial monitoring and reporting
- Positive attendance program developed
- Communications procedures under review
- Overall reduction in absenteeism

2.2. Opportunities for Improvement

1. Excellence in Healthcare

- Improve elective surgery access
- Develop appropriate HITH capacity for demand
- Improve discharge planning
- Improve implementation of Patient and Family Centred Care
- Continue to review models of care and ensure outcomes are evidence based

2. Leadership in Research and Education

- Research and education framework to be implemented

3. Focus on Quality and Safety

- Continue the development and implementation of our annual Quality and Safety Plan.

4. Partners in Paediatric Care

- Develop KPI's for the implementation of Patient and Family Centred Care
- Continue the role delineation work between RCH and MMC

5. Improved Organisational Environment

- Complete the report framework for financial efficiency and effectiveness
- Foster a culture of continuous improvement - where achievements are celebrated and learnings shared
- Review and finalise the workforce plan
- Develop and implement the HR strategic plan
- Further enhance the nursing recruitment and retention strategy
- Finalise the project for e-processing of leave management and recruitment at RCH
- Agree and implement the RCH ICT Strategic Plan
- Continue Transformation and Redesign work to ensure a successful transition to the New RCH

3. ACTIONS TO ACHIEVE OUR STRATEGIC GOALS

3.1.Goal 1 – Excellence in healthcare

Objective	Organisational initiatives	Key Performance Indicators			Executive responsible
		2009-10	Month completed	2010-11	
1. Improve access to clinical services	Review and implement the annual access operational plan	<ul style="list-style-type: none"> Plan completed All DHS KPI's achieved 	July 2009	Plan developed and implemented	ED AO&HP
	Integrate the management of access across RCH: <ul style="list-style-type: none"> Review the policy and procedures relating to access Review inpatient bed utilisation Analyse and develop plans to manage the streams of emergency and elective patients to 'smooth' demand Work with all partners to improve seamless access including MAS, PETS, NETS, SH, RWH 	<ul style="list-style-type: none"> Optimise bed utilisation across RCH Implement electronic tools to aid decision making and demand management Plans developed and published 	December 2009	Continue to review and improve integration of access management at RCH	ED AO&HP
	Improved access to cardiac surgical services by implementing the cardiac inpatient stream including increase PICU, HDU and inpatient beds	Achieve the additional 1084 WIES allocation for cardiac surgery in RCH	June 2010	Continue to review and improve access to cardiac surgery	Chief of Surgery
	Improved access to PICU	Implement plans to achieve 17 ICU beds by September 2009 and 18 beds from January 2010	July 2009	18 beds open 12 months of the year	ED AO & HP
	Improved access to all elective surgery (reportable and non reportable)	Achieve DHS elective surgery KPI targets	Quarterly	Achieve DHS elective surgery KPI targets	Chief of Surgery
	Theatre access	Improved access and implementation of new theatre schedule	June 2010	Introduce transition schedule and align work practices	Chief of Surgery
	Improve access to the RCH Emergency Department	DHS emergency department (ED) KPI targets achieved	Quarterly	Achieve DHS ED KPI targets	ED AO & HP
		Establish major trauma flow within RCH	December 2009	Improved management of trauma	ED AO & HP

Objective	Organisational initiatives	Key Performance Indicators			Executive responsible
		2009-10	Month completed	2010-11	
	Improved access to Outpatients	Implementation of all workstreams to be completed and priority areas for improvement agreed	August 2009	Continue to work through OP improvement areas according to priorities	ED Medical Services
		All high priority tasks identified by the Operational & Clinical workstreams to be completed Reporting of outcomes via Transformation & Redesign Committee	Sept 09	Remainder of tasks identified by the Operational & Clinical workstreams to be completed	
	Develop clear principles and models for RCH outreach services	Principles and models for outreach developed and endorsed by the Executive	Feb 2010	All outreach activities undertaken in models agreed	ED Medical Services
	Streamline the point of entry to inpatient services	Implement and evaluate Access 4000 in all areas of RCH	June 2010	Implement and evaluate the point of care admissions process	ED AO&HP
	Improve discharge processes across RCH	Embed and consolidate the inpatient improvements into one coordinated work stream	June 2010	Review and monitor achievement of targets for discharge demand	ED AO&HP
	Optimize the utilisation of HITH, Day Medical and Care by Parent	Improved utilisation of HITH beds	June 2010	Ongoing review and monitoring of bed occupancy and demand	ED Medical Services
		Develop Model of care for Care by Parent Unit for new hospital	June 2010	CBP model agreed and implementation commenced as feasible within existing physical environment	
2. Deliver multidisciplinary care	Develop principles and guidelines for the enhancement of multidisciplinary care at RCH	Principles and guidelines developed and funding models explored	Jan 2010	Roll out principles and guidelines to all areas of RCH	ED Nursing
		Pilot principles and guidelines in 2 areas and evaluate	June 2010		
	Develop integrated palliative care and pain management service	Define model, recruit Director of Palliative Care and Pain Management	June 2010	Evaluate model Quarter 3 & 4 2010/11	Exec Nursing Services
3. Improve patient transition processes	Understand the gaps for transition to adult services within specific disease areas and identify solutions for bridging the gaps	Gap analysis completed across the Victorian health services, in partnership with DHS	Jan 2010	Continue to work with DHS to reduce the gaps in transition	ED AO&HP
		Paper developed on potential solutions for bridging the gaps	June 2010		

Objective	Organisational initiatives	Key Performance Indicators			Executive responsible
		2009-10	Month completed	2010-11	
	Develop principles, guidelines and KPI's for the transition of care to adult services across RCH	Principles and guidelines developed and funding models explored	Jan 2010	Roll out principles and guidelines to all areas of RCH	ED AO & HP
		Pilot principles and guidelines in 2 areas and evaluate: <ul style="list-style-type: none"> Develop a framework for congenital heart disease management in adults 	June 2010		

3.2. Goal 2 – Leadership in Research and Education

Objective	Organisational initiatives	Key Performance Indicators			Executive responsible
		2009-10	Month completed	2010-11	
1. Improve education and research linkages with our campus partners	Inform staff of Council Campus initiatives	Quarterly updates provided to all campus staff via dedicated intranet page, , Grand Rounds and campus partners communications channels	Quarterly	Continue to keep staff informed	ED Comms & Marketing
	Continue to actively participate in Campus Council meetings	Complete required actions and initiatives	Quarterly	Complete required actions and initiatives	CEO
	Explore developing a joint annual report that focuses on both research and education with our Campus partners	Joint annual report for 2008-09 research and education explored	September 2009	Joint annual report for 2009-10 research and education developed and published	ED Comms & Marketing
	Celebrate our research and education successes across the Campus	Establish 'research week' to celebrate our successes	Feb 2010	Establish 'education week'	ED Medical Services
2. Enhance translation of research into clinical outcomes and practice	Develop and implement a research strategy in collaboration with MCRI & UoM	Identify and document the research that is currently undertaken at RCH	Dec 2009	Monitor progress against the implementation of the research framework and annual plan	ED Medical Services
		Develop a framework and annual plan for multidisciplinary research at the RCH, with our campus partners	March 2010		
	Appoint a Clinical Director of Research to RCH	Position advertised and appointed	Dec 2009		
3. Ensure educational needs of patients are being met	Develop a framework for the integration of patient's educational requirements	Key patient groups identified that will benefit from education while at RCH	Sept 2009	Evaluate the effectiveness of the guidelines and tools from both a patient and staff viewpoint. Then review and improve.	ED CSS
		Develop a process, guidelines and tools to assist staff to ensure patient's educational needs are being met	Dec 2009		

4. Further develop our leadership role in paediatric education	Develop and implement a multidisciplinary campus wide education strategy and framework	Identify and document the education needs across RCH	Dec 2009	Monitor progress against the implementation of the education strategic plan	ED Medical Services
		Develop a strategy for multidisciplinary education at the RCH, and with our campus partners	May 2009		
		Appoint Director of Clinical Education & Director of Medical Education as joint appointments with UoM	Dec 2009	NA	

3.3. Goal 3 - Focus on Quality and Safety

Objective	Organisational initiatives	Key Performance Indicators			Executive responsible
		2009-10	Month completed	2010-11	
1. Enhance patient safety – ensure the safe progress of patients through all parts of the system	Develop annual Quality and Safety Plan	Plan developed and published and communicated with quarterly reporting	July 2009	Plan developed and published and communicated with quarterly reporting	ED Medical Services
	Develop the systems to embed ACHS standard monitoring and reporting throughout the year	Identify key areas for reporting against and pilot an electronic system for monitoring and reporting actions to comply with ACHS standards	June 2010	Review and improve the electronic monitoring system	ED Medical Services
	Comply with the Australian Council for Safety and Quality in Health Care' Open Disclosure Standards	Refer 2009-2011 RCH Quality Plan for suite of indicators	As defined in the RCH Quality Plan	Refer 2009-2011 RCH Quality Plan for suite of indicators	ED Medical Services
	Support the identification, reporting and analysis of adverse events and implements strategies to minimize harm	Ensure all staff are trained in reporting of incidents			
	RCH will develop, maintain, and use policies, protocols and guidelines that support the provision of high quality and safe care	Complete the review of Policies and Procedures	Dec 09	Continue to monitor new a revised procedures via the RCH P & P committee	

2. Strengthen RCH focus on patient and family centred care (P&FCC)	Develop a communications and engagement strategy on P&FCC and ensure staff have a common understanding of P&FCC	Completion of RCH P&FCC Guidelines	July 2009	To be determined at a later date	ED Nursing Services
		Completion and roll out of education package & update	Sept 2009		
	Enhance evaluation of P&FCC	Develop KPI's to measure P&FCC at RCH and implement across RCH	Sept 2009	To be determined at a later date	
	Develop structures and processes to enhance meaningful consumer and community participation	Implementation of modified VPSM	Sept 2009	To be determined at a later date	ED Medical Services
		Consumer representatives on key committees	Ongoing		
		Evidence of consumer feedback informing planning, delivery and evaluation of care across all divisions	Ongoing		
3. Improve information systems to support quality and safe care, and to enable ongoing quality improvement	Develop Divisional quality plans and report quarterly on the progress of implementation	Develop a set of KPI's linked to quality plans at the Divisional level and report	Dec 2009	Ongoing review and refinement of QM roles	ED Medical Services
		Introduce and embed the roles of Quality managers (QMs) working with Divisions	July 09		
	Coordinate and integrate information to improve staff access to valid and timely data to inform quality and safety efforts	Centralized repository of data for quality and safety indicators developed and in use	Dec 2009	To be determined at a later date	ED Medical Services
	Improve communication of quality improvement successes and opportunities for improvement	Quarterly updates provided to all staff on successes and opportunities for improvement	Quarterly	To be determined at a later date	ED Medical Services
4. Integrate quality and innovation champions and methods across RCH	Implement regular quality and safety, Transformation and Redesign and project managers forum to align the RCH quality and safety agenda	<ul style="list-style-type: none">Implement regular quality reporting at monthly HoD/Manager meetingsHold a quarterly quality and improvement forum	Quarterly	Review these forums and continue to hold them quarterly if beneficial	ED Medical services and ED AO&HP
	Develop Prevention and Promotion plan Plan completed and published and implemented	<ul style="list-style-type: none">Establish a steering committeePlan completed and published and implemented	Dec 09	Implement the prevention and promotion plan	ED AO&HP
	Develop a campus wide Green policy and action plan	<ul style="list-style-type: none">Develop an action plan through the established steering committee	Dec 09		ED Nursing services

3.4. Goal 4 - Partners in Paediatric Care

Objective	Organisational initiatives	Key Performance Indicators			Executive responsible
		2009-10	Month completed	2010-11	
1. Enhance our role within the Parkville Precinct	RCH to enhance its partnerships within the Parkville Precinct – clinical, research and education	RCH to explore membership of PCCC and how to improve partnerships with Parkville campuses	Ongoing	RCH to continue to be a part of planning for the future of the Parkville Precinct	CEO
2. Improve partnerships with other providers of paediatric health care (GPs Paediatricians, private providers, CHC and other health services)	Develop pre-referral guidelines, electronic referrals and electronic discharge summaries	Develop Rural Pediatrician model and links	Dec 2009	Effective linkages developed – reduction in complaints	ED Medical Services
		Develop a plan for the amalgamation of NETs and PETS and relocation into the New RCH	Dec 2009	Successful transition of NETS and PETS to the New RCH	ED AO&HP
		Pre-referral guidelines for all major care areas of RCH developed and available online	Dec 2009	Reviewed and updated	Chief of Medicine
		Trial e-referrals for outpatient appointments	March 2010	Continue to improve e-referrals	ED Medical Services
		Enhance electronic discharge summaries for practitioners and families	Dec 2009	Continue to review and improve discharge summaries	Chief of Medicine Chief of Surgery
3. Paediatric Statewide Strategic Framework	RCH to continue to work with Southern Health on improving access to paediatric services for Victorian children	Agreed priority areas and program of work between Southern Health and RCH completed	Ongoing	Continue to finalise this piece of work	ED AO&HP ED Medical Services
	Work with DHS to implement the Paediatric Statewide Strategic Framework, as appropriate	Complete required actions and initiatives	Ongoing	Complete required actions and initiatives	ED AO&HP

3.5. Goal 5 - Improved Organisational Environment

Objective	Organisational initiatives	Key Performance Indicators			Executive responsible
		2009-10	Month completed	2010-11	
1. Enhance the work of the Transformation and Redesign program	To ensure a successful transition to the New Hospital– focusing on clinical care, people and systems	Identify and implement workstrands	August 2009	Continue program of work	ED AO&HP
		Develop the ‘change plan’	Dec 2009		
		Develop leadership and change capability across RCH	Ongoing		
2. Effective ICT systems and strategy	Implement the RCH ICT Strategic Plan, with a focus on the New Hospital	Strategic plan completed	July 2009	Continue to implement projects from the strategic plan	ED AO&HP
		Action plan documented and implementation of priority projects underway	Aug 2009		
3. Ensure effective Governance and Accountability	Develop the RCH Business Plan and Divisional Business Plans	Monitor progress against the business plans	Quarterly	Develop and monitor	ED AO&HP
	Ensure effective reporting systems and consistent business practice across RCH	Single reporting system for all plans	August 2009	Review and improve	ED AO&HP
	Ensure data integrity by centralizing and standardising data and data ownership	Identify positions that are responsible for management of data for all key databases	August 2009	Review and improve	ED AO&HP
		All databases to have process for data entry mapped and an understanding of process developed	Sept 2009		
4. Ensure sound financial management and accountability	Improve capability through training in RCH financial and budget management	Training provided and capability of staff evaluated	Dec 2009	Continue training program	ED Finance and Corporate Services
	Develop principles and a model for the centralisation of all billing processes across RCH	Principle and model developed	Sept 2009	Implement centralization of billing process	
		Pilot centralization of billing processes in identified areas	May 2009		
5. Ensure an effective HR and workforce strategy is in place	Develop a multidisciplinary Workforce Plan for the future service delivery of the RCH	Workforce plan developed and published and implemented	Dec 2009	Continue implementation	ED People and Culture
	Improve and ensure all staff have position descriptions, contracts, access to performance management tools and systems	80% of staff have appropriate position descriptions, contracts and have undergone performance appraisal	May 2010	100% of staff have appropriate documentation	
	Implement the e-recruitment system	e-Recruitment system implemented and reduction in time taken to recruit positions	Sept 2009	Review and improve	

Objective	Organisational initiatives	Key Performance Indicators			Executive responsible
		2009-10	Month completed	2010-11	
	Define, standardise and communicate the role of centralized business support roles	Work completed and communicated	Dec 2009	NA	
6. Effective communication – internal and external	Develop a RCH communications framework	Framework developed and implemented	Dec 2009	Monitor and review	ED Comms and Marketing
	Develop a robust communications plan for the transfer to the new hospital including internal and external promotion	Communications plan developed and implemented	Dec 2009	Monitor and review	
	Develop the Ideas Bank	Ideas Bank launched and available	July 2009	NA	ED AO & HP
	Improve governance and management of the Intranet <ul style="list-style-type: none"> Review and finalise information available on the Intranet 	Intranet and website reviewed and improved	Sept 2009	Monitor and review	ED Comms and Marketing
7. Preparation, design and Transition to New Hospital	Develop detailed work plans to integrate design, preparation and transition to the New RCH	Work plans completed and agreed with the Executive	Sept 2009	Work plans implemented	ED New RCH
	Develop a robust transition plan to the new hospital to ensure safety and quality for our patients	Draft Plan completed and authorised	June 2010	Final plan implemented	ED New RCH
	Develop a risk management plan for transition and operation of the new hospital including adverse media	Risk management plan completed and authorised	June 2010	Continue to monitor risks	ED New RCH
8. Develop a Creative Arts program	Develop and implement a Creative Arts program across RCH	Develop the Creative Arts program	June 2010	Implement the Creative Arts program	CEO

