POSTER ABSTRACT

An integrated approach to sustainability and delivery of improved health outcomes for Children’s Health Queensland community based services and programs.

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Introduction: A population health and locality based planning approach has been used to design and implement a digital reporting and monitoring platform to inform service improvement, guide strategic planning activity and support the implementation of CHQs key strategic priorities. The approach is framed within a Results Based Accountability (RBA) model that provides a stepped and disciplined approach to improving patient outcomes.

Aim and theory of change: Taking a population health and locality based planning approach to the implementation of service improvement strategies ensures that child health services and programs are provided in the right location and consumers have improved outcomes.

Targeted population and stakeholders: For all child health localities the service activity, workforce, consumer feedback and socio-demographic data were collated into a repository and was made available to all child health services and programs through an interactive digital dashboard. The information is rendered and presented via a series of performance indicators across five domains: Service activity; Economic sustainability; Healthy and engaged workforce; Experience of care; Results based accountability.

The interactive dashboards are made available through ‘QlikView’ software and used to establish a baseline prior to implementing an intervention to improve service delivery. The same suite of tools are used to monitor the impact of the intervention.

In each locality interventions were implemented to reduce the variation in specific performance indicators and the intent to increase home visiting, decrease failure to attend rates, increase new to review ratio, and increase partnerships with local services.

Highlights: Each of the child health team accessing the dashboard has identified areas for improvement based on the digital dashboard reporting. Models of service delivery have been adjusted based on data e.g. Home visits to the consumers’ home have increased from 17% to 23% of all visiting with a target of 25%. Failure to attend rates across teams has decreased from 18% to 12% with significant reduction in variation with one team able to reduce from 30% to 14%. New to review ratio has improved across all teams to 1:4 with a reduction in repeat appointments.
Consumers over a one month period have responded (n=652) to how well did we treat them, did we help them with their problems, why did they rate us this way, and is there any way we could have improved what we did.

**Comments and Conclusion:** Child health services and program areas now have the capacity to make informed business decisions about clinical services, utilisation of resources and planning for longer term facility requirements with services and partners.

Wider use of the dashboard reporting is now being used in Child Development Services, School Based Youth Health Nursing Service and other community based services.

**Keywords:** integrated care; dashboard reporting; locality based planning