

SAFER CARE VICTORIA

ANNUAL PLAN

2024-25



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In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people. 'Indigenous' or 'Koori/Koorie' is retained when part of the title of a report, program or quotation.

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Acknowledgements

ACKNOWLEDGEMENT OF COUNTRY

Safer Care Victoria acknowledges the strength, power and resilience of Aboriginal people as members of the world's oldest living culture. We recognise Aboriginal people as Australia's First Peoples and honour the richness and diversity of all Traditional Owners across Victoria.

We respect the lore, customs and languages practised by Aboriginal people in Victoria and their deep spiritual and cultural connections to land and water. We are committed to a future based on equality, truth and justice and recognise the ongoing systemic injustices faced by Aboriginal people. Victoria's treaty and truth-telling processes offer a chance to address these wrongs, empowering Aboriginal people to make decisions for their communities.

We pay our deepest respects to ancestors, Elders and leaders, past and present, whose strength and fortitude have paved the way for future generations.

ACKNOWLEDGEMENT OF LIVED EXPERIENCE

Safer Care Victoria acknowledges the consumers, families, carers, friends and loved ones who have experienced, or have been affected by, sentinel events. We are deeply sorry for their distress and grief. We bear witness to their stories in the sincere hope of improving care for others.

Message from the Chief Executive Officer



On behalf of Safer Care Victoria, I am pleased to present the 2024–25 annual plan. In 2017, when Safer Care Victoria was established, I was one of the inaugural directors. Since then, our ambition to take a new approach to improving the quality and safety of health care in Victoria has not wavered. The Victorian community values our passionate and dedicated healthcare workforce and world-class healthcare facilities. Where harm occurs in the health system, we are committed to understanding and learning from it. This document sets out our plan to continue to partner with, learn from and improve the healthcare system.

We support the Department of Health's aspiration for Victorians to be the healthiest people in the world.

This annual plan is our second step in implementing our strategy for 2023–26, which sets out our 3-year direction. In 2024–25 we will continue to build on our solid foundations and valued partnerships. We aim to further improve system safety in 4 priority areas:

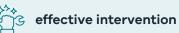


leadership and reform

strengthening governance



proactive monitoring



We will continue to influence policy to create safer systems, support health services to have better oversight of the safety and quality of the care they deliver, collate close to real-time safety data and use this to inform proactive interventions that reduce the risk of harm occurring.

We thank all the consumers, people with lived experience, their carers, families and supporters and healthcare workers who have told us their stories. We want you to know that we have listened and that this plan has been developed from what we learned from you.

Safer Care Victoria recognises that safety is everyone's business, and the best outcomes occur when we work together. I am excited to share this plan and am eager to continue engaging with all our partners to provide a safer healthcare system for all Victorians.



Louise McKinlay Chief Executive Officer Chief Quality and Safety Officer Safer Care Victoria

About us

Safer Care Victoria (SCV) is an Administrative Office of the Victorian Department of Health (the department) and is Victoria's leading authority for quality and safety in health care. SCV was founded on the recommendations of the *Targeting zero* report, which was developed in response to patient safety concerns.

SCV operates independently but alongside the department, reporting directly to the departmental Secretary. While we perform our functions independently of the department, we collaborate on areas of shared interest and consult to support good decision making. SCV is also authorised through a combination of policy, legislative and ministerial instruments to intervene when necessary to keep the public safe.

Since our inception in 2017, SCV has established strong connections to ensure safety improvements across the state supporting health services, working alongside consumers, people with lived experience, their carers, families and their supporters, healthcare workers and key partners. In partnership we have developed and embedded monitoring systems, supported targeted safety improvements and significantly increased improvement capability across the system.

SAFER CARE VICTORIA'S ROLES AND RESPONSIBILITIES



Our strategy at a glance

The SCV Strategic plan 2023–26 sets out our vision, aim and strategic direction for the current 3-year period and is summarised below. We will continue to implement our ambitious strategy through our annual plan for 2024–25.

The full strategy is available on our website https://www.safercare.vic.gov.au/publications/safer-care-victoria-strategic-plan-2023-26>.



Our operating context

FUNDED PROGRAMS

In 2024–25 we are continuing to deliver on key funded programs.

Safer Together program

Safer Together is a multi-year program to reduce harm and improve health outcomes.

This is achieved through innovation and by testing, learning and fine-tuning improvements that can be implemented across the sector. The program is delivered in partnership with health services, consumers and subject matter experts.

Safer Together harmonises the 100,000 Lives program, which aims to improve the care and outcomes for 100,000 Victorians by 30 June 2026. This is alongside other improvement initiatives to deliver impact across the 4 domains of:

- reducing variation in care (including hospital-acquired complications) and harm
- reducing low value care
- reducing potentially avoidable admissions
- medicines improvement.

Our key projects for 2024–25 include Safer Care for Kids, improving childhood asthma management, care for older people, acute stroke care, maternity and newborn care, sepsis management, line infections and anticoagulation management. We will also implement the *Chronic obstructive pulmonary disease plan* and strive for antibiotic prescribing excellence in primary care.

Mental health improvement program (MHIP)

The MHIP will improve mental health care in Victorian publicly funded mental health and wellbeing services, making them safer, more effective, appropriate and connected.

We continue to partner with consumers, carers, families and supporters; the mental health and wellbeing workforce; and leaders in mental health and wellbeing, to codesign and deliver key improvements in 4 key priority areas:

- towards the elimination of restrictive practices
- improving sexual safety in mental health inpatient units
- supporting Victorian healthcare services to adopt the Zero Suicide Framework
- reducing compulsory treatment orders in community mental health settings.

Recent organisational realignment

Changes to the department's operating environment reflect recent machinery-ofgovernment changes, a restructure and the State Budget outcomes from May 2024. These updates will help address ongoing challenges, ensuring a more resilient and responsive health system in the next year. As an Administrative Office of the department, we have implemented organisational changes that will help us to enhance the health and safety of Victorians and deliver a world-class health system in the upcoming year. The adjustments aim to further adapt and improve our health system, focusing on providing the right care, in the right place, at the right time. These planned changes are carefully considered, prioritising support for all staff who will be affected. They are essential to achieving our vision of a safer healthcare system for all Victorians and delivering lasting benefits to our community and sector.

SUPPORTING STATUTORY BODIES

We support 2 statutory bodies that operate under legislation. The Minister for Health appoints these bodies to monitor and provide advice to SCV and the minister on their respective areas of expertise.

Consultative Council on Obstetric and Paediatrics Mortality and Morbidity (CCOPMM)

CCOPMM advises the Minister for Health and the department on obstetric and paediatric issues. The council's functions are outlined in the *Public Health and Wellbeing Act 2008* and include:

- investigating the incidence and causes of maternal deaths, stillbirths and the deaths of children aged under 18 years
- investigating the incidence and causes of obstetric and paediatric morbidity
- collecting perinatal data to provide information about perinatal health (including birth defects and disabilities)
- undertaking other functions as specified in s 46 of the Act.

CCOPMM publishes Victoria's mothers, babies and children report annually. Find out more about CCOPMM from our website <www. safercare.vic.gov.au/about/ccopmm>.

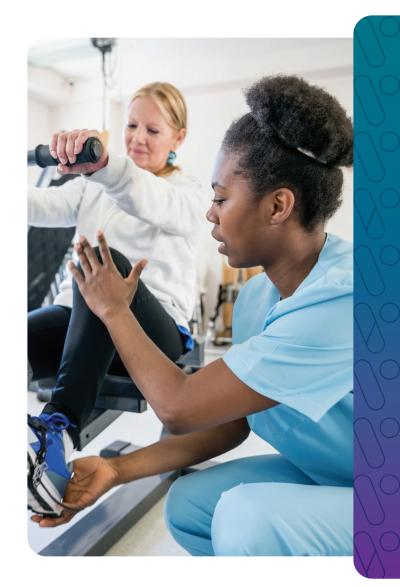
Victorian Perioperative Consultative Council (VPCC)

The VPCC was established as a multidisciplinary council in 2019. The VPCC identifies improvement opportunities in perioperative care and shares these with the health sector. The VPCC monitors the safety and quality of surgical care in Victoria before, during and after surgery.

The VPCC operates under the Public Health and Wellbeing Act (ss 33–43).

The VPCC is supported in its functions by the surgical subcommittee, in collaboration with the Victoria Audit of Surgical Mortality and the anaesthetic subcommittee to:

- identify learnings from surgical care that are considered preventable
- classify surgical death in Victoria to identify systemic issues that could contribute to mortality
- review cases to better understand factors contributing to anaesthesia-related morbidity and mortality
- recognise aspects of care that were effective in preventing or reducing harm
- identify emerging safety signals in delivering perioperative care.



Our priorities in 2024–25

We are focused on delivering an impact in 4 strategic priority areas to achieve our aim to co-create a consistently safe and continuously improving healthcare system for all Victorians. We will deliver:

- (JE)
 - 1. Safety through leadership and reform
 - 2. Safety through strengthening governance
- 3. Safety through proactive monitoring
 - $\frac{1}{2}$ 4. Safety through effective intervention

These priorities will support the continued maturing of safety mechanisms in Victoria.

Our actions in 2024–25 are outlined below. We invite consumers, healthcare workers, health services and other stakeholders to partner with us in this work in 2024–25 and beyond. Please contact us via email <info@safercare.vic.gov.au> or through our website <www.safercare.vic.gov.au> to have your say.





STRATEGIC PRIORITY 1: SAFETY THROUGH LEADERSHIP AND REFORM

Our position as Victoria's authority in quality and safety in health care gives us reach at every level of the system from research and education to healthcare delivery. We will codesign safety improvements that address the underlying causes of systemic issues by advancing national reform, sharing insights and strengthening our policy and legislative instruments.

Our focus	What we'll do
Consumers in front	We will:
	 partner with consumers, health services and the department to review and update the Partnering in Healthcare framework using diverse engagement methods including workshops, interviews, surveys and specific focus groups
	• develop and publish a refreshed Partnering in Healthcare framework and implementation guide based on stakeholder input
	 support implementation of the Partnering in Healthcare framework across SCV, the department and health services through developing and executing a communication and engagement strategy.
Innovation in safety	We will:
	• offer opportunities for healthcare workers to lift their capabilities in a variety of innovation methodologies
	 provide clear pathways for shared learning across the healthcare sector including accessing the innovation of academia, manufacturing and industry (including problem solving and facilitation)
	 build on the long-term vision for a pipeline of new and novel approaches to health care that will support the Victorian Government's strategic objectives.
Clinical leadership	We will:
	develop resources for women and family-centred maternity care
	• advance the Aboriginal health and wellbeing partnership action plan 2023–25 and treaty readiness
	• co-chair the development of the National nursing workforce strategy with the Commonwealth Department of Health and Aged Care
	 lead an investigation into women's pain management involving women with lived experiences and using data insights and research to develop better models of care and service delivery
	• continue to support the design, development and implementation of 25 Ambulance Victoria paramedic practitioner roles by 2026
	 implement the Maternal and Child Health System Review tool.



Our focus	What we'll do
Research	We will:
	 support the conduct of Victorian research through regular e-bulletins, events, training and membership of a range of research committees and meetings
	continue to engage with the Commonwealth on national reforms to streamline clinical research in Australia
	 engage with clinical trial activities across Victoria in implementing the Australian Teletrial Program, bringing trials closer to patients, and collaborate nationally with all partner jurisdictions
	 support the rollout of the Translational Research PhD Fellowship program
	• facilitate the conduct, support, partnership and collaboration of research through establishing a HealthResearch VIC network.
Mental health	We will:
	 evaluate phase 1 of the Safety for All: Towards Elimination of Restrictive Practices Breakthrough Series Collaborative, monitoring the sustainability of phase 1 and designing the second collaborative to begin in early 2025
	 complete and evaluate the success and sustainability of the first phase of the Safety for All: Improving Sexual Safety in Mental Health Inpatients initiative, with plans to scale and spread improvements in the second phase starting in April 2025
	 implement the first phase of Safety for all: Adopting the Zero Suicide Framework, with 12 or more mental health services to complete the initial self-assessment workshop and 6 services to partner with SCV to implement change practice and measure the change impact against the framework
	 work with 6 community mental health and wellbeing services to reduce compulsory treatment through coaching, capability building and developing lived experience leadership
	• embed the Mental Health Learning Health Network for the MHIP aimed at raising awareness on the progress on reform initiatives and the opportunity to participate.



Our focus	What we'll do
Healthcare worker wellbeing	We will:
	 explore ways to continue to best support the wellbeing of the state's health workforce and to share and learn from work that has already happened across the sector
	• monitor public hospital employees' health and wellbeing at a system level, to identify areas for improvement and future work
	 develop system-level resources and guidance to support public health services to address issues affecting public hospital employees' health and wellbeing
	 monitor, evaluate and report on the outcomes of programs funded by SCV to support worker wellbeing
	 provide effective secretariat support to the Mental Health Workforce Safety and Wellbeing Committee in partnership with WorkSafe Victoria.
Supporting family	We will:
violence reform	 support the implementation of the Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework including its Family Violence Information Sharing Scheme (FVISS) and the Child Information Sharing Scheme (CISS) under the Family Violence Protection Act 2008 and the Child Wellbeing and Safety Act 2005
	 build the capability of department-funded services to implement the MARAM Framework, FVISS and CISS, including their quality, safety and improvement processes
	 support and embed a whole-of-hospital approach to family violence, primarily through the Strengthening Hospital Responses to Family Violence initiative
	 support the development of government commitments to end family and sexual violence at the state and national levels and advise on related policy and proposals
	 promote a whole-of-hospital approach to family violence by taking part in peak governance bodies.
Improving maternity care	We will:
	 with the department, establish the Victorian Maternity Taskforce to address the sustainability and safety of maternity services in Victoria
	• through the Taskforce, initially focus on improving the capability and quality of maternity care in regional and rural maternity services
	 determine optimal models of care in rural Victoria with consideration to regional clinical governance and workforce development and planning.



STRATEGIC PRIORITY 2: SAFETY THROUGH STRENGTHENING GOVERNANCE

Accountability and transparency are indicators of effective clinical governance, which supports patient safety and high-quality care. SCV strengthens safety through governance by providing leadership and capability development resources for health services.

Our focus	What we'll do
System and processes	We will:
	 refresh SCV's Credentialing and scope of practice policy to address systemic issues related to credentialing deficits across all professions and align with system reforms
	• release a refreshed Victorian clinical governance framework and support its application in health services, ensuring it aligns with system reforms (this includes guidance around clinical governance of integrated care with community and Primary Health Networks)
	publish an online clinical governance toolkit of resources and capability development aids
	• support clinical governance leadership excellence for health service boards and executives.
Building capability	We will:
for all	 continue to develop and implement our capability framework for quality and safety that describes the quality and safety knowledge, skills and behaviours required for roles at all levels of a healthcare organisation
	• partner with consumers to help implement the refreshed Victorian clinical governance framework
	 collaborate with SCV leadership to identify, design and deliver learning opportunities to meet internal core capability needs and priorities in relation to improvement science, partnering and co-design and safety
	 support health services to review adverse events using resources such as the multiagency review toolkit and the in-depth case review toolkit.
Supporting leaders	We will:
	 deliver foundational clinical governance capability training to build the readiness of new and existing board members, chief executive officers and executives
	 support clinical governance leadership development in an increasingly complex and adaptive healthcare system using the Clinical Governance Health Check and Clinical Governance Maturity Matrix as insight-building diagnostics
	• support health services to implement the Victorian safety culture guide to identify cultural strengths and barriers to effective clinical governance.



STRATEGIC PRIORITY 3: SAFETY THROUGH PROACTIVE MONITORING

Our data capturing systems give us the capacity to monitor safety risks in real time. We use clinical intelligence to provide meaningful interpretation to notice trends and risks. Improved data sharing allows Victorian health services the ability to benchmark, enable timely intervention to prevent patient harm.

Our focus	What we'll do
Enabling datasets	We will:
	• establish an automated and centralised perinatal data storage system to improve data quality and reliability
	• collaborate with the department's eHealth division to develop a robust end-to-end process for perinatal data collection
	 use advanced analytics and visualisation tools to provide deeper insights into factors influencing quality and safety outcomes such as maternity and hospital-acquired complications (HACs), supporting informed decision making and high standards of patient safety and care quality
	• use the eHealth HACs dashboard for comprehensive data and real-time analytics on HACs.
Safety signals,	We will:
insights and performance management	 support patient safety and care quality through proactive health service performance management and continuous improvement initiatives
	• monitor safety and quality through national benchmarking and conduct internal quality and safety analysis
	• partner with health services to address identified safety concerns and implement necessary improvements
	enhance monitoring and prevention strategies through improved data accuracy and actionable insights
	 work with key partners, such as VICNISS, to refine quality and safety indicators.
Statutory bodies	We will:
	• implement new CCOPMM notification forms for the 6 case types that directly create cases into the Salesforce database
	• publish new checklists to guide health services and clinicians on the information required for CCOPMM reporting
	• develop a CCOPMM communication strategy to engage and inform the sector including a hybrid open forum
	 develop an IT user guide to support the VPCC and subcommittee members navigating the Salesforce database for case management and improved tracking of case progression.



STRATEGIC PRIORITY 4: SAFETY THROUGH EFFECTIVE INTERVENTION

By co-creating a continuously improving healthcare system, we can drive system-level change to prevent and reduce the impact of harm.

Our focus	What we'll do
Safer Care for Kids	We will:
	 support the development of 24/7 virtual paediatric clinical advice to health services in collaboration with the department, Victorian Virtual Emergency Department (VVED), Royal Children's Hospital, Paediatric Infant Perinatal Emergency Retrieval (PIPER) and the Victorian Paediatric Clinical Network
	 continue to help set up formalised escalation pathways for paediatric care, directing less/moderately unwell children to VVED and critically unwell children to PIPER
	 support the department to pilot and scale the Urgent Concern Helpline, which will enable families and carers to escalate concerns about their child or young person while in hospital
	 enhance family and carer assessments of child deterioration by improving the use of the Victorian Children's Tool for Observation and Response chart.
Medication projects	We will:
	 continue to support the Community Pharmacist Statewide Pilot via the Clinical Reference Group and provide clinical safety and quality advice to the department project lead team
	• continue to inform and educate Victorian clinicians on current and emerging medicines issues and initiatives
	• test an antimicrobial stewardship program in primary care to reduce inappropriate antibiotic prescribing
	 continue to ensure patients access the safest and most appropriate antibiotics by de-labelling those with low-risk penicillin allergies through health service partnerships.
Acting on safety	We will:
	• continue to provide a robust and timely response to complex quality and safety issues in Victorian health service entities
	 promote the role of the Chief Quality and Safety Officer and work with health services to review and improve systems and processes surrounding the delivery of care
	• produce recommendations as an outcome of quality and safety reviews and actively monitor the progress of recommendations.



Our focus	What we'll do
Addressing deterioration and harm	 We will: enhance safety in Victoria's healthcare system through the Safer Together program by fostering collaboration, sharing and learning to address systemic issues. This program focuses on:
	- implementing best practices
	- strengthening preventative measures
	- ensuring safe medication practices
	- improving necessary interventions.
Learning together to better respond	We will:
	• review the Regional Maternal and Perinatal Morbidity and Mortality Committee's (RMPMMC) reports submitted by health services
	 collate, analyse and distribute RMPMMC review outcomes, actions, recommendations and learnings via an annual statewide report and grand round
	 analyse the data collected by the health services in the Healthcare Complaints Analysis Tool pilot and evaluate the feasibility of implementing the tool more broadly across health services.





