

# BETTER SAFER CARE FOR 100,000 VICTORIANS

Professor Jane Burns with an expert panel





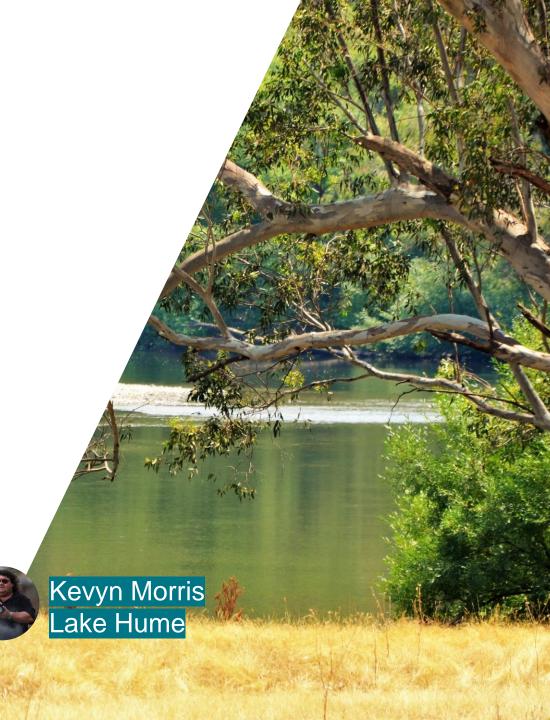
#### **ACKNOWLEDGEMENT OF COUNTRY**

I acknowledge the Traditional Custodians who have lived and loved this country through the vastness of time.

I honour the Wurundjeri People of the Kulin Nation whose country I stand today. I pay my respects to the old people, to the Elders and Ancestors who are the safekeepers and caretakers of the oldest living culture on the planet.

For this is the very bedrock of this place, our shared home and our special identity in the world and the source of shared pride as Australians.

For this land always was, and always will be, Aboriginal Land.



EVERY LIFE IS A STORY WORTH TELLING

#### WHAT WE WILL COVER IN TODAY'S SESSION

#### LESSONS FROM THE IMPROVEMENT FRONTLINE



Utilising improvement science to design, deliver and spread impactful results



Building will and engaging multi-disciplinary teams to accelerate learning and improvement



Critical success factors for achieving and sustaining improvements across the health sector



#### **OUR VISION IS FOR A SAFER HEALTHCARE SYSTEM FOR ALL**

# WE AIM TO CO-CREATE A CONSISTENTLY SAFER AND CONTINUOUSLY IMPROVING HEALTHCARE SYSTEM

Safety through leadership and reform

Safety through effective intervention



Safety through strengthening governance

Safety through proactive monitoring



#### Improving the lives of 100,000 Victorians by ...

#### Delivering impact through specific improvement efforts



## SAFE IN OUR HANDS

Reducing harm in hospitals



#### STAY WELL, STAY HOME

Preventing unnecessary hospital admissions



## BEST CARE, BEST TIME

Ensuring patients are cared for quickly in the right place

#### **Inspire Fund**

**Fellows Programs** 

#### **Building improvement capability**

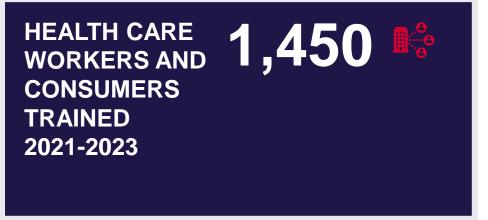
Strengthening our impact through improvement science and co-design training and coaching





#### **OVERVIEW** WHERE WE ARE AT NOW

















- Mothers and babies
- Older people
- · Children with asthma
- People living with cardiovascular diseases

#### SAFE IN OUR HANDS

Reducing harm in hospitals

#### STAY WELL, STAY HOME

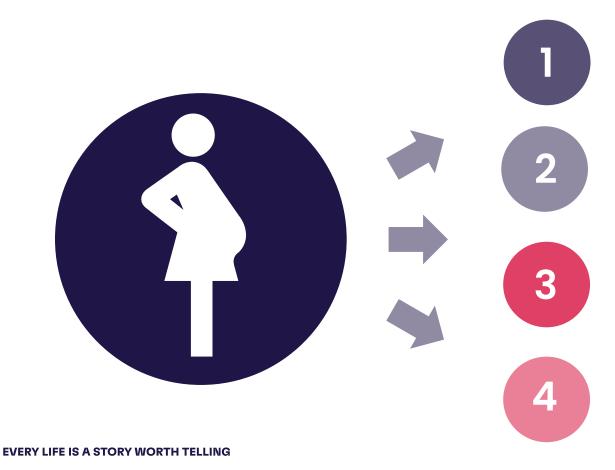
Preventing unnecessary hospital admissions

#### **BEST CARE, BEST TIME**

Ensuring patients are cared for quickly in the right place

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# THE MATERNITY SECTOR HAS EMBRACED IMPROVEMENT BY PARTICIPATING IN SEVERAL INITIATIVES OVER THE LAST FEW YEARS.



#### Reducing severe perineal tears

SCV teamed up with 14 health services to test and spread evidenced based care bundles to reduce third- and fourth-degree perineal tear rates.

#### **Reducing stillbirths**

SCV partnered with the Stillbirth Centre for Research Excellence and 15 health services to reduce the rates of stillbirth in Victoria.

#### Reducing preterm birth\*

In partnership with the IHI, APBA, Women's Healthcare Australasia and 15 health services, this national collaborative is aiming to safely reduce the rate of preterm and early term birth.

#### **Reducing severe PPH\***

This collaborative with 33 health services representing 80% of births aims to decrease primary PPH from intended vaginal birth by 50%



**OFFICIAL** \* In progress

#### **EXPERT PANEL OF IMPROVEMENT LEADERS**

#### LESSONS FROM THE FRONTLINE



Rachael Crean
Principal Project Officer
Improvement Advisor,
Safer Care Victoria



Prof John Newnham
Chair of the Australian
Preterm Birth Prevention
Alliance and Clinical Lead
for the Preterm Birth
Prevention Collaborative



Maria Bradshaw
Consumer Lead
Every Week Counts
National Preterm Birth
Prevention Collaborative



Nicole Carlon
Divisional Director –
Women's and Children's
and Executive Sponsor
Northern Health



**EVERY LIFE IS A STORY WORTH TELLING** 

# QUESTIONS?



Time	Agenda item	Run sheet
10:00	Jane to present	Introduction and background to SCV and 100,000 Lives Program to set the scene
10:05	Panel introductions	<ul> <li>Jane to introduce each panellist (bios in slide notes)</li> <li>Each panellist to provide a high-level summary of their experience in leading or participating in improvement initiatives and why using improvement science to deliver results is important to them</li> </ul>
10:15	Facilitated Q&A	Jane to facilitate
	Rachael	<ul> <li>As one of our most experienced Improvement Advisors, can you share with us how improvement science can be used to design, deliver and spread impactful results.</li> <li>Other insights from the panel?</li> </ul>
	• Maria	<ul> <li>Partnering with consumers is critical to delivering the best possible outcomes. Can you share an experience of where you have seen this done well, what impact it had and why it had the impact it did?</li> <li>What advice do you have about how we can advance partnering with consumers in all improvement efforts across the sector?</li> </ul>
	• John	<ul> <li>You've played a significant role in a national Collaborative and have recently been out to some of Victoria's health services to build knowledge and awareness of the importance of reducing preterm birth.</li> <li>Tell us why you believe a Collaborative actually works from the perspective of a clinician.</li> <li>How do you build will and engage multi-disciplinary teams to accelerate learning and improvement?</li> <li>Other insights from the panel?</li> </ul>
	Nicole	<ul> <li>As a key leader in the Victorian health system, and as Executive Sponsor of numerous improvement initiatives, what do you see as the critical factors for achieving and sustaining improvements across the health sector?</li> <li>Other insights from the panel?</li> </ul>
	Other potential questions:	<ul> <li>How critical is data to driving engagement and demonstrating results?</li> <li>What are the key challenges to overcome?</li> <li>What is one piece of practical advice you would give to someone starting out?</li> <li>What is the most important take home message for our audience?</li> <li>What are common misconceptions people have about improvement science? How can we combat these misconceptions and communicate more effectively?</li> </ul>
10:30	Close	