

Table of contents

 $\left(\right)$

(____

(

	Me	essage from the Minister	2
Director-General's introduction			
Purpose and role			
	4-5		
Our strategic intents			4-5
	۱u	ur challenges	6
	Me	eeting our key challenges	8
	Acl	hieving our mission: Our strategic planning process	10
		Our contribution to whole-of-government policy priorities	
	圜	Our Queensland Health Strategy Map: strategic intents and objectives at a glance	
	5	Our strategic initiatives	
		– Healthier staff	
		– Healthier partnerships	14
		- Healthier people and communities	
		– Healthier hospitals	
)		– Healthier resources	
<i>'</i>	12	Our performance measures	20
	Ou	ur performance framework in	side back cover

SMB12



Message from the Minister



One of the Queensland Government's highest priorities is to build and maintain the trust of Queenslanders who expect the health system to work for them when and wherever they need it.

The real challenge is to ensure our health system remains healthy and sustainable. This will not be easy: our population is ageing and increasing, health costs are rising in line with the cost of new technology and drugs, and there is a world-wide shortage of skilled health professionals.

The Queensland Health Strategic Plan 2004–10 engages all 65,000 Queensland Health staff in meeting these and other challenges, finding new and smarter ways to deliver health services based on need.

Priority staffing initiatives are designed to improve staffing levels across health professions and deliver opportunities for staff and career development.

There is also an emphasis on promoting good health and engaging Queenslanders to take more responsibility for maintaining their health. The imperative to improve partnerships will help reduce duplication, coordinate services and provide a better mix of services for people at home, in the community or in hospital. By managing chronic and other conditions in the community we will free hospitals to do what they do best – provide acute and emergency care in times of need.

The Queensland Government has committed significant resources for health. Staff have a vital role to ensure the resources entrusted to them produce maximum health outcomes for the community.

The next six years will be an exciting time for Queensland Health.

With your help, public confidence in our health system will grow to new levels and we will maintain and improve the health of the people of Queensland.

Gordon Nuttall MP Minister for Health

Director-General's introduction



Queensland has one of the best public health systems in the world. It is my intention that we build on this reputation and make it even better.

The Queensland Health Strategic Plan 2004–10 is timely for our organisation to refocus its direction, restate its commitment to the community and affirm our staff as our greatest asset. It brings all corporate planning processes into line and gives the clear direction on where we are heading in the immediate future.

Queensland Health now has a new mission: *Promoting a healthier Queensland*. Our new vision: *Leaders in health – partners for life*, challenges all staff to retain the confidence of Queenslanders who trust us to look after their health needs throughout life.

Of course, no organisation can achieve the vision of being a leader in their field unless they are very clear about their strategic intention. Over the next six years, we will promote a healthier Queensland through five new strategic intents: *healthier staff, healthier partnerships, healthier people and communities, healthier hospitals, and healthier resources.*

It is my intention that staff at all levels of the organisation are involved in making the changes necessary to deliver these strategic intents. We need to have a greater emphasis on prevention and health promotion, while at the same time ensuring our acute services are of the highest quality.

However, we can not do it alone and our partnerships with the community, all levels of government and other health providers will be vital.

Internally we will use the Integrating Strategy and Performance (ISAP) process to engage all staff, drawing on your wisdom, expertise and ideas to make improvements to local services.

In this way the entire organisation and our partners will work together to promote a healthier Queensland.

Steve Buckland Director-General Queensland Health

Queensland Health Strategic Plan 2004-10

Purpose

This plan outlines our strategic intention for the next six years. It builds on the work of the *Smart State: Health 2020 Directions Statement* released in December 2002 and the strategic planning and performance monitoring process we have progressed since then through our Integrating Strategy and Performance (ISAP) process.

It identifies our strategic objectives, our performance measures and the major initiatives we will implement to promote a healthier Queensland.

The Queensland Health Strategic Plan 2004–10:

- describes to our stakeholders, staff and the community what we aim to achieve over the next six years
- links the Queensland Government's priorities to the health outcomes we plan to achieve
- shares our strategic planning framework with stakeholders and staff
- provides direction to our staff on how their work can contribute to achieving health outcomes
- provides direction to Queensland Health's executives in allocating resources
- identifies the challenges we face as we work towards achieving our mission
- guides the organisation in operational and business planning.

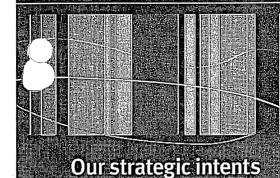
Role

Queensland Health has three major roles:

- a leadership role to protect health and promote a healthier Queensland
- a stewardship role to deliver health services that prevent, alleviate and manage illness and disease, such as programs to protect and promote public health; hospital services; mental health services; communitybased support programs; services specific to population groups including older people, women, children and young people, and Aboriginal and Torres Strait Islander peoples; and alcohol, tobacco and other drug, sexual health and oral health services
- a partnership role with consumers, other health providers and other sectors to achieve healthier lifestyles and healthier communities.

Promoting a healthier Queensland

Queensland Health Strategic Plan 2004-10



We will be successful in promoting a healthier Queensland through five strategic intents.



Healthier Staff

Our intent is to optimise staffing levels, provide staff with the right knowledge and skills, and provide an environment that values their experience and supports positive ideas to drive innovation, creativity and health enhancements.

- We will recruit, develop and retain a highly skilled workforce.
- We will support the health of our staff.
- We will encourage and help staff to develop their knowledge, experience, and leadership skills.
- We will promote an organisational culture that supports our values of professionalism, teamwork, performance accountability, and quality and recognition.
- We will give staff the right information, at the right time, at the right place, through the right medium.

Our intent is to work with others to harmonise programs and activities that impact on health.

ontheships

Healthier

(11)

- We will work in partnership with other federal, state and local governments and non-government organisations to ensure their policies, programs and activities actively support good health.
- We will work in partnership with other health care providers to plan and deliver innovative, cost-effective and integrated health services.

Ourmission :

Promoting a *healthier* Queensland

Ourvision

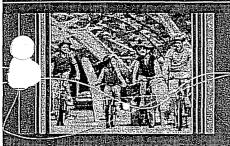
Leaders in health – partners for life

Ourvalues

We recognise that Queenslanders trust us to act in their interest at all times. To fulfil our mission and sustain this trust we share four core values:

- professionalism.
- **9** teamwork

- performance accountability
- quality and recognition.



Healthier people and communities

Our intent is to increase our focus on promoting healthier lifestyles and environments for individuals, families and communities, and improve communitybased chronic disease management.

- We will inform, support and provide Queenslanders with information and skills to improve, maintain and manage their health.
- We will invest more in strategies to
 prevent illness and injury in the areas we can make the greatest difference.
- We will systematically identify people at greatest risk of illness, injury or complications from existing health conditions and take steps to reduce their risk and improve their quality of life.
- We will work with other health care providers, both government and nongovernment, and community-controlled organisations, to build a stronger and more responsive primary health care sector.



Healthier hospitals

Our intent is to ensure our hospitals provide high quality, equitable acute and emergency care, integrated with enhanced communitybased services.

- We will ensure that throughout Queensland Health, treatment is based on evidence-based decisions, policies, and programs.
- We will continuously improve our key business processes.
- Our service and workforce plans will reflect our strategic priorities and demands.

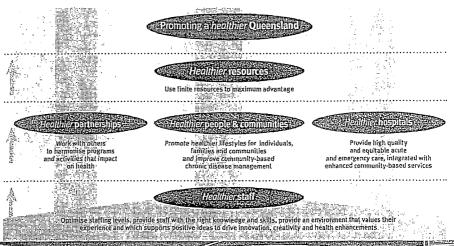
Our intent is to use our finite health resources to maximum advantage.

Healthia

(130)II (C)

- We will provide excellent health service delivery while maintaining balanced budgets.
- We will seek opportunities to work
 with other industries to ensure their
 resources, activities and programs
 support a healthier Queensland.

The following diagram shows the structure of the Queensland Health strategic intents. This structure complements the *Queensland Health Strategy Map* and is designed to be read from the bottom up. (The *Queensland Health Strategy Map* is presented on page 12.)



Our challenges

There are a number of challenges which we must take into consideration in our actions to promote a healthier Queensland.¹

Population growth, ageing and distribution

Population size and spread Queensland is the fastest growing state in Australia and will overtake Victoria's population by 2038. Two-thirds of all Queenslanders are likely to live in the south-east corner.

Ageing population

Queensland's population is ageing due to increased life expectancy and declining birth rates.

By the year 2020, one in seven people will live alone, with 25 per cent of people aged 75 years or older being in that category. The demand for aged care and support services will rise sharply, particularly as the number of very old people increases.

The state's workforce is also ageing and more workers will have 'elder care' responsibilities. Workforce shortage will increasingly be commonplace and will affect the health care industry.

Queensland Aboriginal and Torres Strait Islander peoples Three per cent of Queensland's population are Aboriginal and Torres Strait Islander peoples and it is estimated that the state will have the largest population of Aboriginal and Torres Strait Islander peoples in Australia by 2006.

Queensland Aboriginal and Torres Strait Islander peoples have higher fertility rates, higher mortality rates and have poorer health than the general population.

Improvements in the health status of Aboriginal and Torres Strait Islander peoples requires action to address the social, cultural and environmental factors that affect health and by improving health outcomes through effective health services.

pmoting a *healthier* Queensland

Queenslanders born overseas Queensland is a culturally diverse state with about one third of residents either born overseas or having at least one parent born overseas.

Queensland Health is committed to principles of equitable access, participation and diversity in service delivery to multicultural groups.

People living in rural and remote areas Across the state the population in rural and remote areas is both declining and ageing. This impacts on our capacity to adequately resource health services in rural locations where the demand for services is increasing, but the workforce, including that of the health sector, is declining. With the added factor of the increasing complexity of care, the challenge for Queensland Health is to provide safe, high quality services for people living in rural and remote areas.

Children and young people Children and young people (0–24 years) make up more than one third of Queensland's population. While their proportion of the total population is declining (except for Aboriginal and Torres Strait Islander children), the number of children and young people in Queensland is expected to increase by more than 30 per cent by the year 2025.

We know that positive social, economic, educational and environmental conditions improve the growth and development, mental health and the short and longerterm health of children and young people.

In addition, the link between the maternal and infant health and chronic conditions such as diabetes, heart disease and high blood pressure in later life is clear, and that these conditions are appearing at much younger ages.

^{1.} More detail about these challenges can be found in the Smart State: Health 2020 Directions Statement available on our website www.health.qld.gov.au

Queensland Health Strategic Plan 2004–10

Economic and workforce conditions

Changing employment

Employment in service and knowledgebased industries is increasing, with more women moving into these areas than in the past. Over the next six years, the proportion of female health professionals and general practitioners will increase in the health sector. This will increase the pressure on our organisation to develop flexible working solutions.

Employment and income are the most important modifiable determinants of health. The extent of income inequality (ie. the size of the gap between the rich and the poor) is also associated with overall mortality. The health sector has a leadership role in policy debate in this area and in responding to the health implications of future employment trends.

Workforce growth

As the population ages and our birth rate declines, employment growth will slow down. Towards the end of the timeframe of this strategic plan, we can expect to see an increasing need for health care and fewer people available to provide that care. We can also expect to see overseas competition for trained health professionals creating challenges for our workforce strategy.

Workforce patterns

Changing workforce patterns will also impact on the economy and on the health care industry, with career changes over a lifetime increasing and a clear trend towards part-time, casual and contracted work. To recruit and retain highly skilled professionals in the workforce, flexible working solutions will need to be developed which take these trends into consideration.

Workforce mix

To address changes in the burden of disease (ie. the increase in chronic disease and the decrease in infectious diseases), we will need to develop models of care that facilitate care being provided by teams that work across health settings.

Rural workforce

The small populations in many small rural centres create challenges for providing health care. Care needs to be accessible and yet we need to ensure that our service provision is of high quality and costeffective. Workforce shortages in rural areas make it even more difficult to sustain safe, high quality services. Rural, remote and regional communities will be involved in shaping new service models that respond to health needs and make the best use of available resources.

Increasing costs of health care Health care expenditure will continue to be under pressure with increasing costs of new technologies, drugs and health care innovations, increasing consumer demand for new treatments, and an increase in demand for health services due to an ageing and growing population.

Competition by the public health sector for government resources – both state and federal – will be intense. Transparency relating to expenditure and outcomes will be crucial if public confidence is to be maintained in the sector.

Private health insurance and demand for hospital services

When the Australian Government introduced its private health insurance incentives package in 2000, Queensland's level of insurance coverage increased but is still below the Australian average. The demand for public hospital services, particularly high cost and complex public health services, has not diminished. Increasing insurance premiums, exclusion provisions, limited distribution of private hospitals and out-of-pocket expenses lead patients to seek treatment in the public rather than the private sector.

Environmental conditions

A wide range of environmental factors impact on health. These include air and water quality, food safety and security, pests, ultraviolet radiation, housing and household devices and environmental tobacco smoke. To safeguard the health of Queensland communities, it is critical to maintain the capacity of and improve systems to monitor and regulate these factors.

We must identify and address environmental challenges including the adequacy, safety and quality of water supplies; waste and water management; materials for housing; more and more people living in cities and in increasing densities; and global climate change which could influence the spread of communicable diseases.

Health system organisation and advances

Changing models of health service delivery

Chronic disease, mental illness, injury and self-harm will account for a significant proportion of the future burden of disease. Service delivery will change to better meet people's needs.

Management of chronic conditions is already shifting from acute treatment in hospital to community services that manage complications and alleviate the need for hospital admission. Changes include an increased focus on community or home-based services such as rehabilitation and strengthened partnerships with primary health care providers.

More emphasis will be given to the primary prevention of disease, illness and injury, and on activities that will protect the health of individuals and communities.

Technological advances

As new technologies become available, difficult decisions must be made relating to the cost-effective and ethical use of high cost technologies and the required level of support, including staff training.

New technologies are already changing things for the better. A Queensland-wide telehealth network provides medical specialist input into care provided in local communities.



Fragmented service delivery The responsibility for health policy, funding, service planning and delivery is spread across three levels of government (federal, state and local government). Developing partnerships within and across sectors will mean that the money spent on health care can be used to maximum advantage, with services integrated wherever possible.

Community expectations

Consumer expectations of the health system are rising. Increasing numbers of health consumers are better informed and educated, less deferential, and want more control and choice in their health care. These factors impact on perceptions and relationships between consumers and health professionals.

People want to have a greater say in service planning. With the impending retirement of the baby boomers, well-educated retirees will increasingly be available for consultation processes to plan health services. Community engagement at all levels will be integral to the broader government health policy development processes.

Partnerships

Whole-of-government partnerships Health is dependent on many factors including lifestyles, genes, economic and social conditions, and environment. Queensland Health will use strategic partnerships with other government departments to promote better health outcomes. We will strengthen partnerships with lead agencies responsible for disability, education, employment, housing, local government, transport, sport and recreation, social support services and others, to support the development of healthier communities and healthy lifestyles.

Partnerships in health care

The health care system is a complex one and Queensland Health is only one provider of health services to the community. We will endeavour to work more closely with the Australian Government which shapes the national health policy and finances primary medical care services, pharmaceutical benefits and aged care services. We will also work more closely with health sector partners, including general practitioners, private specialists and private hospitals, and with non-government agencies providing community-based services.

Meeting our key challenges

There are five key challenges which require critical attention for Queensland Health to achieve its mission. Our actions to address these key challenges are now summarised and feature prominently in our initiatives detailed on pages 13-19.

Population growth

A number of strategic initiatives deal with managing the increasing demand for services due to our growing population. These include funding to reduce waiting times for elective surgery, enhanced capacity to provide cancer and cardiac treatment, and new services built through the Smart State Building Fund.

iomoting a *healthier* Queensland

In south-east Queensland where population growth is greatest, we will develop and implement an inclusive planning model, involving other state agencies, the Australian Government, local government and local communities. Our aim is to ensure that planning for growth in new and existing communities will routinely consider opportunities to promote the health of the people in those communities, give appropriate attention to environmental risks to health, and ensure appropriate planning for health services and access to them.



The health of Queensland Aboriginal and Torres Strait Islander peoples

The Queensland Government recognises the poor health status of Aboriginal and Torres Strait Islander peoples across Queensland and in response is building partnerships supported by whole-ofgovernment frameworks.

The National Strategic Framework for Aboriginal & Torres Strait Islander Health has been endorsed by the Queensland Government and a Queensland implementation plan is being developed to guide health service delivery in conjunction with other services which impact on health.

As the lead agency for health, we will collaborate with other government and nongovernment agencies as well as Aboriginal and Torres Strait Islander communities to improve health outcomes for Aboriginal and Torres Strait Islander peoples.

Queensland Health Strategic Plan 2004–10

Queensland Health is committed to working with other government departments to overcome Indigenous disadvantage to achieve the following outcomes:

- safe, healthy and supportive family environments with strong communities and cultural identity
- improved wealth creation and economic sustainability for individuals, families and communities
- positive child development and prevention of violence, crime and self-harm.



A culturally-sensitive workforce is central to improving the health of Aboriginal and Torres Strait Islander peoples. The *Queensland Health Indigenous Workforce Management Strategy* and the *Cultural Respect Framework 2003–2008* will guide the delivery of accessible, culturally appropriate services.

In relation to Aboriginal and Torres Strait Islander peoples, the challenges for Queensland Health and other agencies will be to:

- improve physical environments, infrastructure and other essentials for health and working to reduce the multiple causes of illness, injury
- and disability
- improve access to appropriate and affordable housing
- promote a whole of life approach to health for individuals, families and communities
- provide access to an effective, integrated network of services to promote and maintain good health, prevent and injury, detect and manage disease and illness as early as possible
- build on the existing Aboriginal and Torres Strait Islander health and healthrelated workforce.



The health of Queensland children

The Queensland Government has endorsed a Strategic Policy Framework for Children's and Young People's Health 2002 – 2007. This document supports whole-ofgovernment and early intervention approaches to create safe, supportive family and community environments. It highlights risk reduction and protection during critical developmental stages.

Queensland Health has established early intervention and parenting support programs which improve and integrate services for families with children aged 0–6. Frameworks and guidelines have also been developed for infant nutrition (including breastfeeding), promoting health in schools, the identification and management of child abuse and neglect, and screening for early detection of health conditions. Further work to support implementation of these across the state will continue. Priorities for future action include:

- commitments under the whole-ofgovernment blueprint for child safety
- improving Aboriginal and Torres Strait
 Islander child and youth health
- intersectoral action to promote healthy weight in children and young people
- a statewide neonatal screening program for hearing
- improved intersectoral integration of support and care for children aged 0–6 with a disability and/or complex conditions.



The ageing of the population Older people are the greatest users of

health services and this demand will continue to rise as our population ages. Queensland Health is committed to providing acute, community and aged care services for the ageing population, including the provision of services to the veteran population. A statewide chronic disease implementation plan will be central to managing the impact of an ageing population, as will be support provided to older people so that they maintain their health and stay healthier longer.

We will continue to implement Queensland Health's Directions for Aged Care 2004– 2011, which provides the clear direction for the further development of health and aged care service delivery to older people and their carers.

Queenslanders living in rural and remote areas

The health of many rural and remote Queenslanders, notably Aboriginal and Torres Strait Islander peoples, is poor compared with the general population. Faced with changing patterns of need and demand, declining and ageing populations, the increasing sophistication of secondary and tertiary health services, and shortages of appropriately skilled staff, many rural and remote centres are finding it increasingly difficult to provide an appropriate mix of safe, high quality health services.

Queensland Health is developing an integrated health planning framework to guide sustainable models of health care delivery in these communities. At the same time we are developing better ways to address priority health issues closer to where people live by enhancing use of primary health care approaches, expanding clinical outreach models and making better use of telehealth services.



Achieving our mission

Queensland Health consulted widely with stakeholders, staff and the community to develop our strategic intention. This section summarises this consultation and describes the relationship between our strategic intention and the government's policy priorities. It also describes how we will act on the strategic intention through the Integrating Strategy and Performance (ISAP) process. The last part of this section presents the *Queensland Health Strategy Map* and the objectives and initiatives we will progress over the next six years to achieve our strategic intention.

Our strategic planning process

Consultation

The Smart State: Health 2020 Directions Statement and the Queensland Health Strategy Map provided the foundations for this strategic plan. Significant stakeholder, staff and community engagement activities were conducted in the development of both of these direction-setting documents, including visioning workshops in locations across the state, dissemination of a discussion paper for public consultation, and stakeholder working groups. Additional internal consultation was undertaken in 2004 to develop our strategic intents.

Strategic planning framework

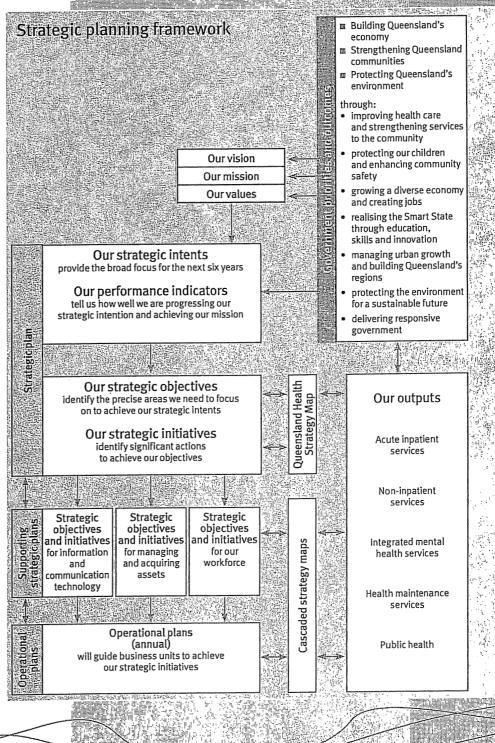
Our strategic planning framework is shown in the diagram on this page. The diagram depicts the influence of the department's strategic plans on our operational planning. The *Queensland Health Strategy Map* underpins our strategic plan. It was developed through the Integrating Strategy and Performance (ISAP) process. The strategy map is currently being cascaded through-out the organisation.

Our contribution to whole-of-government policy priorities

Queensland Health is committed to progressing the Queensland Government's policy priorities. Our outputs directly contribute to the first priority of health care and support each of the other priorities. This is because health is determined by a range of factors including our physical, social, economic, cultural and political environments, educational and employment opportunities, and access to health care:

omoting a healthier Queensland

The influence of the government's policy priorities and our contribution to these is shown in the following diagram. This diagram depicts the department's strategic planning framework:



Queensland Health Strategic Plan 2004–10

Cumuniquezcontribution to the Queensland Covernment's priorities and outcomes is defilled below.

Improving health care and strengthening services to the community

Quality health care is an investment in a healthy population and contributes to the state's productivity and economy. Across government we will take action to improve the social, economic and environmental factors that impact on health.

Within Queensland Health we will:
work with other health care providers to ensure our services are clientcentred, integrated and accessible
change the balance of our investment to enable a stronger focus on promotion and protection of health, disease prevention and the maintenance of quality of life
develop 'coordinated', whole of

government approaches to improving the health of Aboriginal and Torres Strait Islander peoples a plan new services in partnership with

other health care providers and the community.

Protecting our children and enhancing community safety Queensland Health will continue to work with other agencies to increase the safety of children at risk and to contribute to the whole of government blueprint for reform. This will involve improving our processes to identify child abuse and neglect. We will

also conduct programs to provide parents of young children with skills to manage children and other issues in their lives.

Safe community initiatives will be continued, with a focus on alcohol and other drug misuse, child injury and prevention of falls in older people. We will also contribute to the safety of our communities through improving our, planning for disaster preparedness and communicable disease pandemics. One of our strategic intents is for healthier staff. We are committed to promoting nealthy and safe environments for our staff Growing a diverse economy and creating jobs

Queensland Health is the largest employer in Queensland with around 65,000 staff. To meet the growing demand for health services; we will employ 1500 nursing graduates and additional staff for emergency departments.

With forecasted workforce shortages, a priority for Queensland Health will be to retain our staff in health care jobs. This may involve creating new opportunities for staff and flexible working arrangements. It will also involve innovative recruitment strategies to build our staffing capacity wherever possible. A number of initiatives are already being progressed in regional and rural areas and include the Rural and Remote Nursing Relief Program, the Rural Scholarship Scheme that encourages health professionals to work in rural Queensland, the Allied Health Professional Enhancement Program and the Breaking the Unemployment Cycle initiative.

Realising the Smart State through education, skills. and innovation

We recognise the strong link between educational status and health outcomest As a matter of priority we will educate Queenslanders on healthy choices, behaviours and lifestyles, with an emphasis on educating and motivating children to adopt healthy eating practices and active lifestyles.

We also recognise that the knowledge and skills of our workforce are critical to our ability to prevent disease and to treat illness and disease when it occurs. Lifelong learning will be promoted. We will undertake research to ensure that our workforce has the right skills to manage the changing burden of disease.

Improvements in health care are dependent on an active health and medical research program. We will take a leadership role in developing the Queensland health and medical research effort to give Queenslanders the benefit of the highest quality and most effective health services and programs possible.

We will also encourage and reward ideas, innovation, hard work and collaboration across the health sector, across government and with the non-government sector and industry. Managing urban growth and building Queensland's regions We will support Queensland's regions through statewide health service planning, infrastructure development (eg. telehealth) and recruitment and retention initiatives for

the rural and remote health workforce. Our contribution to regional planning will focus on managing the accelerated growth in south-east Queensland so that health is protected and promoted. Development should support lifestyles which encourage people to increase their level of physical activity. We will also participate in planning for integrated transport options that safeguard

integrated transport options that sure sure air quality and provide equitable access to health services.

Protecting the environment for a sustainable future

Energy efficiency and effective waste management are vital for good public health and ecological sustainability. We will strengthen our collaboration with other state and local government agencies to ensure environmental protection responsibilities are well linked with the government's health protection and promotion responsibilities.

Queensland Health will contribute to sustainable development by continuing to undertake energy audits; replace older energy and waste management systems with more efficient and effective technologies, and work with other agencies such as the Environmental Protection Agency to establish whole of government energy, water and waste management strategies.

Delivering responsive government A strong health system cannot operate in isolation from the Queensland community. Queensland Health will improve its engagement processes with communities in health service policy; planning, priority setting and decision making processes.

We will also improve our responsiveness by identifying future challenges to health and health care and develop strategies to proactively manage these challenges.

The alther Queensland

Our Queensland Health Strategy Map: strategic intents and objectives at a glance

The Integrating Strategy and Performance (ISAP) process will help us achieve our strategic intention. Through ISAP, we have translated each of our five strategic intents into a series of objectives. These, together with the strategic intents, form the *Queensland Health Strategy Map*. We will routinely measure and review our success in achieving these objectives.

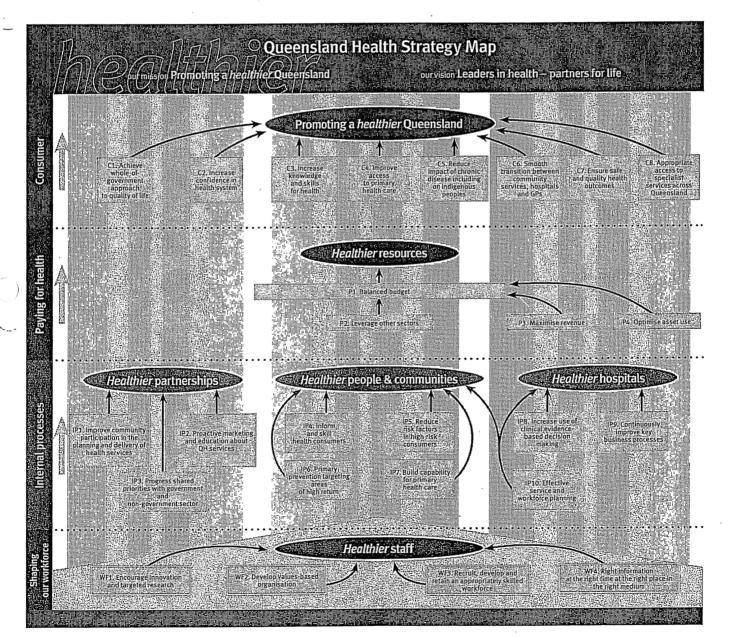
We will also cascade these objectives to health service districts, statewide services and corporate office, to ensure that all parts of the organisation are actively supporting our strategic intention and contributing to realising our mission.

It is important to note that our strategic intents are interrelated and that action in one affects the others. Our initiatives have been planned to ensure that actions are coordinated across the entire health care continuum from primary prevention to secondary prevention, acute treatment, tertiary prevention, rehabilitation and palliation.

Our strategic initiatives

This section of the strategic plan details the initiatives that will be implemented over the next six years to achieve our objectives, and in turn, our strategic intents. The initiatives are presented in the order corresponding to reading the Queensland Health Strategy Map from the bottom up.

- Healthier staff
- Healthier partnerships
- Healthier people and communities
- Healthier hospitals
- Healthier resourcing



Optimise staffing levels, provide staff with the right knowledge and skills, and provide an environment that values their experience and supports positive ideas to drive innovation, creativity and health enhancements

Encourage innovation and targeted research

trateaic

ealt

ST

- Establish the Ministerial Health and Medical Research Council of Queensland to provide strategic direction and leadership for health and medical research in Queensland
- Establish an innovation management system to recognise staff creativity and innovation and provide funding to test ideas
- Implement nursing research , scholarships to promote nursing research

Develop a values-based organisation

- Establish a system of routinely canvassing staff feedback and opinion to inform organisational improvement initiatives to improve the health of our staff and organisational climate, morale and performance
- Implement an enhanced system of performance appraisal and development for all staff in line with organisational values and goals
- Implement workplace initiatives to improve the health of our staff, with an initial focus on helping staff to stop smoking

What will this mean for you? As a staff member of Queensland Health, we will increase our support to you by making your workplace healthier. For example, not only are we asking the community to make healthier lifestyle choices but we are making it easier for you to make these choices at work. Some initiatives already underway include the statewide vaccination program offered to Staff, healthy or 'better choice' menus in hospital canteens, and physical activity programs. We know our staff nold the key to positive charges in the way we manage and we will act on your feedback on how to improve

Queensland Health's work environment

Recruit, develop and retain an appropriately skilled workforce

- Implement the National Health Workforce Strategy to deliver a sustainable workforce
- Improve our systems, information and strategic partnerships to support workforce planning and develop the future workforce, with an initial focus on:
 - the strategic role of the principal health advisers in clinical workforce recruitment and retention
 - innovative recruitment strategies such as e-recruitment including the dedicated nursing website www.thinknursing.com, and a web-based system to manage graduate recruitment
 - a peak nursing body to monitor and progress nursing recruitment and retention initiatives
 - frameworks for team-based models of care that use the skills of professionals in different ways
 - legislation determined to be necessary to enable registered nurses with expert knowledge and advanced clinical experience to undertake the nurse practitioner role. During the development of this legislation, conduct trials at demonstration sites to identify supporting strategies for the nurse practitioner role
- Implement programs through the Skills Development Centre to enhance the clinical skills of Queensland Health staff
- Employ 1500 new nursing graduates to improve our capacity to provide quality services

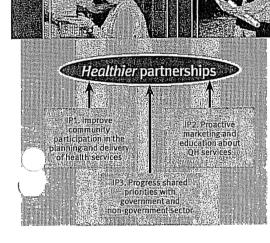
- Implement an executive leadership program and a succession management framework for critical leadership roles
- Establish a development program for Mental Health Service leaders to build skills in priority areas
- Establish a Centre for Mental Health Learning to provide coordinated mental health education and training
- Implement the Cultural Respect Framework for Aboriginal and Torres Strait Islander Health to establish culturally respectful and effective mechanisms, structures and partnerships within the health care system
- Review and update the Queensland Health Indigenous Workforce Management Strategy to ensure the implementation of effective strategies to enhance the representation of Aboriginal and Torres Strait Islander peoples at all levels of our workforce

Right information at the right time at the right place in the right medium

- Develop and implement a client-centric, clinical strategy for the migration of paper-based medical data collection to electronic collection including the development of electronic health records across hospital and community settings. Systems to be developed include:
 - community-based services including oral health, sexual health, mental health, aged care, chronic disease management, alcohol and tobacco and patient administration
 - hospital services including patient administration, pharmacy, pathology, radiology and utilisation of operating theatres



Work with others to harmonise programs and activities that impact on health



trateaic inte

Ithier bartnei

What will this mean for you?

Healthy children grow into healthy adults. Habits formed in childhood influence later life. This is why Queensland children are receiving: positive role modelling and information at school.

The curriculum includes learning about good nutrition and physical activity and puts it into action. Learning about the sun safety message starts in pre-school We are assisting tuckshops to adopt healthier food choices. School-based nurses in secondary schools support programs covering sexual and mental health issues and the responsible use of alcohol and other drugs.

The joint Queensland Health and Education Queensland partnership will continue initiatives such as these so we can grow a healthier Queensland. Improve community participation in the planning and delivery of health services

- Implement enhancements to the functioning of and support for district health councils, Ministerial councils, regional managers' coordination networks and Indigenous regional forums to strengthen community engagement
- Develop and implement improved community engagement processes based on the Government's Engaging Queenslanders: Get Involved policy
- Implement more inclusive approaches to service planning, with an initial focus
 on chronic disease prevention and management and rural and remote health planning

Proactive marketing and education about Queensland Health Services

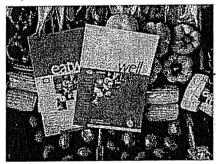
 Implement a marketing, communication and media plan to inform Queenslanders about the range and quality of Queensland Health services

Progress shared priorities with government and non-government sector

- Work with other governments, departments and the non-government sector to include healthier communities as a goal in policy development and planning for managing population growth and urban development, with an initial focus on:
 - a statewide service planning function
 - progressing whole-of-government approaches to health impact assessments
- Contribute to the National Health Reform Agenda and particularly the reform agenda for chronic disease prevention and management
- Continue to collaborate with other agencies to implement Queensland Health's responsibilities in relation to the Meeting Challenges, Making Choices Initiative – the Government's response to the Cape York Justice Study



- Implement the National Rio Tinto Child Health Partnership to link Aboriginal and Torres Strait Islander organisations and communities, business, governments, service providers and researchers to improve the health of Aboriginal and Torres Strait Islander children
- Develop stronger and more formal links with Education Queensland, the Department of Housing, Disability Services Queensland, Queensland Police Service, and the Department of Child Safety to support crossdepartmental action on activities that impact on health
- Implement, annually review and update the joint action plan with Education Queensland. Initial priorities are healthy weight in children, skin cancer, alcohol, tobacco and other drugs, sexual and reproductive health and mental health promotion





 Develop and implement a Memorandum of Understanding with the Environmental Protection Agency to enhance collaborative and coordinated responses to environmental health risks



- Implement the Queensland Health components of the whole-ofgovernment response to the Crime and Misconduct Commission Report Protecting Children: An Inquiry Into Abuse of Children in Foster Care, to increase the safety of children at risk
- Lead whole-of-government implementation of the Queensland HIV, Hepatitis C and Sexual Health Strategy 2004–2007 to improve health outcomes
- Continue to lead whole-of-government implementation of the Queensland
 Government Suicide Prevention Strategy 2003–2008
- Build on the existing whole-ofgovernment approach to emergency preparedness and business continuity to accommodate emerging issues, including the threat of terrorism, and deliver a coordinated response across services

Lead the development of the whole-ofgovernment implementation plan for the National Strategic Framework for Aboriginal and Torres Strait Islander Health

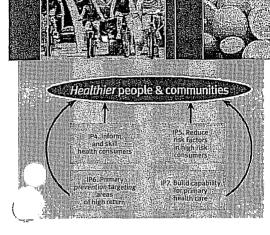


- Review and implement improved collaborative arrangements with the Department of Local Government and Planning, Sport and Recreation, the Local Government Association of Queensland and local councils to address public health issues and, where appropriate, support the development of community public health plans
- Work with the General Practice Advisory Council to progress joint issues around access to primary medical and preventive health care
- Work with the non government sector to develop service models that promote continuity of care and reduce duplication of services



Promote healthier lifestyles and environments for individuals, families and communities and improve community-based chronic disease management

ealthier people and communities



What will this mean for you?

If you are an Indigenous person living in a rural or remote area of North Queensland, your chances of developing a chronic disease is being reduced Through regular health checks potential health problems are being picked up early. When these are identified, you will be given consistent care to prevent or manage chronic diseases such as diabetes; renal failure and heart disease. This is all part of the Enhanced Model of Primary Health Care which works in partnership with communities so that Aboriginal and Torres Strait Islander peoples have access to prevention and clinical services in communities. Positive changes include joint health service planning and chronic disease care offered in 35 communities.



Inform and skill health consumers: consumers have the knowledge and support to manage health conditions confidently and in an ongoing way

- Improve the availability and currency of health related information to improve people's skills in maintaining good health and managing health conditions, with an initial focus on information for parents, carers and young people
- Establish a 24-hour, seven-day-a-week, statewide health hotline to give easy access to health advice and information about the location of health services

Reduce risk factors in high risk consumers

Implement a system for identifying consumers at high risk of illness or disease and implement programs across hospital and community settings to reduce their risk. The initial focus will be on stroke, cardiac rehabilitation and the fitness of patients waiting for surgery

Primary prevention targeting areas of high return: promote healthier environments and behaviours focussing on areas where we can achieve the greatest health gains for the population

- Introduce and implement new legislation to protect and promote public health including a new public health Act and a new food Act to promote food safety in the food services, retail, processing and manufacturing sectors
- Implement in collaboration with Education Queensland and the non government sector, initiatives in the areas of healthy weight, skin cancer, alcohol, tobacco and other drugs, sexual and reproductive health and mental health promotion, as per the Joint Action Plan, and expand the School Based Youth Health Nurses Program

- Develop and implement an enhanced Queensland Tobacco Action Plan focusing on increased use of social marketing campaigns to complement the existing QUIT Campaign, enhancing tobacco control legislation and its enforcement, youth smoking prevention strategies, quit smoking services and multi-strategy programs to address smoking amongst Aboriginal and Torres Strait Islander peoples
- Lead whole-of-government activity and implement Queensland Health's commitments under Eat Well Queensland: Smart Eating for a Healthier State to improve food supply, promote healthy eating, increase consumption of fruit and vegetables; and enhance the health of mothers, infants and children
- Progress the adoption of the Queensland Health guidelines on breastfeeding and infant nutrition, Optimal Infant Nutrition: Evidence Based Guidelines, by all relevant health professionals
- Implement the Queensland Alcohol Action Plan and the Queensland Illicit Drugs Action Plan with particular focus on young people and meeting our commitments under the Meeting Challenges, Making Choices initiative
- Participate in the finalisation of, and implement Queensland Health's commitments under, the Get Active Queensland strategy in collaboration with the lead agency, the Department of Local Government, Planning, Sport and Recreation and other key agencies
- Continue to implement the Statewide Action Plan: Falls Prevention in Older People 2002–2006 to reduce preventable injury from falls
- Develop and implement an enhanced Queensland Skin Cancer Prevention and Control Strategy, including additional investment in a skin cancer prevention and early detection community education program



- Promote the use of fluoride, including water fluoridation, particularly in high risk areas
- Lead a whole-of-government approach to strengthen resilience and well-being in children and young people, with a focus on mental health promotion activities targeting the early years, parenting and family functioning
- Implement a marketing and communication strategy to address stigma and discrimination experienced by people with mental disorders and mental health problems
- Finalise and implement the position statement and service delivery models for Aboriginal and Torres Strait Islander children's and young people's health (0-24 years) including strategies and partnerships to reduce current health inequities
- Expand the growth assessment and action (GAA) program into Aboriginal and Torres Strait Islander communities across North Queensland to address poor growth in infants and help prevent obesity and chronic disease in adult life
- Implement evidence-based guidelines for using screening and surveillance for children aged 0–12 years as a tool to detect childhood health conditions as early as possible. Identify and address gaps in program delivery to improve immunisation rates in areas of lowest coverage
- Develop and implement a program to improve public awareness of the signs and risk factors for stroke, particularly high blood pressure

Build capability for primary health care

 Plan services with staff, local communities and other agencies in North Lakes, Logan and Innisfail to develop and implement innovative community models of service delivery and health improvement

- Conduct programs to detect and manage risk factors or health conditions as early as possible, with an initial focus on:
 - establishing universal neonatal hearing screening
 - evaluating suicide prevention and dual diagnosis early intervention initiatives
 - implementing the Healthy Women's Initiative, initially in the northern zone, taking a well women's health focus promoting and encouraging Indigenous women's participation in health screening, in particular cervical screening and health maintenance
 - expanding the Queensland BreastScreen Program to achieve the target 70 per cent participation rate among women 50–69 years by 2008–09
 - participating in the evaluation of the national bowel cancer screening program pilot
 - implementing a program to improve detection and management of stroke and stroke risks by health professionals
- Introduce new models of care to improve oral health outcomes, with a focus on increased access to services and adopting population health approaches to complement treatment services
- Undertake research to inform the implementation of strategies to reduce the number of children 0-4 years undergoing general anaesthetic for gross tooth decay
- Expand the Enhanced Model of Primary Health Care into Aboriginal and Torres Strait Islander communities across North Queensland to prevent chronic disease, detect it earlier and improve our acute management services
- In partnership with the Australian Government, implement the Primary Health Care Access Program to improve access by Aboriginal and Torres Strait Islander peoples to primary health care services



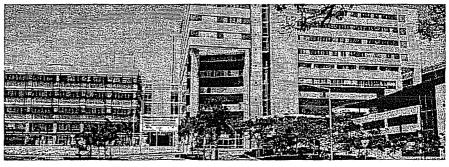
- Provide assessment and treatment services in the community for people with mental illness to provide them with greater access to their natural support networks in managing their condition
- Implement Queensland Health's Directions for Aged Care 2004–2011 and continue to develop reforms to meet the health needs of increasing numbers of older people and their carers
- Enhance our capacity for communitybased rehabilitation to improve health outcomes for people with heart, stroke and vascular disease

Effective service and workforce planning

- Develop and implement statewide plans to prevent and manage chronic disease and cancer, with a particular focus on those risk factors most amendable to primary prevention (smoking, diet and physical inactivity)
- Develop and implement an integrated health and workforce planning framework for rural and remote communities
- Develop and implement the Queensland Health Strategic Framework for Aboriginal and Torres Strait Islander Health
- Develop and implement an evidencebased model of child health that reprofiles health services to meet the increasingly complex needs of children and young people 0–12 years
- Implement enhanced preparedness planning for disasters, bioterrorism threats and communicable disease pandemics to ensure the capacity for high quality public health and health care responses

Provide high quality and equitable acute and emergency care, integrated with enhanced community-based services





Increase use of clinical evidence-based decision making

- Implement the Safety and Quality Program 2004–2008 as a central component to our strategic approach to plan, monitor and improve patient care. Priorities will be information exchange, education, clinical innovation and reform
- Use evidence-based interventions and targeted resourcing to manage growth in demand for cardiovascular treatment

Continuously improve key business processes

- Through the Safety and Quality Program
 - reform the accessibility, provision and quality use of medicines
 - continue to systematically examine the performance of our hospitals on key indicators
 - monitor the safety of key clinical processes in hospitals by establishing a statewide system for reporting sentinel events and adverse clinical outcomes
- Work with general practitioners and other primary health care providers to improve the continuity of care for individuals across community and hospital care, with a particular focus on information transfer, self-management and the appropriate use of medicines
- Implement step-down care processes and innovative approaches, including infrastructure support through the Pathways Home Program, to improve the transition of people, particularly older people, from hospital to home

 Implement and resource a model of care for renal disease that promotes selfmanagement and provides services in ambulatory settings to increase accessibility of dialysis services

Effective service and workforce planning

- Improve access to surgery to achieve benchmark targets, through increasing available resources, including workforce and improving clinical protocols and audit processes
- Increase the capacity of emergency services in high demand areas and trial alternative models for managing nonemergency conditions such as GP clinics to enhance the responsiveness of our emergency care services
- Expand outreach and telehealth services to improve regional and rural Queenslanders' access to acute health services
- Develop and implement statewide plans for the prevention and management of chronic disease and cancer and establish infrastructure and workforce requirements to support these plans
- Inform and contribute to the ministerial review of maternity services in Queensland
- Implement the Smart State Building Program to improve hospital infrastructure across the state
- Develop and implement joint guidelines for planning multipurpose health services with the Australian Government to improve the targeting and development of flexible, integrated health and aged care services in small rural and remote communities

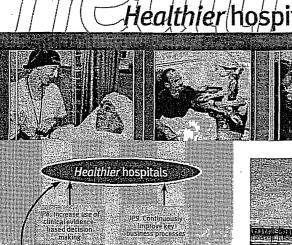
What will this mean for you?

P10. Effective Service and

orkforce planning

If you suffer a heart attack and are taken to a Queensland Health hospital you will receive high quality care regardless of which hospital you attend. To ensure consistency of treatment in this and other conditions, our senior doctors have established clinician networks in the areas of cardiac care, stroke treatment and rehabilitation, emergency medicine and renal services to share. information on treatment right around the state: This Collaborative for Health Care Improvement has more than 450 members across 26 hospitals. In the area of heart attacks and heart failure, clinical audits have shown that participating hospitals have increased the use of potentially life saving

treatments.



rategic intent f Healthier ho

lealthier resource Healthier resources P1. Balanced Maximise rev P.2. Leverage other sec

trategic inten

What will this mean for you?

The cumulative effect of our initiatives will lead to a more strategic use of resources, including strengthening areas of high demand: Over the next three years, the \$110 million elective surgery program will treat an additional 18,000 patients, further reducing surgery waiting times. Queensland already has the shortest elective surgery waiting times in Australia and this will set a new national benchmark. Our aim is to treat all urgent and semi-urgent patients who have waited longer than the recommended time before 30 June 2004.

To meet this target, we will work in partnership with the private sector when and where our public system can not provide services. Balanced budget: health service delivery is provided and managed within fiscal allocations

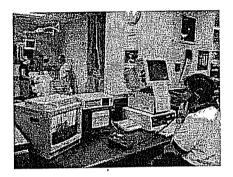
- Review and implement improved internal systems of financial management and resource allocation to optimise the use of our resources
- Continue to implement the whole-ofgovernment approach to corporate services delivery (the Shared Service Initiative) to standardise business processes, consolidate technology and pool resources and expertise

Leverage other sectors: health and non-health sectors invest to improve health outcomes

 Progress our partnership arrangements with others to ensure our collective resources, activities and programs support health agencies

Finite resources used to maximum advantage





Maximise revenue: maximise revenue for services provided to clients who are ineligible for public services, not Queensland residents, or who choose to receive private services

 Implement systems that provide for the prompt identification, collection and recording of revenue to comply with the requirements of the Financial Management Standard 1997

Optimise asset use: the asset base is aligned to service delivery and consumer and community need

 Review and where necessary improve internal systems of capital investment and management to ensure we are making best use of our resources



Our performance measures

All of the preceding initiatives will achieve our mission to promote a healthier Queensland. From a consumer perspective, our objectives are to:

- III increase knowledge and skills for health
- increase confidence in health system
- achieve a whole-of-government approach to quality of life
- improve access to primary health care
- reduce the impact of chronic disease, including for Aboriginal and Torres Strait Islander peoples
- ensure safe and quality health outcomes
- smooth transition between community services, hospitals and general practitioners
- appropriate access to specialist services across Queensland

We will measure the impact and outcomes of our services through health status and health system performance measures.

^{1.} These are the health status performance measures in the Queensland Government's Priorities in Progress report series, with the addition of self efficacy

- ² This indicator is not currently in the Priorities in Progress series
- ^{3.} These are the Queensland Health Strategy Map consumer perspective performance measures

Health status measures¹

Life expectancy Life expectancy at birth

Mortality Infant mortality rate

Mortality rates: all causes, circulatory disease (cerebrovascular and ischaemic heart disease), diabetes, cancer (breast and cervical cancer), suicide

Average annual percentage change in mortality rates for National Health Priority Cancers

Health inequalities Median age at death for selected population groups including Aboriginal and Torres Strait Islander peoples

Mortality indicators and selected health risk factor indicators for Aboriginal and Torres Strait Islander peoples

Mortality indicators and selected health risk factor indicators by socio-economic status groups²

Health risk factors and health enhancing factors Cancer – participation in the breast screen program; proportion of all breast cancers detected classified as small cancers

Immunisation – age appropriate immunisation coverage rates

Physical activity – rates of sufficient time and sessions of physical activity

Obesity – percent of overweight and obese adults

Nutrition – proportion of the population that consume fruit and vegetables according to endorsed guidelines²

Smoking – proportion of population over 14 smoking daily

Alcohol – prevalence of moderate and high risk alcohol consumption amongst adults

Self efficacy

Client's knowledge, ability and confidence to successfully manage their own health and participate in their own health care management.

Health system measures³

Community confidence in Queensland Health

Level of confidence that the Queensland population has in the quality of services provided by Queensland Health

Whole-of-government action that supports health

Number and proportion of other sectors implementing their commitments in wholeof-government strategies that impact on health

Category 4 and 5 to Emergency departments

Number/rate of patients who attend Queensland Health Emergency Departments categorised as not requiring immediate emergency care

Admissions for acute episodes of chronic conditions Number/rate of patients who are admitted to Queensland Health facilities with angina, diabetic complications and chronic obstructive pulmonary disease.

Sentinel events

Number/rates of events within Queensland Health facilities in which death or serious harm to a patient has occurred

Patient satisfaction with admission and discharge processes Client satisfaction with admission and discharge procedures within a hospital stay

Elective surgery access

Waiting times for elective surgery (ie. surgery that, in the opinion of the treating clinician, is necessary but for which admission can be delayed for at least 24 hours) Queensland Health Strategic Plan 2004-10

Our performance framework

Queensland Health is committed to measuring its performance to ensure that we are achieving our mission.

Performance measurement occurs at various levels across the organisation. At the highest level we monitor our performance in contributing to the Queensland Government's priorities and outcomes and we measure our performance against achieving our mission outlined in this strategic plan. At this high level, we also report against health status indicators in the Government's *Priorities in Progress* series.

Each year, the *Queensland Health Ministerial Portfolio Statement* details how funds have been allocated to achieve progress towards our strategic intents. This statement is subject to critical examination during the Parliamentary Estimates Committee process.The *Queensland Health Annual Report* formally reports to Parliament the activities and achievements for the preceding year.

As an organisation, we place a high priority on ensuring that the outputs detailed in the *Queensland Health Ministerial Portfolio Statement* best reflect the services that we deliver. In late 2003, we initiated a review of our outputs structure and we are compiling a set of revised outputs and performance measures for Cabinet consideration in late 2004.

Measures of effectiveness, efficiency, equity and a range of other performance indicators are regularly reported and benchmarked at the national level. Queensland's performance in significant health service delivery areas, including hospital inpatient and non-inpatient health services, are compared with the performance of other jurisdictions through a range of formal reporting mechanisms. These include reporting undertaken by the Australian Government, the Australian Institute of Health and Welfare and the *Report on Government Services*. Information on health status and outcomes, determinants of health and health system performance, including the capability and sustainability of the health system, is also reported to health ministers via *The National Report on Health Sector Performance Indicators* prepared by the National Health Performance Committee.

In addition to external reporting of performance, we are developing ways to improve the internal monitoring of our performance. Internally, regular and timely performance information is needed for corporate governance, strategic planning, policy development, resource allocation, service planning and evaluation. An integrated framework for performance information will link the inputs, outputs and outcomes essential to achieving our mission. We will use the health status indicators from this framework to monitor performance according to the strategic plan. Through our Integrating Strategy and Performance (ISAP) process, we will measure progress towards achieving the strategic objectives outlined in this plan.

This approach will develop a culture that promotes performance measurement as a critical element of all we do. By paying close attention to the success of our activities and the areas in which we can improve, we will be in a better position to deliver sustainable and effective health services to the people of Queensland.

Minister for Health. Director-General =Office of Chief Health Officer Chief Nursing Advisor Executive Manager Director-General Audit and Operational Review Unit Public Affairs Child Safety Unit Legal and Administrative Law Unit Strategic Policy & Innovation & Resource Management Health Services Information Covernment Faison Workforce Reform Directorate Directorate Directorate Directorate **Directorate Finance Branch** Strategic Policy Branch Northern Zone InfoService Centre **Innovation Branch** · Service Desk Central Zone · Analysis & Evaluation Unit Service Analysis Southern Zone = Innovation Strategy Unit · Health Service Districts - 37 across the State · = Innovation Development Unit Strategic Funding & Investment Branch Zonal Management Units Learning Services Unit Health Services Purchasing & Logistics Branch InfoOperations Branch Data Centre Technologies Statewide Health and Community Services · Desktop Services Strategic Management Branch Branch Workforce Reform Branch = Data Technologies Human Resource and Corporate Services HACC Unit * Workforce Design & Participation Networks & Communications Branch SMB11 · Business Support Unit Workforce Preparation & Development = Business Application Services * Human Resource Business Centre * Mental Health Unit · Principal Medical Advisor Infrastructure Coordinators · Corporate HR/IR Policy and Strategy Centre Strategic Revenue Unit * Statewide Health Services Unit · Principal Nursing Advisor . I-Net DOS · Workplace Health & Safety Reform Unit Health Systems Development · Principal Allied Health Advisor · Corporate Office Services Unit Oral Health Unit · Legislative Projects Unit Aged Care Unit InfoSolutions Branch Professional Conduct Review Panel Health Contact Centre Project Strategic Partnerships Unit · Project Office . HRMIS Unit Healthy Hearing Patient Safety Centre = Project Directors Community Services Unit Safety Improvement Unit · Program Office Safe Medicines Unit · I-Net Systems Development . Centre for Healthcare Related Infection System Integration Surveillance & Prevention (CHRISP) Development Services Coordinator Capital Works & Asset Mgt Branch QH Pathology and Scientific Services Branch · ICT Infrastructure Program · Project Co-Ordination Unit (Provincial and · OH Pathology Services OH Scientific Services Rumi · Project Development Unit (S.E.Q.) Biomedical Technology Services Asset Management Unit
 Technology Policy Unit Statewide Health Services Planning Unit InfoInvestment Branch * Rural Health · Quality Management · Projects and Modelling · Security Services Unit Clinical Information Strategy Public Health Services Branch · Electronic Publishing Services · PH Planning and Research Unit - Information Management Governance Shared Service Coordination Unit = PH Unit Networks (Tropical, Central, Southern) **Clinical Practice Improvement Centre** · Information Management Planning & AT&OD Unit Collaboratives Investment · Environmental Health Unit · Pathways & Process Information Strategy ** The Resource Management Directorate is = Statewide Health Promotion Unit District Liaison also the Shared Service Provider - Corporate · Clinical Forensic Medicine Unit · Facilitation & Group Learning and Statewide - Cancer Screening Services Unit Measurement Systems & Data Analysis . Child and Youth Health Unit Health Information Branch Indigenous Health Unit * Data Services Unit · Specialized Health Services Unit Client Services Unit * Communicable Diseases Unit · Epidemiology Services Unit Skills Development Centre Medicines & Pharmacy Services Unit · Library Services The Shared Service Provider - Districts reports **Clinical Informatics Program** through the RB&WH HSD Information Directorate Zonal Units (temporary) 23 May 2005 - Information Services Units -----_____ Transformation Program (temporary) 1------

SMB12

Queensland Health Strategic Plan 2004–10

Table of contents

	M	essage from the Minister	2
	Di	rector-General's introduction	2
:	Pu	Irpose and role	3
	· 01	ur mission, our vision, our values	4-5
	Ōı	ur strategic intents	4-5
(6		ur challenges	6
C		eeting our key challenges	
	Ac	hieving our mission: Our strategic planning process	
	A	Our contribution to whole-of-government policy priorities	
	1	Our Queensland Health Strategy Map: strategic intents and objectives at a glance	
	51	Our strategic initiatives	
		– Healthier staff,	
		- Healthier partnerships	14
		- Healthier people and communities	
		- Healthier hospitals	
		– Healthier resources	
a	R	Our performance measures	
Q	ΟL	Ir performance framework	inside back cover





One of the Queensland Government's highest priorities is to build and maintain the trust of Queenslanders who expect the health system to work for them when and wherever they need it.

The real challenge is to ensure our health system remains healthy and sustainable. This will not be easy: our population is ageing and increasing, health costs are rising in line with the cost of new technology and drugs, and there is a world-wide shortage of skilled health professionals.

The Queensland Health Strategic Plan 2004–10 engages all 65,000 Queensland Health staff in meeting these and other challenges, finding new and smarter ways to deliver health services based on need.

Priority staffing initiatives are designed to improve staffing levels across health professions and deliver opportunities for staff and career development.

There is also an emphasis on promoting good health and engaging Queenslanders to take more responsibility for maintaining their health. The imperative to improve partnerships will help reduce duplication, coordinate services and provide a better mix of services for people at home, in the community or in hospital. By managing chronic and other conditions in the community we will free hospitals to do what they do best – provide acute and emergency care in times of need.

a *healthier* Queensland

The Queensland Government has committed significant resources for health. Staff have a vital role to ensure the resources entrusted to them produce maximum health outcomes for the community.

The next six years will be an exciting time for Queensland Health.

With your help, public confidence in our health system will grow to new levels and we will maintain and improve the health of the people of Queensland.

Gordon Nuttall MP Minister for Health

Director-General's introduction



Queensland has one of the best public health systems in the world. It is my intention that we build on this reputation and make it even better.

The Queensland Health Strategic Plan 2004–10 is timely for our organisation to refocus its direction, restate its commitment to the community and affirm our staff as our greatest asset. It brings all corporate planning processes into line and gives the clear direction on where we are heading in the immediate future.

Queensland Health now has a new mission: *Promoting a healthier Queensland*. Our new vision: *Leaders in health – partners for life*, challenges all staff to retain the confidence of Queenslanders who trust us to look after their health needs throughout life.

Of course, no organisation can achieve the vision of being a leader in their field unless they are very clear about their strategic intention. Over the next six years, we will promote a healthier Queensland through five new strategic intents: *healthier staff, healthier partnerships, healthier people and communities, healthier hospitals, and healthier resources.*

It is my intention that staff at all levels of the organisation are involved in making the changes necessary to deliver these strategic intents. We need to have a greater emphasis on prevention and health promotion, while at the same time ensuring our acute services are of the highest quality.

However, we can not do it alone and our partnerships with the community, all levels of government and other health providers will be vital.

Internally we will use the Integrating Strategy and Performance (ISAP) process to engage all staff, drawing on your wisdom, expertise and ideas to make improvements to local services.

In this way the entire organisation and our partners will work together to promote a healthier Queensland.

Steve Buckland Director-General Queensland Health



Queensland Health Strategic Plan 2004-10

Purpose

This plan outlines our strategic intention for the next six years. It builds on the work of the *Smart State: Health 2020 Directions Statement* released in December 2002 and the strategic planning and performance monitoring process we have progressed since then through our Integrating Strategy and Performance (ISAP) process.

It identifies our strategic objectives, our performance measures and the major initiatives we will implement to promote a healthier Queensland.

The Queensland Health Strategic Plan 2004–10:

- describes to our stakeholders, staff and the community what we aim to achieve over the next six years
- links the Queensland Government's priorities to the health outcomes we plan to achieve
- shares our strategic planning framework
 with stakeholders and staff
- provides direction to our staff on how their work can contribute to achieving health outcomes
- provides direction to Queensland Health's executives in allocating resources
- identifies the challenges we face as we work towards achieving our mission
- guides the organisation in operational and business planning.

Role

Queensland Health has three major roles: a leadership role to protect health and promote a healthier Queensland

- a stewardship role to deliver health services that prevent, alleviate and manage illness and disease, such as programs to protect and promote public health; hospital services; mental health services; communitybased support programs; services specific to population groups including older people, women, children and young people, and Aboriginal and Torres Strait Islander peoples; and alcohol, tobacco and other drug, sexual health and oral health services
- a partnership role with consumers, other health providers and other sectors to achieve healthier lifestyles and healthier communities.

Queensland Health Strategic Plan 2004-10

9

(Lolla)

-



(0)

We will be successful in promoting a healthier Queensland through five strategic intents. Our intent is to optimise staffing levels, provide staff with the right knowledge and skills, and provide an environment that values their experience and supports positive ideas to drive innovation, creativity and health enhancements.

- We will recruit, develop and retain a highly skilled workforce.
- We will support the health of our staff.
- We will encourage and help staff to develop their knowledge, experience, and leadership skills.
- We will promote an organisational culture that supports our values of professionalism, teamwork, performance accountability, and quality and recognition.
- We will give staff the right information, at the right time, at the right place, through the right medium.

Our intent is to work with others to harmonise programs and activities that impact on health.

Queensland

- We will work in partnership with other federal, state and local governments and non-government organisations to ensure their policies, programs and activities actively support good health.
- We will work in partnership with other health care providers to plan and deliver innovative, cost-effective and integrated health services.

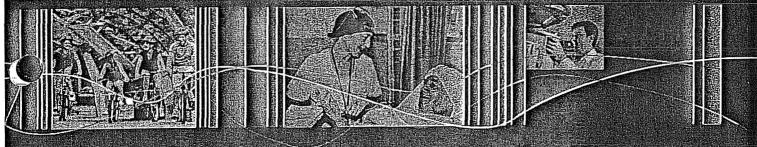
Our mission Promoting a *healthier* Queensland

Ourvision

Leaders in health – partners for life

Ourvalues

- We recognise that Queenslanders trust us to act in their interest at all times. To fulfil our mission and sustain this trust we share four core values:
- professionalism
- teamwork
- performance accountability
 quality and recognition.



Healthier people and communities

Our intent is to increase our focus on promoting healthier lifestyles and environments for individuals, families and communities, and improve communitybased chronic disease management.

 We will inform, support and provide Queenslanders with information and skills to improve, maintain and manage their health.



- We will invest more in strategies to prevent illness and injury in the areas we can make the greatest difference.
- We will systematically identify people at greatest risk of illness, injury or complications from existing health conditions and take steps to reduce their risk and improve their quality of life.
- We will work with other health care providers, both government and nongovernment, and community-controlled organisations, to build a stronger and more responsive primary health care sector.

Healthier hospitals

Our intent is to ensure our hospitals provide high quality, equitable acute and emergency care, integrated with enhanced communitybased services.

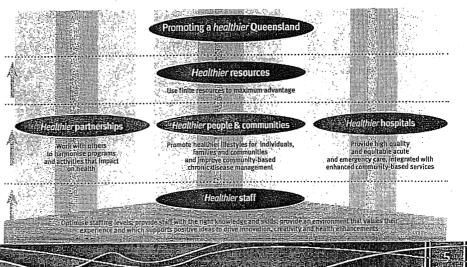
- We will ensure that throughout Queensland Health, treatment is based on evidence-based decisions, policies, and programs.
- We will continuously improve our key business processes.
- Our service and workforce plans will reflect our strategic priorities and demands.

Healthier resources

Our intent is to use our finite health resources to maximum advantage.

- We will provide excellent health service delivery while maintaining balanced budgets.
- We will seek opportunities to work with other industries to ensure their resources, activities and programs support a healthier Queensland.

The following diagram shows the structure of the Queensland Health strategic intents. This structure complements the *Queensland Health Strategy Map* and is designed to be read from the bottom up. (The *Queensland Health Strategy Map* is presented on page 12.)



Our challenges

There are a number of challenges which we must take into consideration in our actions to promote a healthier Queensland.¹

<u>Population</u> growth, ageing and distribution

Population size and spread Queensland is the fastest growing state in Australia and will overtake Victoria's population by 2038. Two-thirds of all Queenslanders are likely to live in the south-east corner.

Ageing population

Queensland's population is ageing due to increased life expectancy and declining birth rates.

By the year 2020, one in seven people will live alone, with 25 per cent of people aged 75 years or older being in that category. The demand for aged care and support services will rise sharply, particularly as the number of very old people increases.

The state's workforce is also ageing and more workers will have 'elder care' responsibilities. Workforce shortage will increasingly be commonplace and will affect the health care industry.

Queensland Aboriginal and Torres Strait Islander peoples

Three per cent of Queensland's population are Aboriginal and Torres Strait Islander peoples and it is estimated that the state will have the largest population of Aboriginal and Torres Strait Islander peoples in Australia by 2006.

Queensland Aboriginal and Torres Strait Islander peoples have higher fertility rates, higher mortality rates and have poorer health than the general population.

Improvements in the health status of Aboriginal and Torres Strait Islander peoples requires action to address the social, cultural and environmental factors that affect health and by improving health outcomes through effective health services. romoting a healthier Queensland

Queenslanders born overseas Queensland is a culturally diverse state with about one third of residents either born overseas or having at least one parent born overseas.

Queensland Health is committed to principles of equitable access, participation and diversity in service delivery to multicultural groups.

People living in rural and remote areas Across the state the population in rural and remote areas is both declining and ageing. This impacts on our capacity to adequately resource health services in rural locations where the demand for services is increasing, but the workforce, including that of the health sector, is declining. With the added factor of the increasing complexity of care, the challenge for Queensland Health is to provide safe, high quality services for people living in rural and remote areas.

Children and young people Children and young people (0–24 years) make up more than one third of Queensland's population. While their proportion of the total population is declining (except for Aboriginal and Torres Strait Islander children), the number of children and young people in Queensland is expected to increase by more than 30 per cent by the year 2025.

We know that positive social, economic, educational and environmental conditions improve the growth and development, mental health and the short and longerterm health of children and young people.

In addition, the link between the maternal and infant health and chronic conditions such as diabetes, heart disease and high blood pressure in later life is clear, and that these conditions are appearing at much younger ages.

¹ More detail about these challenges can be found in the Smart State: Health 2020 Directions Statement available on our website www.health.qld.gov.au

6

Economic and workforce conditions

Changing employment

Employment in service and knowledgebased industries is increasing, with more women moving into these areas than in the past. Over the next six years, the proportion of female health professionals and general practitioners will increase in the health sector. This will increase the pressure on our organisation to develop flexible working solutions.

Employment and income are the most important modifiable determinants of health. The extent of income inequality ie. the size of the gap between the rich and the poor) is also associated with overall mortality. The health sector has a leadership role in policy debate in this area and in responding to the health implications of future employment trends.

Workforce growth

As the population ages and our birth rate declines, employment growth will slow_ down. Towards the end of the timeframe of this strategic plan, we can expect to see an increasing need for health care and fewer people available to provide that care. We can also expect to see overseas competition for trained health professionals creating challenges for our workforce strategy.

Workforce patterns

Changing workforce patterns will also impact on the economy and on the health yare industry, with career changes over a lifetime increasing and a clear trend towards part-time, casual and contracted work. To recruit and retain highly skilled professionals in the workforce, flexible working solutions will need to be developed which take these trends into consideration.

Workforce mix

To address changes in the burden of disease (ie. the increase in chronic disease and the decrease in infectious diseases), we will need to develop models of care that facilitate care being provided by teams that work across health settings.

Rural workforce

The small populations in many small rural centres create challenges for providing health care. Care needs to be accessible and yet we need to ensure that our service provision is of high quality and costeffective. Workforce shortages in rural areas make it even more difficult to sustain safe, high quality services. Rural, remote and regional communities will be involved in shaping new service models that respond to health needs and make the best use of available resources.

Increasing costs of health care Health care expenditure will continue to be under pressure with increasing costs of new technologies, drugs and health care innovations, increasing consumer demand for new treatments, and an increase in demand for health services due to an ageing and growing population.

Competition by the public health sector for government resources – both state and federal – will be intense. Transparency relating to expenditure and outcomes will be crucial if public confidence is to be maintained in the sector.

Private health insurance and demand for hospital services

When the Australian Government introduced its private health insurance incentives package in 2000, Queensland's level of insurance coverage increased but is still below the Australian average. The demand for public hospital services, particularly high cost and complex public health services, has not diminished. Increasing insurance premiums, exclusion provisions, limited distribution of private hospitals and out-of-pocket expenses lead patients to seek treatment in the public rather than the private sector.

Environmental conditions

A wide range of environmental factors impact on health. These include air and water quality, food safety and security, pests, ultraviolet radiation, housing and household devices and environmental tobacco smoke. To safeguard the health of Queensland communities, it is critical to maintain the capacity of and improve systems to monitor and regulate these factors.

We must identify and address environmental challenges including the adequacy, safety and quality of water supplies; waste and water management; materials for housing; more and more people living in cities and in increasing densities; and global climate change which could influence the spread of communicable diseases.

Health system organisation and advances

Changing models of health service delivery _____

Chronic disease, mental illness, injury and self-harm will account for a significant proportion of the future burden of disease. Service delivery will change to better meet people's needs.

Management of chronic conditions is already shifting from acute treatment in hospital to community services that manage complications and alleviate the need for hospital admission. Changes include an increased focus on community or home-based services such as rehabilitation and strengthened partnerships with primary health care providers.

More emphasis will be given to the primary prevention of disease, illness and injury, and on activities that will protect the health of individuals and communities.

Technological advances

As new technologies become available, difficult decisions must be made relating to the cost-effective and ethical use of high cost technologies and the required level of support, including staff training.

New technologies are already changing things for the better. A Queensland-wide telehealth network provides medical specialist input into care provided in local communities.



Fragmented service delivery The responsibility for health policy, funding, service planning and delivery is spread across three levels of government (federal, state and local government). Developing partnerships within and across sectors will mean that the money spent on health care can be used to maximum advantage, with services integrated wherever possible.

Community expectations

Consumer expectations of the health system are rising. Increasing numbers of health consumers are better informed and educated, less deferential, and want nore control and choice in their health care. These factors impact on perceptions and relationships between consumers and health professionals.

People want to have a greater say in service planning. With the impending retirement of the baby boomers, well-educated retirees will increasingly be available for consultation processes to plan health services. Community engagement at all levels will be integral to the broader government health policy development processes.

Partnerships

Whole-of-government partnerships Health is dependent on many factors including lifestyles, genes, economic and social conditions, and environment. Queensland Health will use strategic partnerships with other government departments to promote better health outcomes. We will strengthen partnerships with lead agencies responsible for disability, education, employment, housing, local government, transport, sport and recreation, social support services and others, to support the development of healthier communities and healthy lifestyles.

Partnerships in health care

The health care system is a complex one and Queensland Health is only one provider of health services to the community. We will endeavour to work more closely with the Australian Government which shapes the national health policy and finances primary medical care services, pharmaceutical benefits and aged care services. We will also work more closely with health sector partners, including general practitioners, private specialists and private hospitals, and with non-government agencies providing community-based services.

--- Meeting our key challenges

There are five key challenges which require critical attention for Queensland Health to achieve its mission. Our actions to address these key challenges are now summarised and feature prominently in our initiatives detailed on pages 13-19.

Population growth

A number of strategic initiatives deal with managing the increasing demand for services due to our growing population. These include funding to reduce waiting times for elective surgery, enhanced capacity to provide cancer and cardiac treatment, and new services built through the Smart State Building Fund.

In south-east Queensland where population growth is greatest, we will develop and implement an inclusive planning model, involving other state agencies, the Australian Government, local government and local communities. Our aim is to ensure that planning for growth in new and existing communities will routinely consider opportunities to promote the health of the people in those communities, give appropriate attention to environmental risks to health, and ensure appropriate planning for health services and access to them.



The health of Queensland Aboriginal and Torres Strait Islander peoples

The Queensland Government recognises the poor health status of Aboriginal and Torres Strait Islander peoples across Queensland and in response is building partnerships supported by whole-ofgovernment frameworks.

The National Strategic Framework for Aboriginal & Torres Strait Islander Health has been endorsed by the Queensland Government and a Queensland implementation plan is being developed to guide health service delivery in conjunction with other services which impact on health.

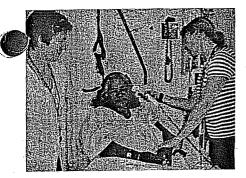
As the lead agency for health, we will collaborate with other government and nongovernment agencies as well as Aboriginal and Torres Strait Islander communities to improve health outcomes for Aboriginal and Torres Strait Islander peoples.



Queensland Health Strategic Plan 2004–10

Queensland Health is committed to working with other government departments to overcome Indigenous disadvantage to achieve the following outcomes:

- safe, healthy and supportive family environments with strong communities and cultural identity
- improved wealth creation and economic sustainability for individuals, families and communities
- positive child development and prevention of violence, crime and self-harm.



A culturally-sensitive workforce is central to improving the health of Aboriginal and Torres Strait Islander peoples. The Queensland Health Indigenous Workforce Management Strategy and the Cultural Respect Framework 2003–2008 will guide the delivery of accessible, culturally appropriate services.

In relation to Aboriginal and Torres Strait Islander peoples, the challenges for Queensland Health and other agencies will be to:

- improve physical environments, infrastructure and other essentials for health and working to reduce the multiple causes of illness, injury and disability
- improve access to appropriate and affordable housing
- promote a whole of life approach to health for individuals, families and communities
- provide access to an effective, integrated network of services to promote and maintain good health, prevent and injury, detect and manage disease and illness as early as possible
- build on the existing Aboriginal and Torres Strait Islander health and healthrelated workforce.



The health of Queensland children

The Queensland Government has endorsed a Strategic Policy Framework for Children's and Young People's Health 2002 – 2007. This document supports whole-ofgovernment and early intervention approaches to create safe, supportive family and community environments. It highlights risk reduction and protection during critical developmental stages.

Queensland Health has established early intervention and parenting support programs which improve and integrate services for families with children aged 0–6. Frameworks and guidelines have also been developed for infant nutrition (including breastfeeding), promoting health in schools, the identification and management of child abuse and neglect, and screening for early detection of health conditions. Further work to support implementation of these across the state will continue. Priorities for future action include:

- commitments under the whole-ofgovernment blueprint for child safety
- improving Aboriginal and Torres Strait Islander child and youth health
- intersectoral action to promote healthy weight in children and young people
- a statewide neonatal screening program for hearing
- improved intersectoral integration of support and care for children aged 0-6 with a disability and/or complex conditions.



The ageing of the population

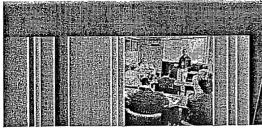
Older people are the greatest users of health services and this demand will continue to rise as our population ages. Queensland Health is committed to providing acute, community and aged care services for the ageing population, including the provision of services to the veteran population. A statewide chronic disease implementation plan will be central to managing the impact of an ageing population, as will be support provided to older people so that they maintain their health and stay healthier longer.

We will continue to implement Queensland Health's Directions for Aged Care 2004– 2011, which provides the clear direction for the further development of health and aged care service delivery to older people and their carers.

Queenslanders living in rural and remote areas

The health of many rural and remote Queenslanders, notably Aboriginal and Torres Strait Islander peoples, is poor compared with the general population. Faced with changing patterns of need and demand, declining and ageing populations, the increasing sophistication of secondary and tertiary health services, and shortages of appropriately skilled staff, many rural and remote centres are finding it increasingly difficult to provide an appropriate mix of safe, high quality health services.

Queensland Health is developing an integrated health planning framework to guide sustainable models of health care delivery in these communities. At the same time we are developing better ways to address priority health issues closer to where people live by enhancing use of primary health care approaches, expanding clinical outreach models and making better use of telehealth services.



Achieving our mission

Queensland Health consulted widely with stakeholders, staff and the community to develop our strategic intention. This section summarises this consultation and describes the relationship between our strategic intention and the government's policy priorities. It also describes how we will act on the strategic intention through the Integrating Strategy and Performance (ISAP) process. The last part of this section presents the *Queensland Health Strategy Map* and the objectives and initiatives we will progress over the next six years to achieve our strategic intention.

Our strategic planning process

Consultation

The Smart State: Health 2020 Directions Statement and the Queensland Health Strategy Map provided the foundations for this strategic plan. Significant stakeholder, staff and community engagement activities were conducted in the development of both of these direction-setting documents, including visioning workshops in locations across the state, dissemination of a discussion paper for public consultation, and stakeholder working groups. Additional internal consultation was undertaken in 2004 to develop our strategic intents.

Strategic planning framework

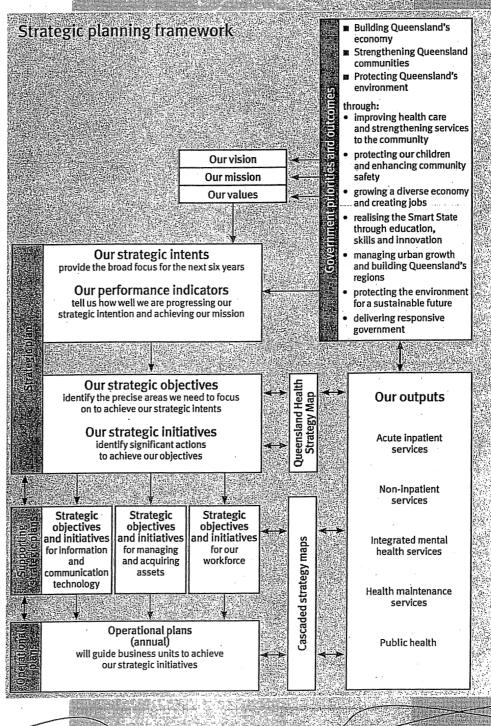
Our strategic planning framework is shown in the diagram on this page. The diagram depicts the influence of the department's strategic plans on our operational planning. The *Queensland Health Strategy Map* underpins our strategic plan. It was developed through the Integrating Strategy and Performance (ISAP) process. The strategy map is currently being cascaded through-out the organisation.

Our contribution to whole-of-government policy priorities

Queensland Health is committed to progressing the Queensland Government's policy priorities. Our outputs directly contribute to the first priority of health care and support each of the other priorities. This is because health is determined by a range of factors including our physical, social, economic, cultural and political environments, educational and employment opportunities, and access to health care.

a *healthier* Queensland

The influence of the government's policy priorities and our contribution to these is shown in the following diagram. This diagram depicts the department's strategic planning framework.





Queensland Health Strategic Plan 2004–10

Improving health care and streng thening services

to the community Quality health care is an investment in a nealthy population and contributes to the state is productivity and economy. Across government we will take action to improve the social: economic and environmental factors that impact on health

Within Queensland Health we will: vithin Queensland Health we will: work with other health care providers to ensure our services are client; centred, integrated and accessible change the balance of our investment to enable a stronger focus on promotion and protection of health, disease prevention and the maintenance of quality of life develop coordinated, whole of-government approaches to improving the health of Aboriginal and Torres strait islance peoples plan new services in partnership with other health care providers and the community.

Protecting our children and enhancing community safety

communit

Queensland Health will continue to work with other agencies to increase the safety of children at risk and to contribute to the whole of government blueprint for reform. This will involve improving our processes to identify child abuse and neglect. We will also conduct programs to provide parents of young children with skills to manage children and other issues in their lives. children and other issues in theil fives Safe community initiatives will be continued, withia focus on alcohol and other drug misuse, child injury and prevention of falls in older people. We will also contribute to the safety of our communities through improving our planning for disaster preparedness and communicable disease pandemics.

One of our strategic intents is for healthier staff. We are committed to promoting healthy and safe environments for our staff.

Growing a diverse economy and creating jobs

Queensland Health is the largest employer In Queensland with around 65,000 staff. To meet the growing demand for health services, we will employ 1500 nursing graduates and additional staff for emergency departments.

With forecasted workforce shortages, a priority for Queensland Health will be . to retain our staff in health care jobs. This may involve creating new opportunities for staff and flexible working arrangements. It will also involve innovative recruitment strategies to build our staffing capacity wherever possible. A number of initiatives are already being progressed in regional and rural areas and include the Rural and Remote Nursing Relief Program, the Rural Scholarship Scheme that encourages health professionals to work in rural Queensland, the Allied Health Professional Enhancement Program and the Breaking the Unemployment Cycle Initiative.

Realising the Smart State through education, skills and innovation

Werrecognise the strong link between educational status and health outcomes. As a matter of priority we will educate Queenslanders on healthy choices, behaviours and lifestyles, with an emphasis on educating and motivating children to adopt healthy eating practices and active lifestyles.

We also recognise that the knowledge and skills of our workforce are critical to our ability to prevent disease and to treat illness and disease when it occurs Lifelong learning will be promoted. We will undertake research to ensure that ourworkforce has the right skills to manage the changing burden of disease.

Improvements in health care are dependent on an active health and medical research program. We will take a leadership role in developing the Queensland health and medical research effort to give Queenslanders the benefit of the highest quality and most effective health services and programs possible.

We will also encourage and reward ideas, innovation, hard work and collaboration across the health sector, across government and with the non-government sector and industry.

Managing urban growth and building Queensland's regions We will support Queensland's regions through statewide health service planning, infrastructure development (eg. telehealth) and recruitment and retention initiatives for the rural and remote health workforce.

Our contribution to regional planning will focus on managing the accelerated growth in south-east Queensland so that health is protected and promoted. Development should support lifestyles which encourage people to increase their level of physical activity. We will also participate in planning for

integrated transport options that safeguard air quality and provide equitable access to health services.

Protecting the environment

for a sustainable future Energy efficiency and effective waste management are vital for good public health and ecological sustainability. We will strengthen our collaboration with other state and local government agencies to ensure environmental protection responsibilities are well linked with the government's health protection and promotion responsibilities. Queensland Health will contribute to sustainable development by continuing to undertake energy audits, replace older energy and waste management systems with more efficient and effective technologies, and work with other agencies such as the Environmental Protection Agency to establish whole of government energy, water and waste management strategies.

Delivering responsive

government A strong health system cannot operate in isolation from the Queensland community. Oueensland Health will improve its engagement processes with communities in health service policy; planning; priority setting and decision making processes.

We will also improve our responsiveness by identifying future challenges to health and health care and develop strategies to proactively manage these challenges.





Our Queensland Health Strategy Map: strategic intents and objectives at a glance

The Integrating Strategy and Performance (ISAP) process will help us achieve our strategic intention. Through ISAP, we have translated each of our five strategic intents into a series of objectives. These, together with the strategic intents, form the *Queensland Health Strategy Map*. We will routinely measure and review our success in achieving these objectives.

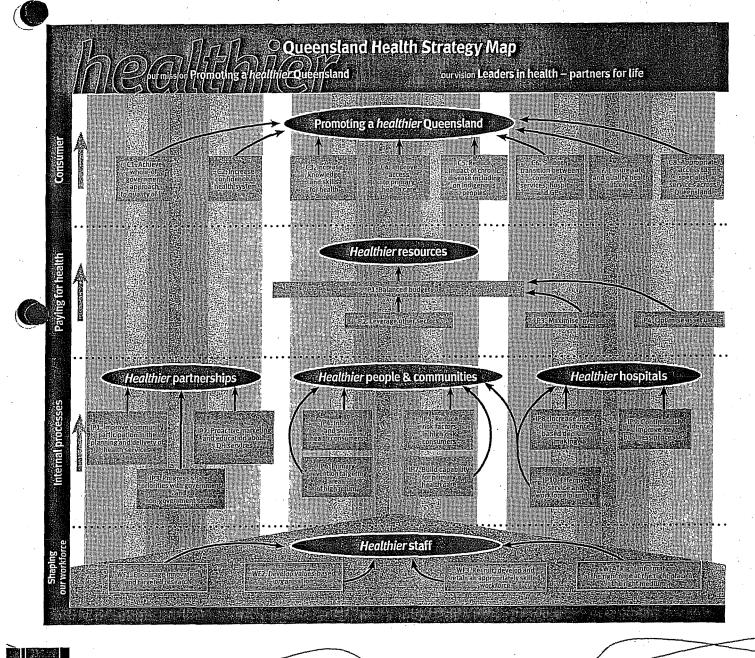
We will also cascade these objectives to health service districts, statewide services and corporate office, to ensure that all parts of the organisation are actively supporting our strategic intention and contributing to realising our mission.

It is important to note that our strategic intents are interrelated and that action in one affects the others. Our initiatives have been planned to ensure that actions are coordinated across the entire health care continuum from primary prevention to secondary prevention, acute treatment, tertiary prevention, rehabilitation and palliation.

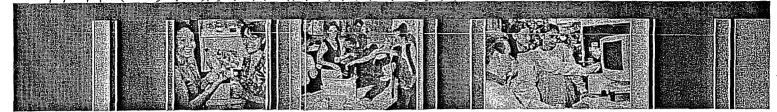
Our strategic initiatives

This section of the strategic plan details the initiatives that will be implemented over the next six years to achieve our objectives, and in turn, our strategic intents. The initiatives are presented in the order corresponding to reading the Queensland Health Strategy Map from the bottom up.

- Healthier staff
- Healthier partnerships
- Healthier people and communities
- Healthier hospitals
- Healthier resourcing



Optimise staffing levels, provide staff with the right knowledge and skills, and provide an environment that values their experience and supports positive ideas to drive innovation, creativity and health enhancements



Encourage innovation and targeted research

trateaic înter

ea

hier/staf

 Establish the Ministerial Health and Medical Research Council of Queensland to provide strategic direction and leadership for health and medical research in Queensland



- Establish an innovation management system to recognise staff creativity and innovation and provide funding to test ideas
- Implement nursing research scholarships to promote nursing research

Develop a values-based organisation

- Establish a system of routinely canvassing staff feedback and opinion to inform organisational improvement initiatives to improve the health of our staff and organisational climate, morale and performance
- Implement an enhanced system of performance appraisal and development for all staff in line with organisational values and goals
- Implement workplace initiatives to improve the health of our staff, with an initial focus on helping staff to stop smoking

What will this mean for you?

As a staff member of Queensland Health, we will increase our support to you by making your workplace healthier. For example, not only are we asking the community to make healthier lifestyle choices but we are making it easier for you to make these choices at work. Some initiatives already underway include the statewide vaccination program offered to staff, healthy or 'better choice' menus in hospital canteens, and physical activity programs. We know our staff hold the key to positive changes in the way we manage and we will act on your feedback on how to improve Queensland Health's work environment. Recruit, develop and retain an appropriately skilled workforce

- Implement the National Health Workforce Strategy to deliver a sustainable workforce
- Improve our systems, information and strategic partnerships to support workforce planning and develop the future workforce, with an initial focus on:
 - the strategic role of the principal health advisers in clinical workforce recruitment and retention
 - innovative recruitment strategies such as e-recruitment including the dedicated nursing website www.thinknursing.com, and a web-based system to manage graduate recruitment
 - a peak nursing body to monitor and progress nursing recruitment and retention initiatives
 - frameworks for team-based models of care that use the skills of professionals in different ways
- legislation determined to be necessary to enable registered nurses with expert knowledge and advanced clinical experience to undertake the nurse practitioner role. During the development of this legislation, conduct trials at demonstration sites to identify supporting strategies for the nurse practitioner role
- Implement programs through the Skills Development Centre to enhance the clinical skills of Queensland Health staff
- Employ 1500 new nursing graduates to improve our capacity to provide quality services

- Implement an executive leadership program and a succession management framework for critical leadership roles
- Establish a development program for Mental Health Service leaders to build skills in priority areas
- Establish a Centre for Mental Health Learning to provide coordinated mental health education and training
- Implement the Cultural Respect Framework for Aboriginal and Torres Strait Islander Health to establish culturally respectful and effective mechanisms, structures and partnerships within the health care system
- Review and update the Queensland Health Indigenous Workforce
 Management Strategy to ensure the implementation of effective strategies to enhance the representation of Aboriginal and Torres Strait Islander peoples at all levels of our workforce

Right information at the right time at the right place in the right medium

- Develop and implement a client-centric, clinical strategy for the migration of paper-based medical data collection to electronic collection including the development of electronic health records across hospital and community settings. Systems to be developed include:
 - community-based services including oral health, sexual health, mental health, aged care, chronic disease management, alcohol and tobacco and patient administration
 - hospital services including patient administration, pharmacy, pathology, radiology and utilisation of operating theatres



Work with others to harmonise programs and activities that impact on health

Improve community participation in the planning and delivery of health services

Strateaic inten

Healthier partnerships.

What will this mean for you?

Healthy children grow into healthy, t adults: Habits formed in childhoods: influence later life. This is why Queensland children are receiving

at school.

positive role modelling and information

The curriculum includes learning about good nutrition and physical activity and a puts it into action: Learning about the

sun safety message starts in pre-school We are assisting tuckshops to adopt healthier food choices. School based nurses in secondary schools support

programs covering sexual and mental health issues and the responsible use of alcohol and other drugs

Education Queensland partnership will continue initiatives such as these so we can grow a healthier Queensland.

The joint Queensland Health and

ealthier/partner/s

- Implement enhancements to the functioning of and support for district health councils, Ministerial councils, regional managers' coordination networks and Indigenous regional forums to strengthen community engagement
- Develop and implement improved community engagement processes based on the Government's Engaging Queenslanders: Get Involved policy
- Implement more inclusive approaches to service planning, with an initial focus on chronic disease prevention and management and rural and remote health planning

Proactive marketing and education about Queensland Health Services

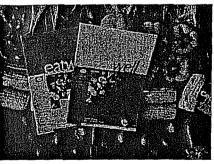
 Implement a marketing, communication and media plan to inform Queenslanders about the range and quality of Queensland Health services

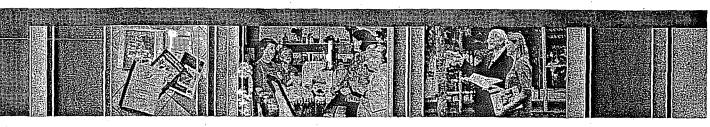
Progress shared priorities with government and non-government sector

- Work with other governments, departments and the non-government sector to include healthier communities as a goal in policy development and planning for managing population growth and urban development, with an initial focus on:
 - a statewide service planning function
 - progressing whole-of-government approaches to health impact assessments
- Contribute to the National Health Reform Agenda and particularly the reform agenda for chronic disease prevention and management
- Continue to collaborate with other agencies to implement Queensland Health's responsibilities in relation to the Meeting Challenges, Making Choices Initiative - the Government's response to the Cape York Justice Study



- Health Partnership to link Aboriginal and Torres Strait Islander organisations and communities, business, governments, service providers and researchers to improve the health of Aboriginal and Torres Strait Islander children
- Develop stronger and more formal links with Education Queensland, the Department of Housing, Disability Services Queensland, Queensland Police Service, and the Department of Child Safety to support crossdepartmental action on activities that impact on health
- Implement, annually review and update the joint action plan with Education Queensland. Initial priorities are healthy weight in children, skin cancer, alcohol, tobacco and other drugs, sexual and reproductive health and mental health promotion





- Develop and implement a Memorandum of Understanding with the Environmental Protection Agency to enhance collaborative and coordinated responses to environmental health risks
- Implement the Queensland Health components of the whole-ofgovernment response to the Crime and Misconduct Commission Report Protecting Children: An Inquiry Into Abuse of Children in Foster Care, to increase the safety of children at risk
- Lead whole-of-government implementation of the Queensland HIV, Hepatitis C and Sexual Health Strategy 2004–2007 to improve health outcomes



- Continue to lead whole-of-government implementation of the Queensland Government Suicide Prevention Strategy 2003–2008
- Build on the existing whole-ofgovernment approach to emergency preparedness and business continuity to accommodate emerging issues, including the threat of terrorism, and deliver a coordinated response across services

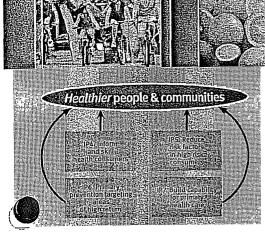
Lead the development of the whole-ofgovernment implementation plan for the National Strategic Framework for Aboriginal and Torres Strait Islander Health



- Review and implement improved collaborative arrangements with the Department of Local Government and Planning, Sport and Recreation, the Local Government Association of Queensland and local councils to address public health issues and, where appropriate, support the development of community public health plans
- Work with the General Practice Advisory Council to progress joint issues around access to primary medical and preventive health care
- Work with the non government sector to develop service models that promote continuity of care and reduce duplication of services



Promote healthier lifestyles and environments for individuals, families and communities and improve community-based chronic disease management



tratec

inten

hier/people/and

What will this mean for you?

If you are an Indigenous person living in a rural or remote area of North Queensland, your chances of developing a chronic disease is being reduced Through regular health checks potential health problems are being picked upearly. When these are identified, youwill be given consistent care to prevent or manage chronic diseases such as diabetes, renal failure and heart disease. This is all part of the Enhanced Model of Primary Health Care which works in partnership with communities so that Aboriginal and Torres Stratt Islander peoples have access to prevention and clinical services in communities. Positive changes include joint health service planning and chronic

disease care offered in 35 communities



communities

Inform and skill health consumers: consumers have the knowledge and support to manage health conditions confidently and in an ongoing way

- Improve the availability and currency of health related information to improve people's skills in maintaining good health and managing health conditions, with an initial focus on information for parents, carers and young people
- Establish a 24-hour, seven-day-a-week, statewide health hotline to give easy access to health advice and information about the location of health services

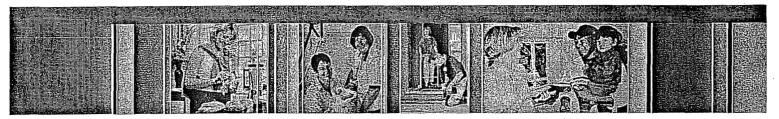
Reduce risk factors in high risk consumers

Implement a system for identifying consumers at high risk of illness or disease and implement programs across hospital and community settings to reduce their risk. The initial focus will be on stroke, cardiac rehabilitation and the fitness of patients waiting for surgery

Primary prevention targeting areas of high return: promote healthier environments and behaviours focussing on areas where we can achieve the greatest health gains for the population

- Introduce and implement new legislation to protect and promote public health including a new public health Act and a new food Act to promote food safety in the food services, retail, processing and manufacturing sectors
- Implement in collaboration with Education Queensland and the non government sector, initiatives in the areas of healthy weight, skin cancer, alcohol, tobacco and other drugs, sexual and reproductive health and mental health promotion, as per the Joint Action Plan, and expand the School Based Youth Health Nurses Program

- Develop and implement an enhanced Queensland Tobacco Action Plan focusing on increased use of social marketing campaigns to complement the existing QUIT Campaign, enhancing tobacco control legislation and its enforcement, youth smoking prevention strategies, quit smoking services and multi-strategy programs to address smoking amongst Aboriginal and Torres Strait Islander peoples
- Lead whole-of-government activity and implement Queensland Health's commitments under *Eat Well Queensland: Smart Eating for a Healthier State* to improve food supply, promote healthy eating, increase consumption of fruit and vegetables; and enhance the health of mothers, infants and children
- Progress the adoption of the Queensland Health guidelines on breastfeeding and infant nutrition, Optimal Infant Nutrition: Evidence Based Guidelines, by all relevant health professionals
- Implement the Queensland Alcohol Action Plan and the Queensland Illicit Drugs Action Plan with particular focus on young people and meeting our commitments under the Meeting Challenges, Making Choices initiative
- Participate in the finalisation of, and implement Queensland Health's commitments under, the Get Active Queensland strategy in collaboration with the lead agency, the Department of Local Government, Planning, Sport and Recreation and other key agencies
- Continue to implement the Statewide Action Plan: Falls Prevention in Older People 2002–2006 to reduce preventable injury from falls
- Develop and implement an enhanced Queensland Skin Cancer Prevention and Control Strategy, including additional investment in a skin cancer prevention and early detection community education program



- Promote the use of fluoride, including water fluoridation, particularly in high risk areas
- Lead a whole-of-government approach to strengthen resilience and well-being in children and young people, with a focus on mental health promotion activities targeting the early years, parenting and family functioning
- Implement a marketing and communication strategy to address stigma and discrimination experienced by people with mental disorders and mental health problems
- Finalise and implement the position statement and service delivery models for Aboriginal and Torres Strait Islander children's and young people's health (0-24 years) including strategies and partnerships to reduce current health inequities
- Expand the growth assessment and action (GAA) program into Aboriginal and Torres Strait Islander communities across North Queensland to address poor growth in infants and help prevent obesity and chronic disease in adult life



- Implement evidence-based guidelines for using screening and surveillance for children aged 0–12 years as a tool to detect childhood health conditions as early as possible. Identify and address gaps in program delivery to improve immunisation rates in areas of lowest coverage
- Develop and implement a program to improve public awareness of the signs and risk factors for stroke, particularly high blood pressure

Build capability for primary health care

 Plan services with staff, local communities and other agencies in North Lakes, Logan and Innisfail to develop and implement innovative community models of service delivery and health improvement

- Conduct programs to detect and manage risk factors or health conditions as early as possible, with an initial focus on:
 - establishing universal neonatal hearing screening
 - evaluating suicide prevention and dual diagnosis early intervention initiatives
 - implementing the Healthy Women's Initiative, initially in the northern zone, taking a well women's health focus promoting and encouraging Indigenous women's participation in health screening, in particular cervical screening and health maintenance
 - expanding the Queensland BreastScreen Program to achieve the target 70 per cent participation rate among women 50–69 years by 2008–09
 - participating in the evaluation of the national bowel cancer screening program pilot
 - implementing a program to improve detection and management of stroke and stroke risks by health professionals
- Introduce new models of care to improve oral health outcomes, with a focus on increased access to services and adopting population health approaches to complement treatment services
- Undertake research to inform the implementation of strategies to reduce the number of children 0-4 years undergoing general anaesthetic for gross tooth decay
- Expand the Enhanced Model of Primary Health Care into Aboriginal and Torres Strait Islander communities across North Queensland to prevent chronic disease, detect it earlier and improve our acute management services
- In partnership with the Australian Government, implement the Primary Health Care Access Program to improve access by Aboriginal and Torres Strait Islander peoples to primary health care services

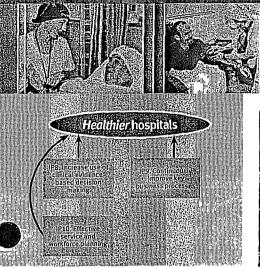


- Provide assessment and treatment services in the community for people with mental illness to provide them with greater access to their natural support networks in managing their condition
- Implement Queensland Health's Directions for Aged Care 2004–2011 and continue to develop reforms to meet the health needs of increasing numbers of older people and their carers
- Enhance our capacity for communitybased rehabilitation to improve health outcomes for people with heart, stroke and vascular disease

Effective service and workforce planning

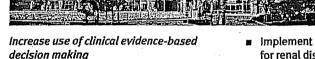
- Develop and implement statewide plans to prevent and manage chronic disease and cancer, with a particular focus on those risk factors most amendable to primary prevention (smoking, diet and physical inactivity)
- Develop and implement an integrated health and workforce planning framework for rural and remote communities
- Develop and implement the Queensland Health Strategic Framework for Aboriginal and Torres Strait Islander Health
- Develop and implement an evidencebased model of child health that reprofiles health services to meet the increasingly complex needs of children and young people 0–12 years
- Implement enhanced preparedness planning for disasters, bioterrorism threats and communicable disease pandemics to ensure the capacity for high quality public health and health care responses

Provide high quality and equitable acute and emergency care, integrated with enhanced community-based services



What will this mean for you?

If you suffer a heart attack and are taken to a Queensland Health hospital you will receive high quality care regardless of which hospital you attend. To ensure consistency of treatment in this and other conditions, our senior doctors have established clinician networks in the areas of cardiac care, stroke treatment and rehabilitation, emergency medicine and renal services to share information on treatment right around the state. This Collaborative for Health Care Improvement has more than \$50 members across 26 hospitals. In the area of heart attacks and heart failure, clinical audits have shown that participating hospitals have increased the use of potentially life saving treatments.



 Implement the Safety and Quality Program 2004–2008 as a central component to our strategic approach to plan, monitor and improve patient care. Priorities will be information exchange, education, clinical innovation and reform

[23][1][1][2]是他们

 Use evidence-based interventions and targeted resourcing to manage growth in demand for cardiovascular treatment

Continuously improve key business processes

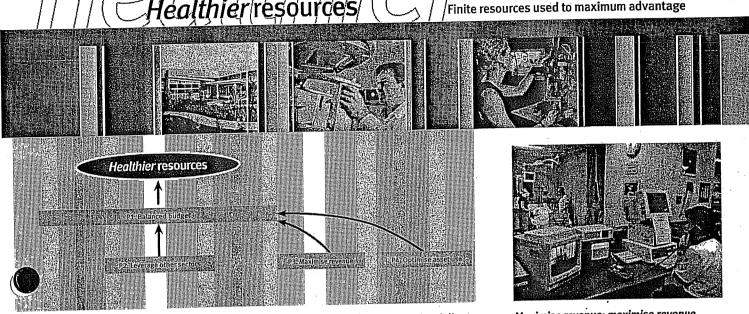
- Through the Safety and Quality Program
 - reform the accessibility, provision and quality use of medicines
 - continue to systematically examine the performance of our hospitals on key indicators
- monitor the safety of key clinical processes in hospitals by establishing a statewide system for reporting sentinel events and adverse clinical outcomes
- Work with general practitioners and other primary health care providers to improve the continuity of care for individuals across community and hospital care, with a particular focus on information transfer, self-management and the appropriate use of medicines
- Implement step-down care processes and innovative approaches, including infrastructure support through the Pathways Home Program, to improve the transition of people, particularly older people, from hospital to home

 Implement and resource a model of care for renal disease that promotes selfmanagement and provides services in ambulatory settings to increase accessibility of dialysis services

Effective service and workforce planning

- Improve access to surgery to achieve benchmark targets, through increasing available resources, including workforce and improving clinical protocols and audit processes
- Increase the capacity of emergency services in high demand areas and trial alternative models for managing nonemergency conditions such as GP clinics to enhance the responsiveness of our emergency care services
- Expand outreach and telehealth services to improve regional and rural Queenslanders' access to acute health services
- Develop and implement statewide plans for the prevention and management of chronic disease and cancer and establish infrastructure and workforce requirements to support these plans
- Inform and contribute to the ministerial review of maternity services in Queensland
- Implement the Smart State Building Program to improve hospital infrastructure across the state
- Develop and implement joint guidelines for planning multipurpose health services with the Australian Government to improve the targeting and development of flexible, integrated health and aged care services in small rural and remote communities

Finite resources used to maximum advantage





What will this mean for you?

The cumulative effect of our initiatives will lead to a more strategic use of will lead to a more strategic use of resources; including strengthening areas of high demand. Over the next three years, the \$110 million elective surgery program will treat an additional 18,000 patients; further reducing surgery waiting times. Queensland already has the shortest elective surgery waiting times in Australia and this will waiting times in Australia and this will: set a new national benchmark: Our am is to treat all urgent and semi-urgenb patients who have waited longer than the recommended time before 30 June. 2004

To meet this target, we will work in partnership with the private sector when and where our public system can not provide services.

Balanced budget: health service delivery is provided and managed within fiscal allocations

- Review and implement improved internal systems of financial management and resource allocation to optimise the use of our resources
- Continue to implement the whole-ofgovernment approach to corporate services delivery (the Shared Service Initiative) to standardise business processes, consolidate technology and pool resources and expertise

Leverage other sectors: health and non-health sectors invest to improve health outcomes

Progress our partnership arrangements with others to ensure our collective resources, activities and programs support health agencies

Maximise revenue: maximise revenue for services provided to clients who are ineligible for public services, not Queensland residents, or who choose to receive private services

Implement systems that provide for the prompt identification, collection and recording of revenue to comply with the requirements of the Financial Management Standard 1997

Optimise asset use: the asset base is aligned to service delivery and consumer and community need

Review and where necessary improve internal systems of capital investment and management to ensure we are making best use of our resources

Our performance measures

All of the preceding initiatives will achieve our mission to promote a healthier Queensland. From a consumer perspective, our objectives are to:

- increase knowledge and skills for health
- increase confidence in health system
- achieve a whole-of-government approach to quality of life
- improve access to primary health care
- reduce the impact of chronic disease, including for Aboriginal and Torres Strait Islander peoples
- ensure safe and quality health outcomes
- smooth transition between community services, hospitals and general practitioners
- appropriate access to specialist services across Queensland

We will measure the impact and outcomes of our services through health status and health system performance measures.

These are the health status performance measures in the Queensland Government's Priorities in Progress report series, with the addition of self efficacy

- 2. This indicator is not currently in the Priorities in Progress series
- ^{3.} These are the Queensland Health Strategy Map consumer perspective performance measures

Health status measures¹

Life expectancy Life expectancy at birth

Mortality Infant mortality rate

Mortality rates: all causes, circulatory disease (cerebrovascular and ischaemic heart disease), diabetes, cancer (breast and cervical cancer), suicide

Average annual percentage change in mortality rates for National Health Priority Cancers

Health inequalities

Median age at death for selected population groups including Aboriginal and Torres Strait Islander peoples

Mortality indicators and selected health risk factor indicators for Aboriginal and Torres Strait Islander peoples

Mortality indicators and selected health risk factor indicators by socio-economic status groups²

Health risk factors and health enhancing factors Cancer – participation in the breast screen program; proportion of all breast cancers detected classified as small cancers

Immunisation – age appropriate immunisation coverage rates

Physical activity – rates of sufficient time and sessions of physical activity

Obesity – percent of overweight and obese adults

Nutrition – proportion of the population that consume fruit and vegetables according to endorsed guidelines²

Smoking – proportion of population over 14 smoking daily

Alcohol – prevalence of moderate and high risk alcohol consumption amongst adults

Self efficacy

Client's knowledge, ability and confidence to successfully manage their own health and participate in their own health care management.

Health system measures³

Community confidence in Queensland Health

a healthier Queensland

Level of confidence that the Queensland population has in the quality of services provided by Queensland Health

Whole-of-government action that supports health

Number and proportion of other sectors implementing their commitments in wholeof-government strategies that impact on health

Category 4 and 5 to Emergency

departments Number/rate of patients who attend Queensland Health Emergency Departments categorised as not requiring immediate emergency care

Admissions for acute episodes

of chronic conditions Number/rate of patients who are admitted to Queensland Health facilities with angina, diabetic complications and chronic obstructive pulmonary disease.

Sentinel events

Number/rates of events within Queensland Health facilities in which death or serious harm to a patient has occurred

Patient satisfaction with admission

and discharge processes Client satisfaction with admission and discharge procedures within a hospital stay

Elective surgery access

Waiting times for elective surgery (ie. surgery that, in the opinion of the treating clinician, is necessary but for which admission can be delayed for at least 24 hours)



Queensland Health Strategic Plan 2004–10

Our performance framework

Queensland Health is committed to measuring its performance to ensure that we are achieving our mission.

Performance measurement occurs at various levels across the organisation. At the highest level we monitor our performance in contributing to the Queensland Government's priorities and outcomes and we measure our performance against achieving our mission outlined in this strategic plan. At this high level, we also report against health status indicators in the Government's *Priorities in Progress* series.

Each year, the Queensland Health Ministerial Portfolio Statement details how funds have been allocated to achieve progress towards our strategic intents. This statement is subject to critical examination during the Parliamentary Estimates Committee process. The Queensland Health Annual Report formally reports to Parliament the activities and achievements for the preceding year.

As an organisation, we place a high priority on ensuring that the outputs detailed in the *Queensland Health Ministerial Portfolio Statement* best reflect the services that we deliver. In late 2003, we initiated a review of our outputs structure and we are compiling a set of revised outputs and performance measures for Cabinet consideration in late 2004.

Measures of effectiveness, efficiency, equity and a range of other performance indicators are regularly reported and benchmarked at the national level. Queensland's performance in significant health service delivery areas, including hospital inpatient and non-inpatient health services, are compared with the performance of other jurisdictions through a range of formal reporting mechanisms. These include reporting undertaken by the Australian Government, the Australian Institute of Health and Welfare and the *Report on Government Services*. Information on health status and outcomes, determinants of health and health system performance, including the capability and sustainability of the health system, is also reported to health ministers via *The National Report*

on Health Sector Performance Indicators prepared by the National Health Performance Committee.

In addition to external reporting of performance, we are developing ways to improve the internal monitoring of our performance. Internally, regular and timely performance information is needed for corporate governance, strategic planning, policy development, resource allocation, service planning and evaluation. An integrated framework for performance information will link the inputs, outputs and outcomes essential to achieving our mission. We will use the health status indicators from this framework to monitor performance according to the strategic plan. Through our Integrating Strategy and Performance (ISAP) process, we will measure progress towards achieving the strategic objectives outlined in this plan.

This approach will develop a culture that promotes performance measurement as a critical element of all we do. By paying close attention to the success of our activities and the areas in which we can improve, we will be in a better position to deliver sustainable and effective health services to the people of Queensland.