

Swan Hill District Health Leading With Purpose Strategic Plan 2021-2024

### Acknowledgement of traditional owners

Swan Hill District Health would like to acknowledge all the Traditional Aboriginal Tribes along the rivers in the Mallee and District area and on whose land we work and live.

We pay respect to all elders past and present and honour their culture.



Andrew Gilchrist Swan Hill District Health Board Chair

### Welcome

Our vision is clear, connected care, best experience for our community. To deliver on our vision, it is also crucial we continue to improve our service delivery, address challenges and take opportunities to provide best value health care outcomes.

Our strategic priorities, aligned to an integrated program of work will ensure we can meet the health care needs of our community. Our priorities focus on the essential health care services that we provide.

- Delivering services that make a positive difference
- Building a leading culture
- Working together for improved performance
- Creating environments for individuals to thrive

We value and acknowledge the importance of our staff in realising the vision. We aim to establish a vibrant and positive workplace, a respectful and rewarding culture, and will invest in our staff through professional development and leadership opportunities. We will continue to focus on creating the conditions for each person working in our health service to perform at their best by harnessing new levels of ownership, productivity and innovation. Our staff will be better able to make decisions, improve processes and redesign care for our community.

We recognise the importance to implement and maintain transparency in clinical and corporate governance, robust risk management and effective performance management. We are committed to managing resources effectively and efficiently by delivering services within allocated budgets, ensuring value for money and achieving financial sustainability.

We will work cooperatively across the sub-region as well as with the Commonwealth and State governments, the Swan Hill Rural City Council, non-government and private sector organisations, stakeholders and community representatives to generate and influence positive health outcomes for our community. Clear roles and responsibilities across the sub-region will lead to improved performance and reduced duplication of resources. We will continue to advocate for improved infrastructure and facilities, to upgrade and redevelop our sites at Swan Hill and Nyah West to ensure better access to safe, quality health care now and well into the future. This focus on infrastructure extends to the introduction and integration of smart technologies with the aim of continuously improving patient safety, quality of care, clinical decision-making and enhanced health service performance.

We recognise that this plan is being developed in a period of uncertainty as we grapple with the impacts of a world wide pandemic (COVID-19). Despite levels of uncertainty we have undertaken a process of due diligence and actively engaged with staff, key stakeholders and community members to formulate a clear direction. We will continue to evaluate and review the plan on a regular basis to ensure connected care, best experience for our community now and well into the future.

We are confident the Leading With Purpose Strategic Plan 2021-2024 will produce a range of benefits to those who seek care from us and their families, staff, partners and community. We are excited by the possibilities that lay ahead of us as we embark on this ambitious plan.

2

### **Our strategic challenges**

The dynamic healthcare environment presents a number of unique challenges in a rural health care setting. We view these challenges as opportunities to foster greater innovation rather than simply accepting their impact. Our priority actions will contribute towards overcoming these barriers.

#### Our strategic challenges include:

#### Health needs are changing

The population across the sub-region is living with more life-style related illness or chronic disease such as diabetes and chronic airway disease, and their associated health conditions, risks and disability. Many people have more than one chronic disease, and these increase with age. With an ageing population we can expect a higher number of people with chronic disease needing a range of complex health care services. At the same time, as medicine and technology advance, community expectations for health care are growing.

There are also inequalities in health status and access to health services across the community. Aboriginal and Torres Strait Islanders, refugees and migrants still have poorer health, with lower life expectancy and experience disability more than the rest of the population. Combined with the need to improve access to a range of appropriate allied health services and appropriate services for people living with a disability.

Like many rural health service providers, health promotion, early intervention and primary and community based services need greater emphasis in sub-regional and cluster planning, development and management to keep people out of hospital and promote care as close to home as possible. Renewed emphasis on partnerships with others in the primary, community and aged care sectors is essential, as is supporting neighbouring health services to focus on improving the health of the population.

#### Population based issues

Significant geographical barriers as well as culturally diverse and changing populations exist, presenting challenges and opportunities related to:

- Provision of services for an aged population
- Ensuring we are culturally responsive
- Ensuring equity of access to services
- Affordability and feasibility of transport
- Alignment of community expectations with available care options.

#### Workforce capacity, capability, credibility and leadership

Our caregivers are the most valuable asset in delivering health services to the community and a critical element in the delivery of the health service vision and achieving key improvements in patient care and health outcomes more generally. Attracting and retaining a highly skilled workforce across multiple disciplines in a geographically remote location that are trusted and valued by the community and partners in the healthcare eco-system is challenging and will require additional energy and effort now and into the future.



#### More effective system enablers

Systems and business enablers such as information communication technology (ICT), corporate services, procurement and business intelligence systems are not as effective as they could be in supporting clinicians to continually improve care and patient outcomes and to drive SHDH's new COVID safe ways of working following the COVID-19 pandemic. There is also opportunity for further planning and collective purchasing across the sub-region and the opportunity to draw upon the Loddon Mallee's collective knowledge of clinical and health systems, evidence and policy.

Establishing high quality information systems and technology, to meet clinical and communication requirements will facilitate access to care as close to home as possible, reducing the requirement for people to travel to Swan Hill.

#### Infrastructure and capital redevelopment

Improving our health facilities in Swan Hill and Nyah West to meet new building and health care requirements is a key feature that will enable us to reach our full potential as a sub-regional service provider. Whilst this is an important enabler we must focus on ensuring facilities are well maintained and consider future services and demand requirements, developing strategies to address these gaps and guide any future infrastructure investment.

#### Significant shifts in the policy environment

Policy changes at the Commonwealth and State government level are magnified at the local levels in rural areas and have the potential to impact health service planning and delivery. Health care reforms combined with funding shifts may impact ongoing financial viability. Considerable work will be required to mitigate and manage financial risk and to harness greater efficiencies in service delivery that can be enabled through more efficient infrastructure and with service and system reconfiguration.



Our strategic response Swan Hill District Health, Leading With Purpose Strategic Plan 2021-2024

# Our purpose We exist to provide:

#### Connected care, best experience

For us this means:

- We deliver the best care experience to every person at every encounter
- We make our people feel connected, and provide the best environment for them
- We connect with each other, our partners and our community to share the right information

### **Our principles**

We have adopted five foundational principles that will guide the implementation of the strategic plan. At each decision making point, we will consider if the planned action supports these principles:

#### **Community is our primary focus**

The experience of our community will be outstanding, streamlined and safe, through:

- Involving our communities in making decisions about their health care
- Integrating multiple services so that the individual receives seamless, safe, high quality health care
- Ensuring patient safety is paramount

#### Being progressive is the key

Improvements in health care will be achieved by fostering and embracing innovation, based on emerging evidence

#### Investment is sustainable

Our services will be sustainable, affordable and minimise waste

#### Local presence, sub-regional leadership

We will develop strong regional health service partnerships across the sub region and broader Loddon Mallee region

#### Vibrant safe workplaces

Our workforce will know where we are going and will be inspired and supported to go there





### **Our Values**

Our core values define who we are and what is important to us as individuals and as a health service. They underpin our decision-making and actions. They guide the way we work with our patients, their caregivers, our service partners, within our communities and each other.

Through inclusivity, compassion, progressiveness and accountability, we work together to create a vibrant service environment where staff thrive, patients and their families and/ or caregivers receive safe, quality health care, and health services are sustainable for future generations. Our values are:

#### We are inclusive:

#### we provide an experience that welcomes and values everyone

- · Everyone feels connected and has a sense of belonging
- We respect others, including the diverse and cultural voices of our community
- Our work is built on co-operation, collaboration and communication.

#### We are compassionate:

## we respond to our people with understanding, empathy and kindness

- Our actions demonstrate our care and respect for others
- People feel safe in our care
- We foster a person centred approach through flexible, individualised care.

#### We are progressive:

#### we continue to strive for the best experience outcomes

- We are innovative in what we do
- We invite our people to contribute so we can strive to do better
- · We encourage growth professionally and personally.

#### We are accountable:

### we personally commit to taking responsibility for all of our decisions and actions

- We bring our best, we monitor the impact of our behaviours on others
- We will speak up and stop the course of action when something is not right
- We ensure that our resources are well managed to provide services into the future.

#### What 'Leading with Purpose' means

At SHDH we believe that over the next three years we need to step into our role as a system level leader to enable better health experiences and outcomes for the community.

#### What this means for our community

As a member of the community you can expect coordinated, safe high quality healthcare experiences and outcomes whenever and wherever you access healthcare services. Your journey through the healthcare system will be seamless, with clear communication occurring at each touch point. You will receive the right care, at the right place in a timely and safe manner.

#### What this means for SHDH

In our leadership role we are responsible for establishing formal and informal structures and agreements with neighbouring health services to strengthen service integration, enhance accountability and provide transparency. As a leader, SHDH will support the formation of clinical councils, service partnerships, regional workforce planning and structures that enhance clinical capability internally and across our neighbouring sub-regional healthcare service providers.

We will monitor performance and action opportunities for improvement. We will use the skill of the workforce, the physical infrastructure and funding to its fullest across the sub-region. We will focus on building our capability in the interests of our community.

The COVID-19 pandemic has provided SHDH with the opportunity to demonstrate its commitment to building the collective capability of its partners throughout response and recovery activities. This is just the beginning of SHDH Leading with Purpose.

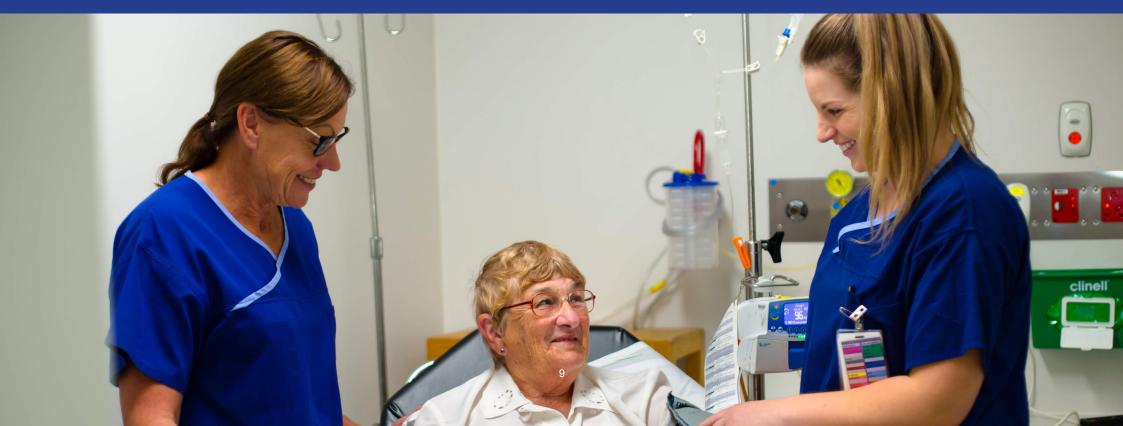


### **Our Priorities**

Strategic planning for us is about how we will aspire to achieve our purpose; it is our roadmap for the future. Our Governance Framework underpins Strategic Planning. It takes an integrated path to governance, which supports a joined-up approach to clinical, operational and corporate governancs. Committees defined in the framework have responsibility for monitoring and advising the Chief Executive Officer on strategic priorities for action and investment in a changing policy and service delivery environment.

Our four strategic priorities are based on analysis of who we are, what we need to achieve and what particular challenges exist for us, with the community as its heart. They are written to reflect our values and our underpinning desire to make a difference. Our four strategic priorities are:

- Priority one: Delivering services that make a positive difference
- Priority two: Building a leading culture
- Priority three: Working together for improved performance
- Priority four: Creating environments for individuals to thrive



### Priority one: Delivering services that make a positive difference

#### **Objective**

That the healthcare needs of our community are met by providing appropriate, safe, high quality healthcare experiences whilst maximising available resources and delivering services within budget.

#### Outcomes

Our community trusts us to deliver safe, high quality care and we take that seriously. We will overcome obstacles, find solutions and strive to deliver exceptional health outcomes across all of our services. At SHDH we want to build health services that will endure the test of time. We do this by relentlessly focusing on our community's health needs, building high quality, safe services and planning for the future. We are grounded by humility and driven by ambition. SHDH will know it is delivering services that make a positive difference when:

- Patient experience measures exceed expected targets
- Compliance with the accreditation and regulatory standards are achieved
- Increasingly care is provided in the most appropriate location
- Increased access to services provided close to the community
- Operating within the parameters of the clinical and surgical capability frameworks
- Services achieve or exceed performance targets

#### Actions

- Undertake a service review in aged care focusing on the entire aged care continuum
- Undertake a service review in primary care focusing on business development
- Undertake a service review in surgical and clinical services aligning with the Department of Health and Human Services frameworks, sub-regional and cluster planning
- Undertake a service review in Nyah West to better support comprehensive service delivery.

Service reviews involve looking at particular areas of service provision and determining strategically if and how the services should be delivered. A service review incorporates: understanding the need/ demand for the service, the patient journey, the patient experience, the model of care, the workforce configuration, the resource and infrastructure requirements and the underpinning business model configuration. Service reviews should provide Board Members with desirable, feasible and viable options to consider for operational implementation. Service Reviews also consider other service providers operating within the sub-region and region.

### **Priority two: Building a leading culture**

#### Objective

The right quantity; quality and skill mix of our workforce is matched to service delivery for the community needs.

#### Outcomes

At SHDH we make sure our workforce feel appreciated and valued. We celebrate our people and take time to stop and acknowledge how far we have progressed. Above all, we're a team. This means we show up for each other, act with empathy and bring our authentic selves to work every day. The people that work at SHDH are smart and smart people know you can always get better. We believe that staff time at SHDH should and does make them better healthcare professionals. SHDH will know it is building a leading culture when:

- Leaders are supported to make informed, evidenced based decisions using workforce planning and metrics
- Employee sentiment is monitored and improves over time
- A diverse workforce representative of our community is attracted and engaged
- Improvement in the combined recruitment score (vacancy, turnover and time to hire rates)
- Increased investment in staff education and training resulting in career pathway progression.

#### Actions

- Develop and implement a comprehensive workforce plan
  Develop and implement a workforce investment strategy
- Develop and implement a workforce investment strategy.



### **Priority three: Working together for improved performance**

#### **Objective**

Effective partnerships improve community outcomes, effectiveness and efficiency of the health services and sub-regional performance.

#### Outcomes

At SHDH we are proud to be leaders in healthcare service provision. We like the people we work with and genuinely enjoy helping one another succeed. We communicate internally and externally with candour, honesty and respect. An integral part of our culture is that we are committed to collaborate and work towards shared healthcare goals across the sub-region with our workforce, community, key stakeholders new and emerging. At SHDH we connect with community, partners and each other to drive success. Relationships deliver results because we can't do it without each other. SHDH will know it is **working together** *for improved performance* when:

- · Increased sub-regional self sufficiency score
- Reduced health service expenditure in areas where formal shared service agreements are in place
- Reduced length of stay at SHDH for patients from neighbouring health
  service providers
- Increased partnership agreements, joint funding submissions and joint health programs
- Increased community involvement in service design and decision making throughout the health service.

#### Actions

- Co-design and implement a community engagement approach
- Establish formalised shared service agreements with partner organisations focusing on efficiency and effectiveness gains
- Develop and implement formalised approaches to enhance service access throughout the sub-region.



### Priority four: Creating environments for individuals to thrive

### Objective

Virtual and physical environments support high quality, safe work practices, care environments and performance.

### Outcomes

At SHDH we build physical and virtual environments that support staff to work their best and become their best. We know that the physical environment contributes to the way we deliver care and the experience of our patients and their families. We intentionally design environments that support the best patient outcomes whilst assisting staff to undertake their role efficiently and effectively. SHDH will know that it is creating environment for individuals to thrive when:

- Increased telehealth consultation rates
- Infrastructure monitored and assessed through condition
  assessments and asset register
- Design documentation that incorporates data captured via the lived experience of staff and community
- Improved staff satisfaction levels with staff reporting that the physical and virtual environment supports high quality, safe work practices.

### Actions

- Develop and implement a digital health strategy in-line with projected digital maturation levels
- Establish opportunities to review and test modifications/ refurbishment recommendations in-line with the health service master plan.



### **About Swan Hill District Health**

We are a sub regional health service committed to providing the highest quality, safe and effective healthcare. We do this through the services we provide using the staff we employ to ensure we are best meeting community needs.

SHDH is a sub-regional health service providing care to a large, but sparsely populated area of Northern Victoria and South Western New South Wales. The Rural City of Swan Hill has a population of 10,000 people with the health service servicing a broader catchment population estimated at 35,000. SHDH services the communities of Swan Hill Rural City Council, Wakool in New South Wales and the more proximal populations in the Gannawarra and Buloke Shires.

SHDH provides services to support the complex medical, clinical and primary healthcare needs for the communities within the sub-region. SHDH provides a wide range of acute inpatient, medical, surgical, maternity services, emergency services, rehabilitation, aged residential, domiciliary, primary care, dental services and general practice, including outreach programs to several small outlying communities.

Jacaranda Lodge Nursing Home is located approximately 27 kilometres from the main health service campus in Nyah West and Logan Lodge is the residential aged care facility located in Swan Hill.

The issue of increasing health service demand and rising cost of health service delivery, which is attributed to the ageing population, increasing chronic disease and advances in health technology, present challenges to health service delivery. We are committed to working collaboratively with our partner agencies and are grateful to our partners for their ongoing willingness to collaborate enabling health and wellbeing outcomes for our local community.



### **Our services**

We are integral to the provision of comprehensive and responsive healthcare in the local and sub-regional community. We provide accessible acute, primary care, sub-acute and residential aged care services in hospital, residential and community based settings. Targeted health education and prevention programs to support the health service compliment clinical services. Promotion of wellbeing and individual responsibility and self-management are all encouraged and supported throughout service delivery to ensure connected care, best experiences.

The core services and programs we deliver are grouped into three themes:

Acute care	Aged care	Primary and Community Care
Medical Care Surgical Care Maternity Care Comprehensive Cancer Care Palliative Care Rehabilitation and Geriatric Evaluation Care Post Acute Care Transition Care Hospital in the Home Radiology Pathology Renal Dialysis Emergency Department	Residential Aged Care Adult Day Care District Nursing	General Practice Allied Health Health Promotion Advance Care Planning Alcohol and Other Drug Care Breast Care Nursing Children and Family Services Refugee Health Care Co-ordination Community Rehabilitation Counselling Care Dental Diabetes Care Mental Health Care Headspace Hospital Admission Risk Program

Whilst many of our services are universal and available to all community members, many are purposefully designed for those in the community who experience inequality in health outcomes and/or access to health services. These include:

- · People who live in areas of locational disadvantage
- Aboriginal and Torres Strait Islanders
- · People with a disability
- People isolated without a social support network
- Vulnerable children, young people and families
- · People from culturally and linguistically diverse backgrounds
- People from the LGBTIQ community

#### **Our workforce**

We have over 600 employees working across a wide range of service, programs and support functions. Our workforce work across the hospital, residential aged care and community settings, they are also very mobile, visiting patients in their homes and other settings.

The skill mix of our multidisciplinary workforce supports ongoing competency based training, specialised clinical services, graduate programs, student placements and internal supervision and mentoring.

# Our community Population

Our current population is 35,000 which includes Swan Hill and Wakool local government areas and the neighbouring communities across the sub-region. The Australian Bureau of Statistics (ABS) modelling shows continued decline in population numbers over the next ten years at a rate between 0.3%-1.5% per annum. Concurrent with the reduction in total population numbers is a projected 12% increase in the population in the Swan Hill Township, demonstrating population drift towards the larger centre. Despite the decline in population, people aged 70 years and over are expected to increase at an average of 1.8% per annum representing 20% of the total population.



#### Aged population

Compared to regional Victoria, Swan Hill and Wakool had a higher proportion of population aged 65 years and over and a lower proportion of population aged 44 years and younger. The proportion of individuals aged 65 years and above in the Swan Hill and Wakool catchment (25.4%) are significantly higher than the Victorian (15.6%) proportion of individuals aged 65 years and above.

# Aboriginal, culturally and linguistically diverse communities

Approximately 5.7% of the population of Swan Hill and 2.8% of the population of Wakool identify as being of Aboriginal or Torres Strait Islander background compared to regional Victoria at 1.5%. The 20-25 year old age group made up the largest proportion of the Indigenous population. The proportion of the population aged 65 years and over made up the smallest proportion of the population.

Approximately 12.6% of the population of Swan Hill Rural City Council are born overseas, with 12.4% of those individuals speaking a language other than English at home. The greatest portion of individuals come from Italy and India. Approximately 1.9% of individuals who come from overseas are refugees.

#### Area of disadvantage

The 2016 Social Economic Indexes for Areas (SEIFA) which is based on social and economic data from the 2016 census, providing a socio-economic snapshot of a geographical area. The Swan Hill Rural City Council is in the bottom 10% percentile of the State with an Index of Relative Socio-demographic Disadvantage score of 950, indicating extreme levels of disadvantage.

#### **Chronic disease**

The number and proportion of residents with diabetes increased between 2011 (4.5%) and 2016 (7%) resulting in a higher average compared to Victoria (4.8%).

Cardio Pulmonary Disease (19%) and Heart Disease (7%) across Swan Hill Rural City Council (19%) was on par when compared to the Victorian averages of (20%) and (7%) respectively.

Musculoskeletal system disease, arthritis, rheumatoid arthritis and osteoarthritis rates across Swan Hill Rural City Council (24%) were accumulatively higher when compared to the Victorian accumulative average of (21%).

Anxiety and depression across Swan Hill Rural City Council in 2016 was (34%) compared to the Victorian average (27%).

Residents of Swan Hill Rural City Council had obesity rates at (29%) and overweight rates of (50%) compared to the Victorian averages of (19%) and (51%) respectively.

Overall 27% of individuals in Swan Hill Rural City Council were likely to have two or more chronic diseases compared to the Victoria average of 25%. This data demonstrates that there is still much work to be done to ensure connected care, best experience for our community.





www.shdh.org.au



@eat.move.smile.