



East Metropolitan Health Service Clinical Services Plan Towards 2024 Summary



About this document

The East Metropolitan Health Service (EMHS) Board and Area Executive Group in December 2018 released the *EMHS Clinical Services Plan Towards 2024* (EMHS CSP). The plan will guide the delivery of health care services in EMHS, ensuring they are responsive to the needs of the community, while recognising our valued yet finite resources. This document provides a summary of the EMHS CSP.

The EMHS CSP is a step towards our vision of *Healthy People, Amazing Care – Koorda Moort, Moorditj Kwabadak*. It articulates how we plan for and deliver health care services in EMHS, aligning with the policy directions contained in a number of key national and state-wide documents.

The development of the EMHS CSP has been a journey of understanding:



- **Our Communities** – the characteristics of the EMHS population
- **Our Health Service** – a summary of the clinical services provided by hospitals and health services in EMHS.
- **Our Clinical Services** – the current and projected clinical service activity across EMHS by specialty groupings, and our current alignment with the *WA Health CSF 2014-2024*.
- **Our Care** – the perspectives and feedback of senior clinicians, consumers and carers/families regarding the care delivered by EMHS.

The EMHS CSP also recognises how **Our Enablers** (workforce, assets/infrastructure and ICT) underpin our priorities, and outlines **Our Implementation** approach towards delivering against the EMHS CSP. It sets out the Program of Work which will be implemented over the life of the plan to deliver against our clinical services priorities.

The coming years present opportunity to do things differently. By exploring and exercising innovation in health care planning and delivery, we look towards providing contemporary, patient-centred health care services that reflect best practice and ensure sustainable health care into the future.

We look forward to working with our people, our health care partners and our communities to deliver against the EMHS CSP, as we use it to realise our vision of ***Healthy People, Amazing Care – Koorda Moort, Moorditj Kwabadak***.

Our Journey

Consultation and evidence used to develop the EMHS CSP

Our Communities

- The EMHS population is projected to grow by approximately 26% by 2028, with the greatest growth forecasted in the South East health district (30%).
- There are high numbers of children and youth in the South East and Swan and Hills health districts, and particularly high birth rates in the South East health district.
- The EMHS older adult population is projected to almost double in ten years, with the greatest increase in the South East and Swan and Hills health districts.
- Poor health outcomes are observed among some groups within EMHS communities (e.g. people within Aboriginal communities, people experiencing homelessness who are mostly in the City health district, and/or the socially disadvantaged).

Our Health Service

- EMHS emergency, inpatient and outpatient activity has grown faster than its population.
- Observed growth in emergency presentations is having an impact on EMHS capacity to accommodate demand for inpatient, outpatient and theatre services within finite resources.
- Elective surgery activity demand is increasing, with some patients on the Elective Surgery Wait List waiting longer than clinically recommended in some specialties.
- Some patients on the outpatient waitlist are waiting longer than clinically recommended for their first appointment in some specialties.

Our Clinical Services

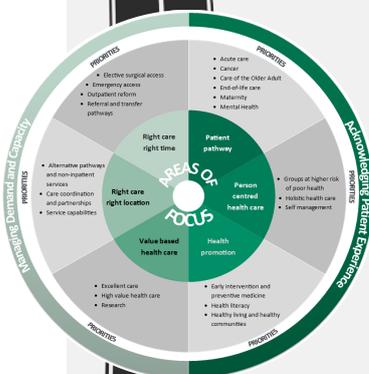
- Projected demand continues to show an increase in service utilisation compared to actual activity across a number of specialties.
- Observed growth in demand for mental health services is projected to continue increasing by 2024/25.
- There is a projected increase in demand for rehabilitation and palliative care services by 2024/25.
- For some specialties, further work is required to align clinical services to the 2024/25 clinical service role delineations (as defined in the *WA Health Clinical Services Framework 2014-2024*) and address fragmentation in service delivery.

Our Care

- Our clinicians acknowledged challenges with timely access to healthcare for patients, the importance of early intervention and the need to work within and outside of the hospital setting with key care providers to optimise the patient's health journey.
- Feedback on clinical service delivery from patients, carers and consumers focused on wait times, patient centred care and strengthening partnerships and interface with community services providers.

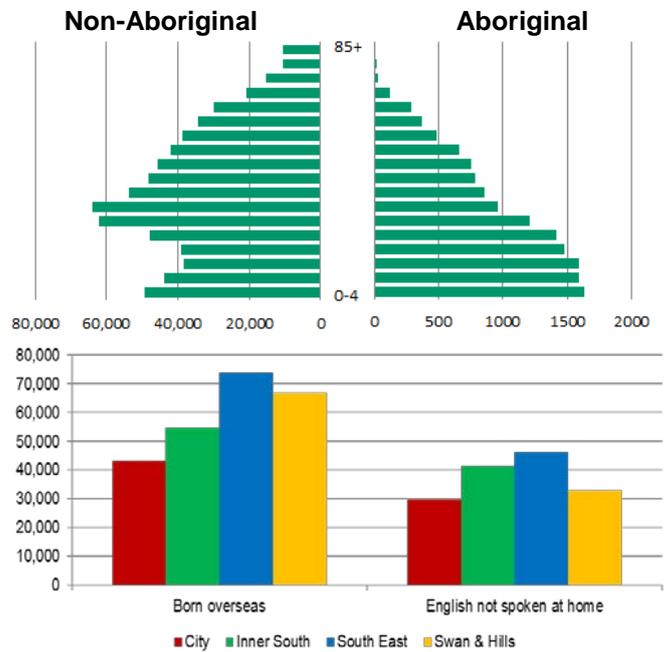
Our Priorities

- Our clinical service priorities (towards 2024) are represented in the **EMHS Clinical Services Priority Framework** (see Our Priorities for full-scale image), with our priorities organised into two priority themes:
 - **Managing demand and capacity** – which centres on the efficiency and effectiveness of health services, and
 - **Acknowledging patient experience** – which upholds the principles of patient centred health care.
- Consumers, clinicians, hospital-based staff and community service providers and partners were engaged at the Priorities Workshop in September 2018. Here, attendees collectively explored the core and common elements that contribute to positive health care experiences within the context of our priorities. Going forward, these elements will underpin the delivery of our Program of Work.



Our Communities

Our people



Hospitalisations



Causes of potentially preventable hospitalisations

that were higher among EMHS residents compared to the State:

- Chronic obstructive pulmonary disease
- Congestive cardiac failure
- Iron deficiency anaemia

Ischaemic heart diseases was the main cause of death among **45 + year olds**



Among **15-44 year olds**:

- Intentional self-harm
- Transport accidents
- Accidental poisoning



Women living in...

City and Inner South health districts had a **lower birth rate** than the State



South East health district had a **higher birth rate** than the State



Dialysis was the

Top cause of hospitalisation

Among 45 + year olds

Our Health Service and Clinical Services

Royal Perth Hospital

Royal Perth Hospital (RPH) is a tertiary hospital providing an Emergency Department (ED) and Intensive Care Unit (ICU) and an extensive range of clinical services including:



- adult major trauma
- complex and elective surgery
- highly specialised surgical services
- tertiary mental health services
- specialist medical services
- clinical support services, in line with its current service profile, which includes; allied health, imaging, pathology (PathWest), pharmacy, anaesthesia and theatres
- assessment and restorative care for older adults provided via contract at St John of God Mt Lawley.

Bentley Hospital

Bentley Hospital (BH) is a specialist hospital offering a range of clinical services including:



- comprehensive adult and older adult mental health services
- specific youth mental health service (East Metropolitan Youth Unit)
- rehabilitation and aged care
- low-risk maternity services
- low-risk, high volume same-day medical and surgical services
- ambulatory and community health programs
- clinical support services, in line with its current service profile, which includes; allied health, imaging (contracted on site), pathology (PathWest), pharmacy, anaesthesia and theatres.

Armadale Health Service

Armadale Health Service (AHS), incorporating Armadale Hospital and mental health services has an ED and ICU and delivers a range of clinical services including:



- general medicine and general surgery
- some specialty medical and surgical services
- rehabilitation and aged care
- maternity, paediatric and neonatal
- comprehensive adult and older adult mental health services
- renal medicine and dialysis
- ambulatory care
- clinical support services, in line with its current service profile, that includes allied health, imaging services (contracted on site), pathology (PathWest), pharmacy, anaesthesia and theatre and intensive care services.

Kalamunda Hospital

Kalamunda Hospital (KH) is a specialist hospital providing:

- specialist palliative care services
- same day endoscopy services for low risk low complexity patients
- clinical support services, in line with its service profile that includes some allied health; imaging on site; anaesthesia for day procedures; pathology (PathWest outreach); and pharmacy.



St John of God Midland Public Hospital

St John of God Midland Public Hospital (SJGMPH) operates as a public private partnership between the State and St John of God Health Care^a. The public hospital provides an ED and ICU, and delivers a range of clinical services including:

- allied health
- general medicine
- general surgery
- geriatrics
- mental health
- obstetrics and gynaecology
- orthopaedics
- outpatient services
- paediatrics
- rehabilitation



The SJGMPH building also includes 60 private beds and operating suites which are allocated to St John of God Midland Private Hospital. This capacity gives EMHS the option to respond to population growth estimates by negotiating and purchasing additional beds in the future.

Community and Population Health Programs

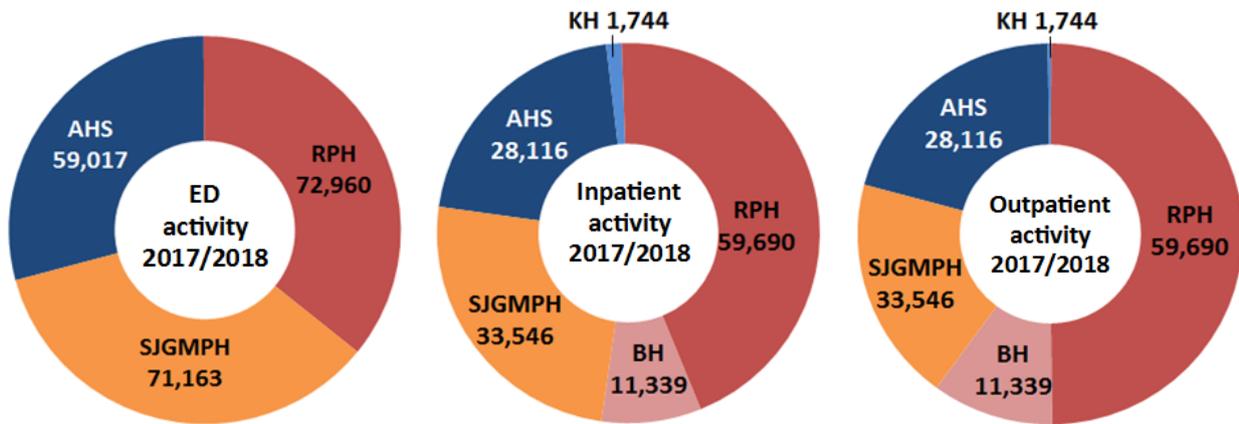
EMHS provides a range of community services to people both within the EMHS catchment and in the wider metropolitan area including community based mental health, Aboriginal health and health promotion services. There is a broad range of Community and Population Health Programs provided by EMHS, such as:

- Mobile Clinical Outreach Teams (Mental Health)
- State-wide Aboriginal Mental Health Service
- Aboriginal youth health
- Walyup Kworpading Koort (Healthy Heart)
- Moorditj Maarman (men's health)
- Moorditj Djena (nutrition and podiatry outreach service)
- Living Improvements for Everyone – management of chronic disease
- Smoking prevention.



^a For a contractual period of 23 years, requiring an annual notice outlining the volume and price for services to be purchased.

EMHS Patients

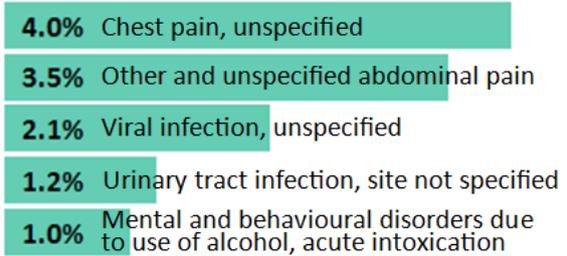


Emergency Department activity

ED presentation overview, 2017/18

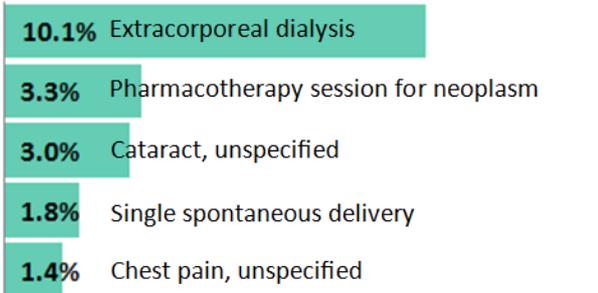


Top 5 ED presentation diagnosis codes, 2017/18

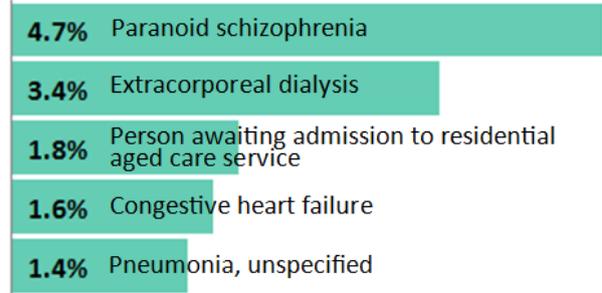


Inpatient activity

Top 5 reasons for same day separations, 2017/18

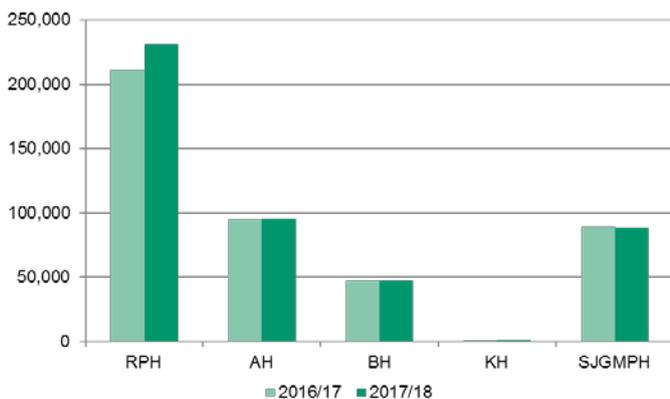


Top 5 reasons for bed days, 2017/18

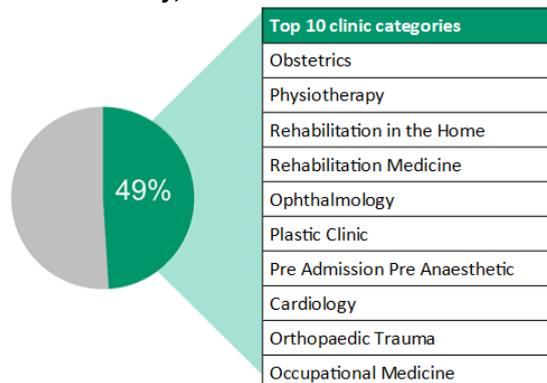


Outpatient activity

EMHS Outpatient service events

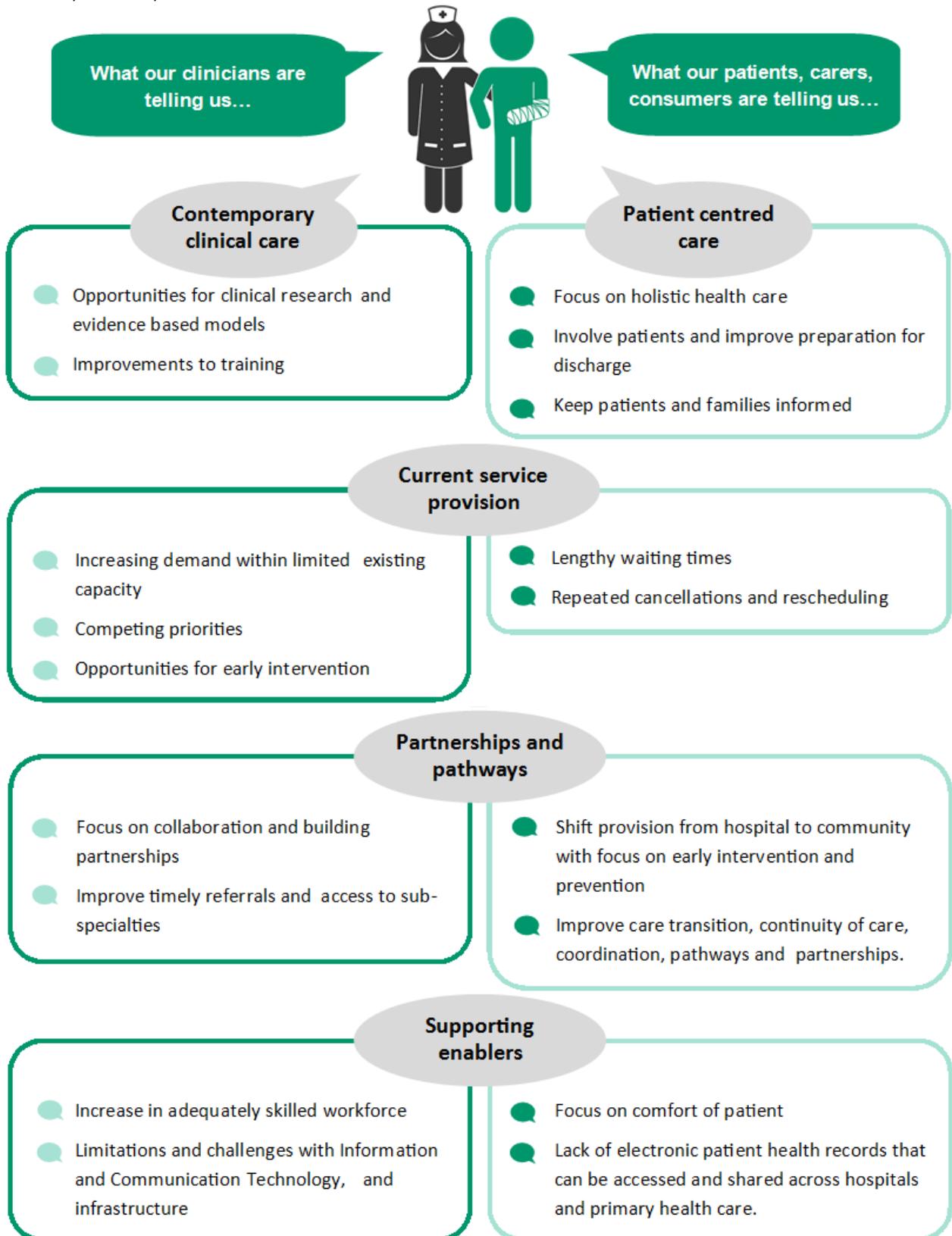


Top 10 attended Outpatient clinics account for 49% of activity, 2017/18



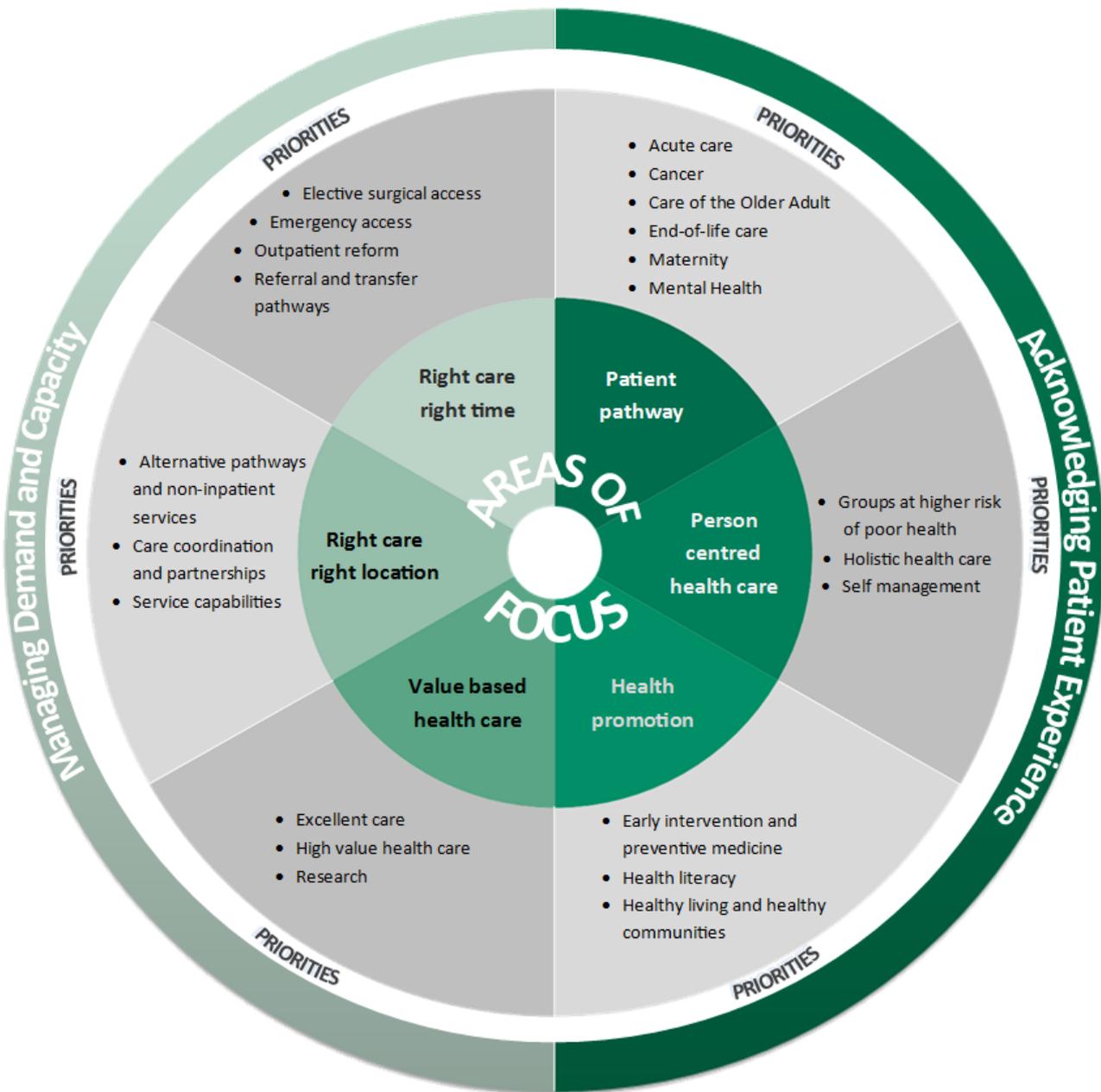
Our Care

In order to explore the challenges and potential opportunities in delivering care to our community, feedback was reviewed from senior clinical staff across EMHS, as well as patients, carers, and consumers.



Our Priorities

Along our journey we considered feedback in **Our Communities**, **Our Health Service**, **Our Clinical Services**, and **Our Care**, to arrive at a number of priorities for clinical services across EMHS that aim to sustainably manage demand within existing resources. Our clinical services priorities are visually depicted in the EMHS Clinical Services Priority Framework (see below), which is comprised of twenty-two clinical service priorities organised into six areas of focus and two priority themes.



Managing Demand and Capacity
acknowledges the increasing demand for health care services

Patient Experience
acknowledges the importance of patient centred care

What are we striving for?

	Area of Focus	Clinical Services Priority	What are we striving for?
Managing demand and capacity	Right care at the right time	Elective surgical access	Improved Elective Surgery Wait List management and better surgical patient flow.
		Emergency access	Improved management of patients that present to Emergency Departments to enhance access to timely emergency care.
		Outpatient reform	Efficient and productive outpatient service delivery to improve patient care.
		Referral and transfer	Streamlined referral and transfer pathways within and between tertiary and general hospital sites, and community services.
	Right care at the right location	Alternative pathways and non-inpatient services	Greater access for consumers to EMHS non-inpatient health services and increased community awareness of alternative pathways to reduce pressure on emergency demand.
		Care coordination and partnerships	Strengthened interface between acute and community based care providers to promote care coordination for patients.
		Service capabilities	Clinical services that are responsive to changing demographics and service utilisation patterns, working within the context of the <i>WA Health CSF 2014-2024</i> .
	High value health care	Excellent care	Excellence in health service provision within EMHS.
		High value health care	Sustainable health care delivery through the provision of high value services and programs.
		Research	Improved health care driven by evidence based research.
Acknowledging patient experience	Strengthening the patient pathway	Acute care	Enhanced timely patient flow and optimal pathways for patients who present acutely to EMHS hospitals.
		Cancer services	Optimal health care pathways for cancer patients residing within the EMHS catchment.
		Care of the older adult	Optimal health care pathways for older adults, including care in the community, pre and post hospitalisation.
		End-of-life care	Strengthened patient pathways associated with End-of-Life, based on implementation of the <i>WA End-of-Life and Palliative Care Strategy 2018-2028</i> .
		Maternity	Integrated service delivery for women birthing in EMHS.
		Mental health	Strengthened mental health models of service delivery, with a focus on service provision in the community.
	Patient centred health care	Groups at higher risk of poor health	Aligned clinical services delivery to better meet the needs of those within EMHS communities at high risk of poorer health outcomes.
		Holistic health care	Strengthened holistic health care to address social and cultural needs and involve the patient, family and carers in decision making regarding their health care.
		Self-management	Improved self-management to prevent re-admission, particularly for patients with chronic conditions, older patients and people accessing mental health services.
	Health promotion	Early intervention and preventive medicine	Preventive medicine and early intervention embedded into everyday practice to increase focus on prevention of injury and disease.
		Health literacy	Increased health literacy among consumers.
		Healthy living and healthy communities	Healthy lifestyles and healthy community environments within the EMHS catchment.

Our Implementation

Throughout 2019, focus will remain on:

- improving timely access to elective surgery and emergency services
- development of EMHS service models for end-of-life/palliative care and health care of the older adult
- development of an EMHS Cancer Strategy, and EMHS Maternity Services Plan
- development of site-based clinical service plans for the individual hospitals. As a contracted service, the CSP for SJGMPH will be progressed through their own processes.



The full EMHS CSP document can be made available on request or internally can be found on the [Planning, Innovation and Commissioning intranet page](#).

This document can be made available in alternative formats on request.

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