# THE LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

# GOVERNMENT RESPONSE TO THE STANDING COMMITTEE ON HEALTH, AGEING, COMMUNITY AND SOCIAL SERVICES REPORT NO 5

**INQUIRY INTO ANNUAL AND FINANCIAL REPORTS 2013-14** 

Presented by Mr Andrew Barr MLA Chief Minister

# **Government Response**

Standing Committee on Health, Ageing, Community and Social Services Report No 5 – Inquiry into Annual and Financial Reports 2013-14

# **Introduction**

The Annual Reports of All ACT Government agencies are referred to the Standing Committees of the ACT Legislative Assembly for examination and report.

The Standing Committee on Health, Ageing, Community and Social Services reviewed annual reports for:

- Community Services Directorate; and
- Health Directorate.

The Committee made 14 recommendations.

# **Response to Committee Recommendations**

#### Recommendation 1

2.18 The Committee recommends that the Community Services Directorate improve communication and liaison with community sector organisations around how grant indexation estimates are calculated, what the estimates are each year, as well as advising those organisations about the final indexation rate as early as possible.

# **Government Response - Noted**

Grant indexation rates are published each year in Budget Paper Three, and are released on the day that the budget is delivered. Due to confidentiality, the indexation rate cannot be provided earlier than this date. Grant indexation is constructed as a composite of the Wage Price Indexation (80%) and the Consumer Price Indexation (20%), as published each quarter by the Australian Bureau of Statistics. The general practice is to inform peak and other representative agencies of the indexation rate. Additionally, indexation rates, as published each year, are represented in 1<sup>st</sup> quarter payments and the payment advice that goes to all funded agencies with the 1<sup>st</sup> quarter payment in early July each year.

#### **Recommendation 2**

2.25 The Committee recommends that the ACT Government examine and consider further ways of increasing awareness of and involvement in the work of the Aboriginal and Torres strait Islander Elected Body.

# **Government Response – Agreed in principle**

The ACT Government provides resources to support the Elected Body to facilitate, at a minimum, four community forums each year. The ACT Government has also provided resources for the creation of promotional materials to increase the awareness of the Elected Body and their work within the community.

The ACT Government continues to work with the Elected Body to ensure that Directorates consult with the Elected Body on relevant ACT Government initiatives.

# **Recommendation 3**

2.32 The Committee recommends that ACT Government consider better ways of collecting data in relation to Women's Information and Referral Centre (WIRC) contacts and that the Community Services Directorate investigate ways of collecting this data so as to provide better future reporting of outreach and other contacts through WIRC.

#### **Government Response** - Agreed

Data on outreach contacts is currently collected by the Community Services Directorate. Methodology is being developed to track trends in relation to information seeking.

#### **Recommendation 4**

2.41 The Committee recommends that the Community Services Directorate develop appropriate, translated information on transport options for seniors from Canberra's culturally and linguistically diverse communities.

# **Government Response** - Agreed

The Community Services Directorate will work with the Council on the Ageing (COTA) to develop appropriate and translated information on transport options for seniors from Canberra's culturally and linguistically diverse communities. Information on transport options for seniors from diverse communities is promoted on the ACTION bus services website, ACTION buses (posters and screens) and via the Multicultural and Senior Enews Bulletins.

#### **Recommendation 5**

2.45 The Committee recommends that the Community Services Directorate develop key performance indicators to measure the effectiveness of seniors programs funded through government grants.

#### **Government Response - Noted**

The *Participation (Seniors) Grant* program requires successful recipients to complete a project reporting as part of the acquittal process. This allows for qualitative information to be collated to measure the effectiveness of the grant programs.

#### **Recommendation 6**

2.61 The Committee recommends that the ACT Government and Community Services Directorate consider ways of to improve community and commercial tenant satisfaction levels with community facilities.

# **Government Response** - Noted

The community facilities portfolio of buildings transferred to ACT Property Group, CMTEDD in 2014-15. Some of the concerns will be addressed through this change in arrangements and ACT Property Group will look at where services to tenants can be improved to increase satisfaction levels.

#### **Recommendation 7**

2.66 The Committee recommends that the ACT Government report on re-substantiation rates in future Community Services Directorate Annual Reports.

# **Government Response** - Agreed

Re-substantiation rates in the ACT are currently reported in the CSD Annual Report

#### **Recommendation 8**

2.68 The Committee recommends that the ACT Government investigates ways to reduce the number of Aboriginal and Torres Strait Islander children in out-of-home care.

# **Government Response - Agreed**

Under A Step Up for Our Kids, the ACT government's new five year strategy to reform out of home services includes the Strengthening Families Domain which will support the Government in its commitment to identifying ACT specific strategies for reducing the over-representation of Aboriginal and Torres Strait Islander young people in out of home care.

The Whole of Government Aboriginal and Torres Strait Islander Agreement further secures the government's support to address this issue.

#### **Recommendation 9**

2.69 The Committee recommends that the ACT Government investigates ways to increase and improve foster care availability, including an increase in the number of salaried foster carers.

# **Government Response - Agreed**

Under A Step Up for Our Kids, the ACT government's new five year strategy to reform out of home services, the recruitment and retention of foster carers will be supported through a number of initiatives and service system changes. This includes linking with work underway nationally on the development of options for salaried foster care arrangements.

# **Recommendation 10**

3.9 The Committee recommends that the ACT Government consider annual benchmarking for emergency department timeliness against peer group hospitals to provide a better indication of how the ACT is performing compared to similar hospitals.

# **Government Response** - Agreed

ACT Health will endeavour to incorporate national peer group hospital results into our annual report for benchmarking purposes.

Currently, ACT Health does not have access to national datasets for the purpose of generating our own national comparative figures. As such, ACT relies on data that is made available to jurisdictions via national publications.

ACT Health currently sources national peer group results and individual hospitals performance results from federal bodies such as the Australian Institute of Health & Welfare (AIHW) and the National Hospital Performance Authority (NHPA) annual hospital publications retrospectivity.

As these national publications can often take some time before they are made available to jurisdictions, ACT Health cannot guarantee the inclusion of the most recent national data into its annual report.

Nevertheless, ACT Health will incorporate historic publicised national results into our annual report as per data availability.

#### **Recommendation 11**

3.19 The Committee recommends that the ACT Government consider including high-level 'frequent flyers' with the Human Services Blueprint program and the Strengthening Families program.

# **Government Response** - Agreed

The Strengthening Families Initiative is a flagship program of the Human Services Blueprint designed to provide a tailored response to families with a high level of complexity and need. This initiative is well positioned to respond to this recommendation.

#### **Recommendation 12**

3.20 The Committee recommends that ACT Government consider establishing targets to measure how effectively diversion to other health care and human services management programs is working to reduce frequent re-presentations at emergency departments.

# **Government Response - Agreed in principle**

ACT Health is working with the ACT Primary Health Network (PHN) (formerly ACT Medicare Local) to develop initiatives which are aimed at reducing pressure on Emergency Departments by providing better community based options. This initiative will initially focus on those with chronic conditions and those who present regularly to Emergency Departments. Further extension will be determined following an evaluation of the work with the ACT PHN.

# **Recommendation 13**

3.32 The Committee recommends that ACT Government look to revise its information systems promptly in order to facilitate the recording and reporting of timeliness measures for non-elective surgery.

# **Government Response - Agreed**

This recommendation is currently a high priority for ACT Health. ACT Health is working on ways to improve the capturing and reporting of non elective surgery information to provide greater transparency in this area.

#### **Recommendation 14**

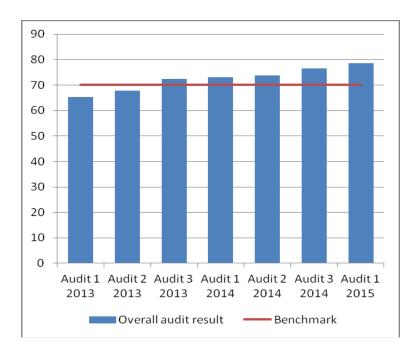
3.37 The Committee recommends that the ACT Government undertake additional efforts to ensure that hospital staff comply with hand washing guidelines.

# **Government Response - Agreed**

ACT Health strives to achieve continuous improvements in all areas including compliance with hand hygiene requirements.

Since 2010 the Hand Hygiene Program at Canberra Hospital and Health Services (CHHS) has been coordinated via the Infection Prevention and Control Unit (IPCU) at Canberra Hospital, and has involved a multi-factorial approach to hand hygiene compliance ranging through education, audit and feedback, promotional activities, equipment and supplies, and focused area or unit specific intervention, with specific examples listed below. During this time the Hand Hygiene program has not only expanded significantly across the health service, but has also resulted in a steady increase in hand hygiene compliance (see graph), although further improvement is required, especially among Medical Practitioners.

Following each audit period the IPCU analyses the results according to the ward area, moment of hand hygiene and type of healthcare worker, to determine the areas to target with specific interventions prior to the next audit cycle. Whilst the IPCU has been essential in coordinating the program, the importance of individual ward areas and healthcare worker groups in leading and driving the program at a local level needs to be recognised.



#### **Program**

 CHHS run the hand hygiene program as per the '5 moments' set out by Hand Hygiene Australia in conjunction with the Commission on Safety and Quality.

- The program now takes in 21 wards/units across the service, leaving only three areas which will be on the program by the third and final round of 2015.
- All staff undertake essential infection prevention and control training and to date for 2015 2500 staff have been trained in the '5 moments of Hand Hygiene' and infection control practices. This number includes doctors, nurses and allied health.
- Round 1 of 2015 involved 18 units with a total of 6091 moments collected, with an overall rate of 78.7 per cent being achieved.
- IPCU run auditor training monthly successful completion of which requires passing an exam to ensure the data collected is valid and accurate.
- Each ward/unit collects their own moments and this has been an effective way to collect the data as it ensures staff own the information within their unit. They also see and handle problems or issues and address them as they arise, which is a more effective way to learn.
- In addition to the national hand hygiene program, ACT Health run an auditing process of which the hand hygiene snapshot is a part. The snapshot reflects the national program and allows auditing to take place in the community and the outpatient setting.
- Alcohol hand rub is readily available across
   ACT Health to make it easy to perform hand hygiene. It is available at the entry to wards, point of use within wards and in all outpatient settings.

# Interventions include:

- International Hand Hygiene Day (children from Woden Valley Childcare Centre helped to raise awareness); International infection control day in October (wear pink t-shirts and encourage wards to hold hand hygiene awareness days, e.g. 10A and women's and children often hold pink days); Infection control, 'Bug Busters' and hand hygiene newsletters are circulated every month; IPCU nurses provide on-the-spot positive and constructive feedback to staff from all disciplines.
- Feedback from each audit period is provided to those wards/units that have been part of the Hand Hygiene program, including compliance rates and graphs to display.
- Education and promotion is provided to wards/units that don't meet the national benchmark during an audit period.
- The Infection Control have fun days to promote hand hygiene and good infection control practices, e.g. an annual 'Bake off' with the theme of 'My Hospital Rules'.
- 'No touch' hand hygiene stations are situated in all foyers and entry points across the ACT Health.
- A DVD has been developed and is on a replay loop in the foyer (this DVD was based on Chesterfield Hospital in the UK).

Skin assessment service is provided by infection control to ensure staff who develop skin irritations are reviewed.