

A photograph of three surgeons in an operating room, wearing blue scrubs, masks, and caps. They are focused on a patient. The scene is lit by bright surgical lights. A large white circle with a colorful border is overlaid on the right side of the image, containing the report's title and subtitle. At the bottom right, there is a logo for the Tasmanian Government.

OUR
HEALTHCARE
FUTURE

Delivering our elective surgery plan

Progress report on Year 1
of the Statewide Elective Surgery
Four-Year Plan

August 2022

Copyright notice and disclaimer

Copyright in this publication is owned by the Crown in Right of Tasmania, represented by the Department of Health.

Information in this publication is intended for general information only and does not constitute professional advice and should not be relied upon as such. No representation or warranty is made as to the accuracy, reliability or completeness of any information in this publication.

Readers should make their own enquiries and seek independent professional advice before acting on or relying upon any of the information provided.

The Crown, its officers, employees and agents do not accept liability however arising, including liability for negligence, for any loss resulting from the use of or reliance upon information in this publication.

© State of Tasmania August 2022

Contents

Summary of Year 1 Progress	2
Completed strategies	4
Completed infrastructure & equipment strategies	4
Completed strategies to partner with the private sector	6
Completed reform & service enhancement strategies	7
Completed Enhanced clinical engagement strategies	7
Ongoing and new strategies	8
1. Infrastructure & equipment strategies	8
2. Workforce strategies	12
3. Strategies to enhance surgical support services	14
4. Strategies to partner with the private sector	15
5. Reform & service enhancement strategies	16
6. Enhanced clinical engagement strategies	19

Summary of Year 1 Progress



More activity was delivered than ever before

In 2021-22, THS delivered a record number of elective surgical admissions. This is a significant achievement in the middle of the COVID pandemic.

The waitlist reduced

The additional activity reduced the wait list and the number of patients waiting longer than clinically recommended.



Partnerships with private hospitals were strengthened

The increase in admissions was supported by increased private sector outsourcing, which was organised by public hospital teams dedicated to selecting, assessing, and following up suitable patients.

Capacity was built in our public hospitals

Infrastructure was built and equipment bought that will increase our public hospitals' capacity to deliver additional elective surgery and endoscopies over the next few years.



What happened in Year 1

1,749 more admissions were delivered

20,293 elective surgery admissions were delivered, or 1,749 admissions (9.4%) above volume delivered last year.

1,790 fewer patients are on the wait list

The wait list reduced from 11,175 to 9,385 patients, a reduction of 1,790 (16.0%).

924 fewer patients have waited too long

Patients who have waited longer than clinically recommended reduced from 5,471 to 4,547, a reduction of 924 (16.9%).

1,952 more public patients were treated by private hospitals

The private sector delivered 6,475 admissions, or 1,952 admissions (43.2%) above the volume delivered last year.

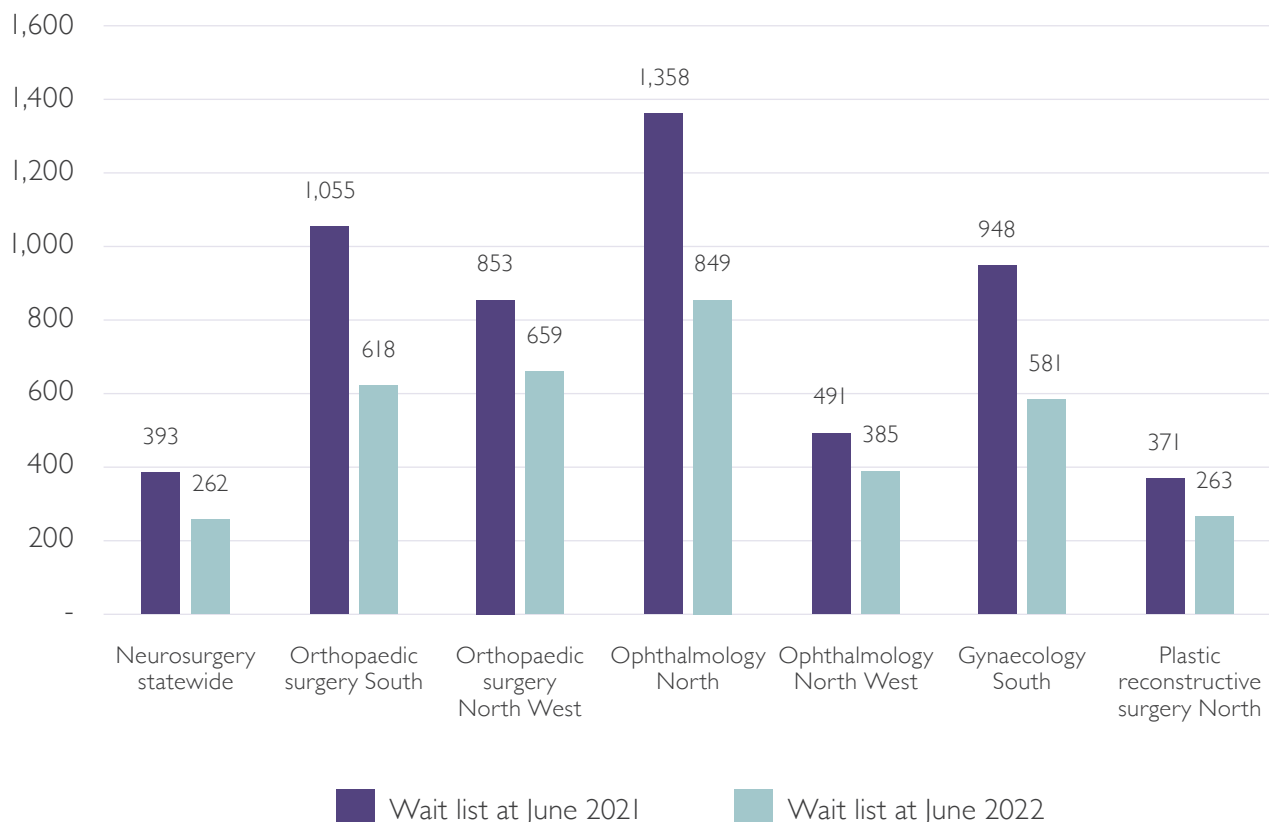
1,514 fewer patients are waiting for an endoscopy

The endoscopy wait list reduced from 8,848 to 7,434 patients, a reduction of 1,514 (16.0%).

Stand-out wait list improvements over the 12 months between June 2021 and June 2022

- 131 fewer patients waiting for Neurosurgery statewide, which includes back surgery
- 437 fewer patients waiting for Orthopaedic Surgery in the South and 194 fewer in the North West, which includes hip and knee replacements
- 509 fewer patients waiting for Ophthalmology in the North and 106 fewer in the North West
- 367 fewer patients waiting for Gynaecology in the South
- 108 fewer patients waiting for Plastic and Reconstructive Surgery in the North

Stand-out wait list improvement between June 2021 and June 2022 (number of patients waiting)



Completed Strategies

Completed Infrastructure & Equipment Strategies

INFRASTRUCTURE PROJECT COORDINATOR

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT	
I.1	<i>STATEWIDE</i> - Engage dedicated Logistics Coordinator resource	Coordinate elective surgery capacity-building projects and equipment needs across all public hospitals	Department of Health Policy, Purchasing, Performance and Reform and Infrastructure Services	Sep 2021	Completed

LGH INFRASTRUCTURE

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT	
I.2	<i>LGH</i> - Refurbishment of the 28-bed medical ward on Ward 3D	Reopen Ward 3D to expand general medical bed capacity to reduce the number of non-surgical patients occupying surgical beds	Launceston General Hospital and Infrastructure Services	2021-22	Completed
I.4	<i>LGH</i> - New Paediatric Unit on Ward 4K	Add an additional 13 beds which will support additional elective surgery throughput for patients under 18 years of age	Launceston General Hospital and Infrastructure Services	2021-22	Completed
I.5	<i>LGH</i> - Capacity expansion of the Sterilising Department (SD) including the redevelopment of the current footprint	Extend the SD footprint into the Level 5 void to create loan kit store and redevelop and refurbish the current SD footprint to accommodate additional decontamination space for scopes and probes	Launceston General Hospital and Infrastructure Services	Quarter 2 2021-22	Completed

NORTH WEST INFRASTRUCTURE

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
I.14 NWRH - Additional emergency theatre list running five mornings per week	Additional emergency theatre sessions will reduce the number of elective list cancellations and help support provision of: <ul style="list-style-type: none"> • Trans Oesophageal Echocardiograms • Gastroenterology • Oncology Insertion of Infusaports/ Percutaneous Endoscopic Gastrostomy • Respiratory-Bronchoscopy • Emergency surgery • Mental Health-Electroconvulsive Therapy 	North West Regional Hospital	2021-22 for planning phase	Completed
I.15 NWRH - Refurbish Theatre 4 and endoscopy reprocessing areas	Increase endoscopy capacity in the North West Regional Hospital	North West Regional Hospital and Infrastructure Services	2021-22	Completed
I.17 NWRH - Increase equipment requirements to deliver additional surgical activity	Coordinate purchase and supply of capital equipment requests inclusive of: <ul style="list-style-type: none"> • CSD low temperature washers • Anaesthetic machines • Diathermies • Endoscopes • CSD instrument tracking system • Monitors • High level air filtration system • Negative/positive pressure interchangeable manual control system 	North West Regional Hospital and Infrastructure Services	2021-22	Completed

RHH INFRASTRUCTURE

	ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
1.20	RHH - Increase to 23 general medical beds on Ward 2A	Action completed	Royal Hobart Hospital	2021-22	Completed
1.21	RHH - Additional 24 beds (19 surgical and 5 medical) on Ward 6A to form a new Trauma and Acute Surgical Unit	Develop staffing requirements and models of care	Royal Hobart Hospital	Quarter 1 2021-22	Completed
1.23	RHH - 4 additional medical beds for Older Persons Unit	Commence recruitment processes and open beds as staffing levels increase	Royal Hobart Hospital	Quarter 1 2021-22	Completed
1.24	RHH - Extended 24/7 operation for the 6-bed Mental Health Short Stay Unit (MHSSU)	MHSSU has been open 24/7 from 12 May 2021 and opened all 6 Beds by 24 May 2021	Community, Mental Health and Well-being	2021-22	Completed
1.27	RHH - 4 additional beds for a Paediatric Short Stay Unit	These are medical beds for children aged 3 months to 14 years presenting to ED who meet selection criteria, with a stay less than 24 hours. Goal is to prevent long waits in ED for children, e.g., children waiting for test results for gastroenterology, asthma, or head injury.	Royal Hobart Hospital	Quarter 1 2021-22	Completed

Completed strategies to partner with the private sector

	ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
4.2	STATEWIDE - Development of a State-wide Ophthalmology Contract with the Private Sector	Eyes Contract (DOH-5863H - Provision of Eye Surgery Services) for inpatient surgical services	Department of Health	In place 1 July 2020	Completed
4.3	STATEWIDE - Development of a State-wide Elective Surgery Contract with the Private Sector	Elective Surgery Contract (DOH-5900 - Elective Surgery Services) for inpatient surgical services	Department of Health	In place 1 July 2021	Completed
4.4	STATEWIDE - Seek submissions from the private sector to provide initiatives that support the public sector to deliver services to the Tasmanian community	Written proposals to be received and assessed by the Department and letters of intention provided to the private hospitals in line with the Government's 100-day commitment. This includes proposals to assist our public hospital sector to meet the elective surgery schedule	Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals	2021-22. Some arrangements may continue into 2023.	Completed

Completed reform & service enhancement strategies

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT	
5.7	STATEWIDE - Hip fracture pathway	Develop an evidence-based hip fracture clinical pathway to meet the Hip Fracture Clinical Care Standards released by the Commission on Safety and Quality in Healthcare, to improve health outcomes and timelier discharge	Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals	Emergency Dept Clinical Pathway completed 2020 and is in use Inpatient through to discharge component to be completed by Dec 2021	Completed
5.8	STATEWIDE - State-wide guidelines for the management of osteoporosis	Develop state-wide guidelines that will improve patient management on discharge to reduce re-admission through prevention of secondary fractures	Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals	2021-22	Completed
5.10	STATEWIDE - Direct Access Endoscopy Process - Guidelines, Protocols etc	Formalise and streamline direct access to endoscopy procedures so that patients do not have to be referred to outpatient clinics first. This removes a major waiting point for patients and improves timely access to endoscopy. This will be achieved through formally agreed state-wide clinical criteria.	Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals	2021-22	Commenced
5.11	STATEWIDE - Venous Thrombo-Embolism (VTE) prevention working group	Establish state-wide VTE working group to agree on evidence-based protocol, an overarching guideline, and practical clinical tools to meet the VTE Clinical Care Standards. This will reduce potential complications of surgery and further reduce length of stay.	Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals	2021-22	Completed

Completed Enhanced clinical engagement strategies

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT	
6.3	STATEWIDE - Establish Tasmanian Trauma Network	Trauma injury is an area of high demand for surgical and perioperative services. Along with its work to drive clinical improvement, the Network will also support delivery of the trauma surgical program. Tasmanian Trauma Network has been established.	Department of Health	Ongoing	Completed

Ongoing and New Strategies

I. Infrastructure & equipment strategies

LGH INFRASTRUCTURE

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT	
I.3	LGH - Expanded capacity of Short Stay Surgical Unit beds	Short Stay Surgical Unit beds to be opened 7-days, with overnight beds increased from 8 to 12 to support additional elective surgery	Launceston General Hospital	Ongoing	In progress - this project forms part of the LGH Masterplan Implementation Program.
I.6	LGH – Open an additional I.5 Operating Room Suites (ORS) to fully utilise 8 in-hours theatres to work at capacity 5 days/week, including 2 emergency theatres & 6 elective theatres	Staff and refurbish the 2 oldest theatres within ORS with appropriate infrastructure and capital equipment to support the full utility of the LGH ORS in a staged approach	Launceston General Hospital and Infrastructure Services	Ongoing	In progress - this project forms part of the LGH Masterplan Implementation Program.
I.7	LGH - Optimise the current Orthopaedic Clinic footprint to accommodate changing models of care and increased workload	Redevelop the orthopaedic clinic to allow for the inclusion of Joint Assessment Teams and additional clinic spaces for intended additional throughput	Launceston General Hospital and Infrastructure Services	Ongoing	In progress - this project forms part of the LGH Masterplan Implementation Program.
I.8	LGH - Create space for additional endoscopy within the current Day Procedure Unit (interim whilst Master Plan progresses)	Redesign the Day Procedure Unit model of care to exclude current services that can be accommodated in a specialist clinics environment	Launceston General Hospital and Infrastructure Services	Ongoing	In progress - this project forms part of the LGH Masterplan Implementation Program.

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
I.9 LGH - Master Plan Level 5 Surgical Services Development	Ongoing master planning for the development of LGH Level 5 for all surgical services, increasing Operating Room Suite and endoscopy capacity with shared support services, as well as inpatient and outpatient zones	Launceston General Hospital and Infrastructure Services	Beyond 2024–25	The redevelopment of Level 5 to create a consolidated theatre complex will be progressively delivered over the life of the LGH Masterplan Implementation Program.
I.10 LGH - Master plan options to integrate with co-location of Calvary	Work with infrastructure services to align Calvary plans with LGH surgical and medical needs considering very close proximity to LGH Operating Room Suite	Launceston General Hospital and Infrastructure Services	Ongoing	During Stage 2 of the LGH Precinct Masterplan Implementation Program, Calvary Health Care will begin construction of its new co-located private hospital. The Department of Health will collaborate with the Calvary Health Care to achieve efficiencies and alignment of our respective construction programs.

NORTH WEST INFRASTRUCTURE

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT	
I.11	NWRH – Establish additional medical beds to service demand and reduce medical patients occupying surgical beds	Increase current medical bed capacity from 40 beds to 47 beds	North West Regional Hospital and Infrastructure Services	Ongoing	This action is being considered as part of the North West Hospitals Masterplan, currently under development.
I.12	NWRH - Establish a Short Stay Surgical Unit	8 Beds to be quarantined for surgical patients	North West Regional Hospital	Ongoing	This action is being considered as part of the North West Hospitals Masterplan, currently under development.
I.13	NWRH - Establish post-operative high dependency beds in the surgical ward	Establish 4 beds to allow post-operative close observation to reduce requirement of current ICU/HDU beds. Quarantined for surgical patients	North West Regional Hospital	Ongoing	This action is being considered as part of the North West Hospitals Masterplan, currently under development.
I.16	NWRH - Increase outpatient capacity for pre- and post-surgical assessments	Investigate short-and long-term options to support outpatient increases in: <ul style="list-style-type: none"> • Cardiology • Respiratory • Gastroenterology • Elective surgery pre- and post-surgery assessments, for inhouse and brokered surgery • Allied health 	North West Regional Hospital	Ongoing	This action is being considered as part of the North West Hospitals Masterplan, currently under development.
I.18	MCH - Commission overnight surgical bed capacity	Investigate infrastructure requirements and determine staffing requirements Flex up capacity as and when required	Mersey Community Hospitals and Infrastructure Services	Ongoing	This action is being considered as part of the North West Hospitals Masterplan, currently under development.
I.19	MCH - Refurbishment of theatre and outpatients rebuild	As per North West Regional Hospital and Mersey Community Hospital Masterplans	Mersey Community Hospitals and Infrastructure Services	Nov 2024 (practical completion, Dec 2024 operational readiness)	In progress

RHH INFRASTRUCTURE

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
I.22 RHH - Extended recovery capacity for close observation after surgery – 6 to 10 beds	<p>2 beds to be opened in August 2021, 7 days per week.</p> <p>Move Elective Post-Operative Care Unit patients to the recovery space to reduce dependency on ICU.</p> <p>Safe staffing models to be investigated and established.</p> <p>Research shows reduces MET calls, reduces take back to ICU.</p>	Royal Hobart Hospital	2022-24	Scoping Document complete
I.25 RHH - Expansion of Pre-Assessment Clinic space and reforms to the model of care	<p>To move into location outside the RHH but in Central Business District.</p> <p>Further expansion to be built into RHH master planning process.</p>	Royal Hobart Hospital and Infrastructure Services	2022-23	Premises secured and refurbishment works underway.
I.26 RHH - Increase ICU Capacity	<p>Approval has been granted to open an additional 12 ICU beds in Ward 1H.</p> <p>Total of 18 ICU-level beds by June 2021, 20 by June 2022 and 22 by June 2023.</p>	Royal Hobart Hospital	Apr-2023	Contractor appointed and Main Construction is underway for the 12-bed expansion.

2. Workforce Strategies

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
2.1 STATEWIDE -Nursing workforce state-wide recruitment project	<p>Several initiatives are currently underway across the Department of Health (which includes the Tasmanian Health Service (THS) to address both long term and immediate issues related to how nurses and midwives are recruited, retained in the public health workforce, and the structures that support their practice and professional development. This work has built on the 2021 Nursing and Midwifery State-wide Recruitment Workforce action plan, the strategies contained in Our HealthCare Future, Health Workforce 2040 and broader THS initiatives such as Pathways to Excellence and the THS Nursing and Midwifery Strategic Framework 2018-2022.</p> <p>Four priority areas include:</p> <ul style="list-style-type: none"> • Rostering • Recruitment • Retention • Workforce Capability 	Department of Health	Ongoing	Key outputs of this work under Health Workforce 2040 will be reported towards the end of 2022.
2.2 STATEWIDE - Implementation of Health Workforce 2040 Strategy	<p>Support implementation of the Health Workforce 2040 Strategy, once released, to increase and further develop the surgical and perioperative services workforce.</p> <p>The draft Health Workforce 2040 Strategy was released for consultation as part of Our Healthcare Future long term health reforms.</p> <p>Health Workforce 2040 has been updated following consultation and reflects the latest available health workforce data from the National Health Workforce Dataset and is currently being finalised for release.</p>	Department of Health	Ongoing	<p>Health Workforce 2040 was released in September 2021. A funding commitment of \$15.7 million was provided to support implementation.</p> <p>A range of actions are being supported through this funding including initiatives that will support recruitment and retention of the perioperative services workforce.</p>
2.3 STATEWIDE - Implementation of Health Workforce Taskforce	<p>The Health Professional Recruitment Taskforce has been established and met for the first time in June 2021.</p> <p>The focus of the Taskforce is recruitment and retention strategies for the Tasmanian health workforce.</p>	Department of Health	Ongoing	<p>The Health Recruitment Taskforce completed its work in December 2021. A range of initiatives were supported through this work, some of which are ongoing and are being progressed by Human Resource Services.</p>

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
2.4 <i>STATEWIDE</i> – University of Tasmania partnership to recruit targeted specialists for regional areas	Engage with the University of Tasmania to explore the alignment of future course offerings to identified future gaps in the workforce.	Department of Health	Ongoing	The Department of Health and the University of Tasmania are working on updating the Conjoint Appointment process to help support this action.
2.5 <i>STATEWIDE</i> - Investigate private-public sector appointments to improve recruitment and retention of clinical staff, particularly medical positions	Work with the private sector to investigate employment options and opportunities.	Department of Health	Ongoing	The Department of Health has engaged the private sector in the Training, Education and Workforce subcommittee of Clinical Executive. This forum provides an opportunity for to explore private/ public sector appointments.
2.6 <i>STATEWIDE</i> – Targeted theatre and surgical nurse training programs	Expand in-house evidence-based training programs to support operating theatre specialty areas. This will increase qualified staff to undertake specialty-specific surgeries and improve staff retention. Investigate formalising the training courses and having courses accredited through the University of Tasmania, as occurred for the High Dependency Unit course.	Royal Hobart Hospital Launceston General Hospital North West Hospitals	Ongoing	Hospitals have secured funding to develop a statewide consistent perioperative training program to attract nurses to become theatre nurses, with LGH curriculum shared across the four major hospitals.
2.7 <i>STATEWIDE</i> – Ear Nose Throat Specialist Workforce (ENT)	Explore temporary, short- and long-term strategies to manage workload and increase ENT FTE in outpatient and inpatient settings.	Statewide Surgical and Perioperative Services Committee Department of Health	2022-23	Long term strategies to attract and retain ENT specialist workforce are being developed and actioned. Hospitals continue staff recruitment, and engagement of locums, including specialists with scope of practice that overlaps ENT. Outpatient clinic models that can be delivered by non-ENT workforce, such as audiologists and consultant paediatricians are also being implemented.

3. Strategies to Enhance Surgical Support Services

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
3.1 STATEWIDE - Increase Medical Imaging capacity	<p>Hold discussion with private providers to ensure increased elective surgery throughput can be supported via existing private contracts.</p> <p>Work with public hospital medical imaging departments to facilitate increased capacity.</p>	<p>Department of Health Royal Hobart Hospital Launceston General Hospital</p>	Ongoing	<p>Outsourcing arrangements with medical imaging practices are being formalised.</p> <p>Department's capacity planning capability to be developed in 2022-23.</p>
3.2 STATEWIDE - Ensure adequate access to critical care services	<p>Review staffing needs, training programs and infrastructure required for critical care services</p>	<p>Tasmanian Critical Care Network Royal Hobart Hospital Launceston General Hospital North West Hospitals Department of Health</p>	Ongoing	<p>The Critical Care Network met with and provided feedback on the scoping report being conducted by Resonance Consulting Group. RHH is in the process of building 12 additional ICU beds and has opened and staffed 2 Close Observation After Surgery (COAS) beds. To ensure ICU access for future new elective surgical programs, these proposals will be prospectively shared with the Tasmanian Critical Care Network to determine the impact of any increased activity on the resources required by regional ICUs. This will provide an opportunity to accurately cost proposals and increase staffed ICU beds prior to the commencement of programs.</p>
3.3 STATEWIDE - Hospital in The Home (HiTH) Optimisation and Review Project	<p>Analyse and report on effectiveness of HiTH services state-wide and develop consistent state-wide service model</p>	<p>Department of Health</p>	Ongoing	<p>Hospital in The Home (HiTH) Optimisation and Review has been completed. The Statewide Access and Flow unit and the RHH are currently supporting work that will enhance and establish HiTH across the State.</p>
3.4 STATEWIDE - Additional rehabilitation services to support increase in elective surgery throughput	<p>Investigate the development of Rehabilitation in the Home (RiTH) models of care</p>	<p>Department of Health</p>	Ongoing	<p>This action will be progressed by the Musculoskeletal Clinical Network (to be established in 2022) as part of its body of work to support pre-surgery health and surgical avoidance.</p>

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT	
3.5	STATEWIDE - Ensure Pharmacy Services have adequate supply of pharmaceuticals to meet increased demand due to increased elective surgery throughput	Continue to work with statewide pharmacy services to ensure adequate supply of pharmaceuticals	Royal Hobart Hospital Launceston General Hospital North West Hospitals Department of Health	Ongoing	Pharmacy reports good stockholdings, actively monitored.
3.6	STATEWIDE - Ensure state-wide equipment service (TasEquip) has capacity to address demand due to increased elective surgery throughput	Work with TasEquip to quantify service capacity increases required to meet increased elective throughput	Department of Health	Ongoing	PTVEs were approved for fixed term 4-year increase of 0.4 FTE. TasEquip has successfully recruited to these positions.
3.7	STATEWIDE - Enhance Tasmanian Home and Community Care (HACC) Services	Develop strategies to better connect surgical patients requiring post-operative home support packages, to facilitate discharge.	Department of Health	Ongoing	Commenced

4. Strategies to Partner with the Private Sector

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT	
4.1	STATEWIDE - Utilising specialist clinical services in other jurisdictions	Continue to refer patients to hospitals in other jurisdictions for highly specialised surgical services, when clinically appropriate and if deemed clinically necessary.	Department of Health	Ongoing	Hospitals continue to refer to other jurisdictions as required.
4.5	STATEWIDE – Provide greater clarity to the private sector regarding public outsourcing volumes	Inform private sector of expected 4-year activity to assist with private service planning. Manage purchasing of contracted surgery with each hospital, particularly for specialties facing capacity limits in the public hospitals.	Department of Health	Ongoing	Service profiles confirmed through annual review process.

5. Reform & Service Enhancement Strategies

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
5.1 STATEWIDE - Outpatient Transformation Project	<p>Includes:</p> <ul style="list-style-type: none"> • e-Referral into Outpatient Service • Electronic referral management and virtual care solution • Clinical Prioritisation Criteria for outpatients • Enhanced outpatient SMS communication • Patient-focused outpatient bookings 	<p>Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals</p>	2022-2026	<p>A four-year Outpatient Transformation Strategy is shortly to be released to guide the delivery of this project.</p>
5.2 RHH - Implementation of a State-wide Musculoskeletal Triage Assessment Service	<p>The Musculoskeletal Triage Assessment Service proposes a new model of service delivery to streamline musculoskeletal services, addressing current fragmentation, inefficacies, and inequity in services.</p> <p>The underpinning premise of the proposed alternate model of care is to align all musculoskeletal services with a consistent referral approach via the Musculoskeletal Triage and Assessment Service (MTAS) enabling patients' timely access to the most appropriate care pathway.</p> <p>There is now strong evidence that alternative models of care are more cost effective in managing many sub-groups of musculoskeletal patients, such as those with low back pain, and hip and knee arthritis. Such alternative models of care have common features: simplified entry points; standardised triaging processes; assessment of suitable patients by experienced non-medical health professionals acting as 'gate-keepers' and access to appropriate care pathways for those patients meeting defined criteria. Expected outcomes:</p> <ul style="list-style-type: none"> • Ensure patients access the most appropriate, best practice care model • Reduce unwarranted variation e.g., rates of spinal surgery in Tasmania • Reduce number of patients being added to the wait list for musculoskeletal surgery 	<p>Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals</p>	Ongoing	<p>The Department has recruited allied health staff to work with Hospitals to drive service implementation and development of models of care. Planning is underway on key priorities for the service, with the Musculoskeletal Clinical Network to be established to provide state-wide leadership, with the first meet to be held in September 2022.</p>

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
5.3 STATEWIDE - Joint Assessment Services	<p>The Joint Assessment Service offers knee and/or hip assessments performed by a physiotherapist. These assessments determine the best pathway for patients – surgery vs physiotherapy. In addition to determining which patient should progress to surgery, these clinics also offer an opportunity to ensure those patients that will have surgery are better prepared, ensuring optimal outcomes. Expected outcomes of the Joint Assessment Service:</p> <ul style="list-style-type: none"> • Surgical avoidance • Improved patient management and workup • Interdisciplinary approach • Alternative patient pathway to surgical intervention • Reduced cost • Reduced surgical waitlists 	<p>Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals</p>	Ongoing	<p>Business model developed and rollout of Joint Assessment and Triage service (JATS) has commenced at LGH in early 2022. Early Intervention Service (EIS) set up in NW, and South has a service. Allied Health staff recruited for MTAS (at 5.2 above) will review the regional services to work on statewide standardisation and reduced service variation.</p>
5.4 RHH - Spinal Assessment Service (state-wide service)	<p>The Spinal Assessment Service is a specialist outpatient service for patients referred by their local doctor (GP) for diagnosis or advice regarding the management of their back pain. The service results in:</p> <ul style="list-style-type: none"> • Surgical avoidance • Improved patient management and workup • Interdisciplinary approach • Alternative patient pathway to surgical intervention • Reduced cost • Reduced surgical waitlists • High Value Care 	<p>Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals</p>	Ongoing	<p>Once established in 2022, the Musculoskeletal Clinical Network will drive next steps for this action. The allied health staff (at 5.2 above) will work with Hospitals to develop these service improvements.</p>
5.5 LGH & NWRH - Persistent Pain Service	<p>Investigate contemporary models of care for persistent pain services in the North and North West. Persistent (chronic) pain is seen in every age group from paediatric to geriatric, and across all medical and surgical disciplines. Because of the complexity of persistent pain problems, multidisciplinary pain clinics/centres have been developed throughout Australia and New Zealand. Assessment and conservative pain management can result in patients being diverted from a surgical pathway.</p>	<p>Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals</p>	Ongoing	<p>A model of care will be developed for North/ North West (service already established in South). This action will form part of the broader program of the Musculoskeletal Clinical Network.</p>

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
5.6 LGH - Physiotherapy- led earlier discharge for abdominal surgery	Deliver the Enhanced Physiotherapy Care Package - intensive physiotherapy to reduce length of stay in ICU and improve quality of life	Launceston General Hospital	Ongoing implementation	Research is now finalised, and implementation has commenced. Rollout is underway at LGH, followed by the North West and South.
5.9 STATEWIDE - Osteoarthritis of the knee	Implement conservative management strategies in line with Osteoarthritis of the Knee Clinical Care Standard, to facilitate preliminary non-surgical intervention to delay or divert patients from a surgical pathway	Department of Health Royal Hobart Hospital Launceston General Hospital North West Hospitals	2022	Elements of the clinical care standard are being met by regional services such as JATS LGH (above) and the Department is collaborating with University of Tasmania on the related GLAD program. This action will form part of the broader program of the Musculoskeletal Clinical Network.

6. Enhanced Clinical Engagement Strategies

ACTION	ACTION DETAILS	RESPONSIBLE	TIMEFRAME	COMMENT
6.1 STATEWIDE - Investigate establishment of the State-wide Clinical Senate	<p>Enhancing clinical engagement across the Tasmanian Health Service, through forums such as the State-wide Clinical Senate, will assist to strengthen clinical engagement across surgical and perioperative services and improve delivery of surgical and perioperative services.</p> <p>Consistent with a key theme of Our Healthcare Future of strengthening the clinical and consumer voice in health planning, the following activities will take place in close collaboration with stakeholders:</p> <ul style="list-style-type: none"> • co-design of a State-wide Clinical Senate with clinicians and consumers • design of a Future Health Leaders Forum. <p>The collaborative design process will commence with the upcoming release of an Issues Paper on the establishment of a State-wide Clinical Senate for Tasmania and a series of regional workshops with clinicians and consumers.</p>	Department of Health	2021-22 for investigation phase 2022-23 for implementation phase	<p>The Department has undertaken a review of the evidence-base surrounding Clinical Senates, including consideration of models in place elsewhere in Australia and overseas. Regional stakeholder forums were held in October and November 2021 to co-design the Terms of Reference and an Operational Framework for the Clinical Senate. Drafts of these documents were released for consultation, with the consultation period closing June 2022. Using feedback to guide finalisation, final documents will be released together with a call for Expressions of Interest in membership of the Clinical Senate. The first Senate meeting will be held in late 2022. Clinical Senate has been re-named "Health Senate" to reflect it will be a wider engagement group including non-government and community, private sector, and university members.</p>
6.2 STATEWIDE - Establish Tasmanian Ophthalmology Network	<p>Ophthalmology is an area of high demand for surgical and perioperative services. Along with its work to drive clinical improvement, the Network will also support delivery of ophthalmology surgical program.</p> <p>Establish draft Terms of Reference and membership.</p>	Department of Health	By end of Dec 2022	<p>This Network is in the early stages of establishment. A Chair has been identified, and a draft Terms of Reference has been developed.</p>

