Our Communities Our Future

Healthier Together
Message from the MLHD Board Chair and Chief Executive

On behalf of Murrumbidgee Local Health District we are proud to release Our Communities, Our Future; Healthier Together - a blueprint for leading the organisation towards 2021. This document replaces the previous Murrumbidgee Action Plan (The MAP).

We’ve listened and consulted across the District (30 consultations with over 200 people, see Appendix 1) and look forward to continuing to work with our communities and staff to adapt to the changing needs and expectations of communities, patients and carers.

The strategies and initiatives in this document align NSW Health and Murrumbidgee Local Health District (MLHD) priorities. The District must meet the challenges of planning, funding and delivering world-class services in an environment of increased demand, an ageing population and an increase in chronic diseases. It is essential to identify opportunities and create a vision for the future to ensure we are providing better value health care and optimising the use of health resources, all while maintaining safety and quality for our patients.

We are fortunate to work and live in a region where people care passionately about the health and wellness of their families and communities.

We are proud of what we have accomplished together, however there are still many challenges for us to tackle to improve health outcomes. We strive to provide a compassionate health care system that consistently delivers the highest standard of care to people, no matter where they live.

Jill Ludford      Gayle Murphy
Chief Executive      MLHD Board Chair

“In Murrumbidgee we set the bar high; in attracting the best people, using innovation to do new things and have an unwavering focus on quality and safety.”

Jill Ludford
MLHD Chief Executive

2019 MLHD Board pictured:
(standing, from left)
Mr Adrian Linder
Dr Pankaj Banga
Ms Andrea Jordan
Mr Geoff Twomey

(sitting, from left)
Ms Elke Cleverdon
Ms Jill Ludford – Chief Executive
Ms Elizabeth Dixon
Dr Thomas Douch
Ms Gayle Murphy - Board Chair and
Mr John Harding

Not pictured:
Ms Betty Cragg
Mr Paul Braybrooks
and Mr John Ireland
Murrumbidgee Local Health District (MLHD) acknowledges the traditional owners of the land in the MLHD region. We pay our respects to Elders past, present and emerging of this land; Wiradjuri, Yorta Yorta, Baraba Baraba, Wemba Wemba and Nari Nari people.

Cover Artwork by: Alison J Simpson

The Aboriginal artwork you see throughout these pages was produced for the MLHD Aunty Jean’s program. It tells the story of how Aboriginal people would come together to participate in the program, including those from across the river.

Our community comes together to socialise, eat well and be healthy. The artwork also reflects the positive ripple effect that being healthy can have on their families, as well as the wider community.

“I enjoy working at MLHD because I get to share my cultural knowledge with other colleagues, whilst also gaining knowledge through their expertise.”

— Cultural Development Officer, MLHD
Our Vision

Wellness is our goal
Excellence is our passion
Our people are our future

Our Values

Collaboration
Openness
Respect
Empowerment

Our Why

Murrumbidgee Local Health District (MLHD) values the role our people and community play in the health of our region. We strive to support people to live the healthiest lives possible. Together with partners, not only within the health system but right across the community, we are focused on providing effective and accessible healthcare in an environment of rapid change and complexity.

MLHD delivers a compassionate health care system that is there when you need us. Our vision is excellence in all elements of health care to all of those we serve. Our values of collaboration, openness and respect empowers us to embrace cultural diversity and to treat all people with dignity and compassion.

We encourage our people to broaden the use of innovation, research and partnerships to anticipate challenges and to take advantage of opportunities. We are positioning the organisation to be digitally-enabled, consumer-centric and to have flexible operating models.

Background

The Murrumbidgee Action Plan (‘the MAP’) was published in 2015 and provided an overarching framework to guide efforts to improve performance across the Murrumbidgee health system.

The Action Plan had six key areas:

- Performance and quality improvement
- Enhance clinical engagement and leadership
- Implement integrated models of care
- Cost-effective LHD hospital and specialist configuration
- Embed value for money
- Build system capacity to lead change

A further important focus of the MAP was to support successful implementation of MLHD’s Recovery Plan, which set the platform for long-term performance improvement. The MAP came to completion in early 2018, and in alignment with our Strategic Plan 2016-2021, Our Communities, Our Future – Healthier Together now shapes the direction and focus of MLHD as we progress towards 2021.
Our Achievements (over the life span of The MAP, 2015-18)

Wellness remains our goal, excellence is our passion and our people are our future. We are proud of our achievements over the last three years, and we are committed to striving for excellence to drive our vision for the next three years.

$342M Capital Investment
‘fit for purpose’ facilities

LEADING BETTER VALUE CARE
A move from volume to value health care

1st LHD in NSW to take steps to reduce sugary drinks from sale in our facilities

35% ↓ Reduction in significant workplace injuries (2017/18 result)

Junior Medical Officer (JMO) of the Year awarded to a Wagga Wagga Base Hospital JMO three years in a row! (2016, 2017 and 2018)

Key highlights and achievements during the lifetime of the Murrumbidgee Action Plan 2015-2018 (The MAP):

MLHD District Clinical Council was established in September 2015, with clear reporting frameworks. Representation includes current networks, Mental Health Drug and Alcohol and Maternity Services. The District Clinical Council has a high level of commitment and engagement from clinicians.

A Patient Flow and Transport Unit was established, staffed by experienced critical care nurses who coordinate inter-facility transfers. The unit also provides a Critical Care Advisory Service which escalates care for deteriorating patients and provides medical advice to all smaller MLHD facilities.

The Wagga Wagga Base Hospital Redevelopment (Stage 2) was opened; the rural referral hospital delivers modern healthcare and specialised services, with an expanded emergency department, imaging department, operating theatres, women’s and children’s inpatient units, intensive care and high dependency units, angiography suites, additional inpatient beds and a rooftop helipad.
The Deniliquin Renal Unit was officially opened in March 2018. This was the fruition of work undertaken in partnership with the community to establish and implement a locally based Renal Model of Care including haemodialysis. The nine chair unit provides specialist services for both Deniliquin and surrounding towns in partnership with Royal Melbourne Hospital, negating the need to travel long distances to see a specialist.

A Patient Safety First 2017-2021 Quality Health Care Framework was developed, underpinned by four domains; patient focussed care, leaders in quality, structured for safety and steered by data.

Strong partnerships continue to be developed with the Murrumbidgee Primary Health Network (MPHN). MLHD and MPHN worked together to complete Community Health Needs Assessments and Clinical Services Plans that provide a whole-of-system assessment and service.

Continued work with the Agency for Clinical Innovation (ACI) to identify best practice models of care for older people with complex needs and priority chronic conditions. Projects include the Adult Community Mental Health Model of Care Co-design as well as a number of improvement projects for aged care, such as the Living Well in MPS Program.

In 2017, MLHD moved from a volume to value approach by launching the Leading Better Value Care initiatives. This is a focus away from the traditional approach of measuring value in terms of volume/output in relation to cost, to measuring value in terms of health outcomes, experience of care and efficient and effective care.

The Murrumbidgee Community Care Intake Service (CCIS) was established to improve consumer access to community health services closer to home, and align consumers with the most appropriate service to improve health outcomes.

The Murrumbidgee Mental Health and Drug and Alcohol Alliance was established to provide a forum through which key stakeholders developed a strategic approach to meet the needs and expectations of consumers for access to and delivery of services to the Murrumbidgee population.

MLHD was the first Local Health District in NSW to take steps to reduce the sale of sugary drinks. Since announcing the ban on the sale of sugary drinks, 96 per cent of facilities across MLHD are compliant.

Six Multipurpose Services (MPS) redevelopments undertaken across the district
- Culcairn, Barham, Holbrook, Murrumburrah-Harden, Tocumwal and Tumbarumba

Electronic Medical Records (eMR) rolled out across the district.

Temora Hospital operating theatre upgrades were completed in August 2018, including a refurbished theatre with new equipment including an operating table, pendant lights, service panels for oxygen and improved work flows for transferring patients in and out of theatre.
Snapshot of Murrumbidgee Local Health District

Murrumbidgee Local Health District (MLHD) spans 125,561 square kilometres across southern NSW, stretching from the Snowy Mountains in the east to the plains of Hillston in the northwest and all the way along the Victorian border.

Traditional custodians of the land covered by the District are the Wiradjuri, Yorta Yorta, Baraba Baraba, Wemba Wemba and Nari Nari people.

Murrumbidgee Local Health District and Murrumbidgee Primary Health Network share a common boundary and constituent Local Government Areas. Our rural district is known for its agriculture and forestry industries, with strong employment in the health care, social assistance, and retail trade.


243,228 people

*Estimated Resident Population (2017 ABS)

125,561 km²
The age structure of MLHD provides key insights into the level of demand for aged-based services and facilities. An analysis of the service age groups of MLHD in 2016, compared to NSW shows there was a smaller proportion of younger workforce and parents/homebuilders (25 to 49 years) and a higher proportion of people in the older age groups (60+ years).

5.5 per cent of people need assistance with core activities due to a severe or profound disability. The number of people who have provided unpaid assistance to a person with a disability, long term illness or old age in Murrumbidgee increased by 1,241 between 2011 and 2016.

Our People and their Health

The health of our community is measured by a number of health and social indicators. These indicators include health related illnesses as described below.

**Life expectancy at Birth**

<table>
<thead>
<tr>
<th></th>
<th>Average Male</th>
<th>Aboriginal Male</th>
<th>Average Female</th>
<th>Aboriginal Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>83.9yrs</td>
<td>79.5yrs</td>
<td>74.6yrs</td>
<td>70.5yrs</td>
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</tbody>
</table>

The main health issues affecting our people includes long term conditions such as chronic cardiac failure, diabetes and chronic obstructive pulmonary disease (COPD). In 2015, cancer related deaths accounted for 31 per cent of all causes of death in MLHD.

MLHD has significantly higher incidences of total cancers and deaths from lung, prostate and bowel cancer, which are in line with the high prevalence of health risk factors such as tobacco smoking, overweight/obesity and risk alcohol consumption in the adult population.

Leading causes of death for both males and females include cancer, heart disease, stroke and respiratory disease.

The health of Aboriginal and Torres Strait Islander Australians is improving on a number of measures. There are significant declines in infant and child mortality and decreases in avoidable mortality related to cardiovascular and kidney diseases.

Despite these improvements, significant disparities persist between Aboriginal and non-Aboriginal Australians. Aboriginal people continue to have lower life expectancy, higher rates of chronic and preventable illnesses, poorer self-reported health and a higher likelihood of being hospitalised than non-Aboriginal Australians (AIHW 2015a, 2015b).

Significant improvements in the health of our people could be achieved by:

- Reducing smoking rates
- Increasing nutrition and physical activity
- Reducing childhood obesity
- Supporting people with mental health conditions
Our Services

Every day, people in our region have access to high quality, 24 hour public health care across 33 hospitals. 68,981 people were admitted to MLHD facilities in 2017-18. Some of the main reasons people encounter the hospital system are for the day procedures of dialysis, chemotherapy or investigations such as colonoscopy. The most frequent reasons for prolonged hospital stays (one night or more) in 2016-17 were for post-surgery or medical care. Digestive and circulatory diseases accounted for the highest number of admissions to Wagga Wagga and Griffith Base Hospitals. Hospitalisation for dementia accounted for the largest amount of total days in smaller hospitals.

MLHD has 47 public health facilities, including:

- 1 Rural Referral Hospital
- 1 Base Hospital
- 8 District Hospitals
- 5 Community Hospitals
- 16 Multipurpose Services
- 2 Mercy Health Public Hospitals
- 12 Community Health Posts
- 1 Mental Health Facility
  (Inpatient Unit and Mental Health Recovery Services)
- 1 Brain Injury Rehabilitation Service

Budget

$582.1M

2017-18

68,981 admissions

355,653 bed days

What we provide

- Aboriginal Health
- Acute inpatient services – surgery and medicine
- Aged care services
  including residential aged care
- Ambulatory and ‘hospital in the home’ services
- Cancer care services
- Cardiovascular services
- Child and family health services
- Child protection services
- Diagnostic services
- Domestic violence services
- Emergency care services
- Intensive care services
- Maternity
- Mental health, drug and alcohol services
- Oral health services
- Pain management services
- Palliative and end of life services
- Population health including public health functions
- Paediatrics
- Primary and community health services
- Preventive health services
- Rehabilitation services
- Renal services
- Sexual health services
- Sexual assault services
- Women’s health services

24 hours in MLHD

- 407 people present to public emergency departments
- 6 people are admitted for mental health conditions
- 13 people are hospitalised due to an injury
- 6 babies are born
- 3 people die in a MLHD facility
- 153 people are admitted to a public hospital
- 21 people are admitted with potentially preventable conditions
- 2 people are admitted following a stroke
- 41 people undergo elective surgical or medical procedures
- 2,025 services are provided in public outpatient clinics

*headcount as of 12/08/2018 (includes full time, part time and active casual employees)
Key Activities in MLHD during 2017-18

148,694 patients presented to our emergency departments

2,091 babies were born

4,101 Mental Health presentations to our emergency departments

68,981 people were admitted to our facilities

489 Residents called our aged care facilities home (including MPSs)

16,300 procedures undertaken

355,653 bed days

2,006 were Mental Health admissions

10,994 Renal Dialysis episodes of care

739,981 non-admitted episodes of care

33 Local Health Advisory Committees

including community representatives 240

“
I love the element of autonomy in my role and the patients I am able to treat, the variety of presentations is terrific. My role as Nurse Practitioner is quite unique within nursing and I love the challenge it provides and the ability I have to see and treat patients... it is really rewarding”

– Nurse Practitioner ED, Griffith Base Hospital

‘Together in Partnership’ delivering quality care to our people

Our Partners

- Our consumers
- Our communities
- Local Health Advisory Committees
- Murrumbidgee Primary Health Network
- Riverina Medical and Dental Aboriginal Corporation
- Griffith Aboriginal Medical Service
- Primary health care providers
- Private health services
- Universities, TAFE NSW and other educational partners.
- Local, State and Commonwealth governments and non-government health and health related providers
- Tertiary referral centres and other Local Health Districts
- NSW Ministry of Health, including pillars

Where MLHD residents go for hospital care

57 per cent of our population are treated in MLHD public hospitals, the remaining treatments are provided at NSW public, private and other states and territories hospitals. Source: Flowinfo V17 2018
MLHD Planning Framework

- NSW State Plan / Premiers Priorities
- NSW Health Plan / NSW Health Strategic Priorities
- Rural Health Plan
- Relevant State and National Plans

Murrumbidgee LHD Strategic Plan 2016-2021

Murrumbidgee LHD Our Communities, Our Future
Healthier together, towards 2021

Enabling Plans and Strategies
- Aboriginal Health Plan (TBC)
- Asset Strategic Plan
- Patient Safety First
- Research, Innovation & Change Strategic Plan
- Safety, Health and Wellbeing Strategic Plan
- Sustainability Framework
- Workforce Strategic Plan

Clinical Services Framework / Plans
- Cancer Services
- Facility Plans
- Mental Health
- Drug and Alcohol
- Palliative Care
- Renal Services
- Other clinical services/streams

Annual Plans
Service Agreement with Ministry of Health
Safety & Quality Account
MLHD Our Goals
MLHD Operational Plan
Directorate Plans
Facilities Managers Plans
90 Day Action Plans

*Hierarchy of Plans as of Jan 2019

MLHD Hierarchy of Plans

Strategic Plan 2016-2021

NSW Government
Health
Murrumbidgee Local Health District

Our Priorities
Aspire to excellence
- Generate and positively implement better ways of working, informed by research and innovation, using leading technologies
- Meet or exceed the expectations of consumers in all care settings
- Maintain an unyielding focus on quality and safety

Together in partnership
- Collaborate with others to create an interconnected system of healthcare
- Involve communities and consumers in decisions making about healthcare
- Coordinate and integrate care for populations with the greatest needs, recognizing that health and social outcomes are interdependent

Invest in our people
- Engage with clinicians to participate in leadership and the planning, prioritization and delivery of quality healthcare
- Be known as the best place to work, volunteer, teach, learn and grow

Our Values
- Integrity - Excellence - Equity - Innovation - Respect - Collaboration - Opacity - Stewardship - Valued Staff - Improved Aboriginal Health Outcomes - Quality & Safety - Strong Financial Performance - Person-Centred Care - Improved Rural Health Models

Focus on Wellness
- Support people and communities to learn about, and become responsible for improving their own health and wellbeing
- Shift the balance of care from hospitals to integrated primary and community-based services
- See every interaction as an opportunity to focus on wellness
MLHD – The Way Forward

Our Communities, Our Future

– Healthier Together

Focus on Wellness

Invest in our People

Aspire to Excellence

Together in Partnership

How we will make this possible – Enablers
Achieving success in our focus areas is dependent upon key enablers across MLHD

Towards 2021: Enablers to help us achieve success

Teamwork

Responsive, real-time technology

Research, Innovation and Change

Contemporary Infrastructure

Financial Sustainability
Our Opportunities and Challenges

MLHD is committed to improving the health of our communities. We acknowledge the changing needs of our communities including; an increase in chronic disease, an ageing population and an increasing demand for services. In particular:

- Minimal population growth and an increase in the proportion of people over the age of 65yrs.
- Chronic disease including obesity, diabetes, dementia, heart disease and stroke is increasing.
- Prevalence of mental health, drug and alcohol issues increasing in rural communities.
- Rural and isolated communities within our region are often socioeconomically disadvantaged, have poorer health and difficulty accessing health and social services.
- Less young people; population growth is uneven across the District with growth areas surrounding Wagga Wagga, Griffith and Albury.
- Multicultural communities growing in larger regional areas; Wagga Wagga, Griffith and Young often having difficulty accessing services.
- Aboriginal Health outcomes remain poorer than the wider community.

**Change in Age Structure**

<table>
<thead>
<tr>
<th>Category</th>
<th>Change in Number of People</th>
</tr>
</thead>
<tbody>
<tr>
<td>Babies and pre-schoolers (0 to 4)</td>
<td>+1,000</td>
</tr>
<tr>
<td>Primary schoolers (5 to 11)</td>
<td>-1,000</td>
</tr>
<tr>
<td>Secondary schoolers (12 to 17)</td>
<td>-1,000</td>
</tr>
<tr>
<td>Tertiary education and independence (18 to 24)</td>
<td>+2,000</td>
</tr>
<tr>
<td>Young workforce (25 to 34)</td>
<td>+1,000</td>
</tr>
<tr>
<td>Parents and homebuilders (35 to 49)</td>
<td>+2,000</td>
</tr>
<tr>
<td>Elderly workers and pre-retirees (50 to 59)</td>
<td>+2,000</td>
</tr>
<tr>
<td>Empty nesters and retirees (60 to 69)</td>
<td>-1,000</td>
</tr>
<tr>
<td>Seniors (70 to 84)</td>
<td>-2,000</td>
</tr>
<tr>
<td>Elderly aged (85 and over)</td>
<td>-3,000</td>
</tr>
</tbody>
</table>


**People and Culture**

We are creating a workplace culture that empowers and invests in our people, one that embraces new and innovative models at every level of our service to best serve our community and our people, while providing high quality, safe health care and improved outcomes for all.

We are driven to continually make MLHD a better place to work, for Our People and for Our Future, by building capability of our leaders and emerging leaders, driving accountability and ensure everyone is working in the best interests of patients, our organisation and our community.
Our Workforce

Recruitment of an experienced and skilled workforce, particularly in outlying areas, remains an ongoing challenge for the District. The MLHD workforce is ageing; currently the average age of our staff is 43 years old. This means an increasing number of staff will retire in the next 10 years. Thus strategies to engage, grow, educate, develop and support our professional workforce will be critical for the future.

MLHD recognises the way we work is changing and that the workforce needs to be adaptive and agile to meet future demands for our community. Industry demands are changing and it is predicted that by 2020, the millennial generation will comprise half of the global workforce. Recruitment and retention of new people into the workforce, who are more likely to look for a transient lifestyle, is projected to be an ongoing challenge.

With the increasing use and innovation around technology we must continue to build and support our workforce’s capabilities to explore and expand new ways of working.

“We are committed to providing the best person-centred healthcare for our community and to build a positive workplace culture based on our MLHD values of Collaboration, Openness, Respect and Empowerment.”

– MLHD BOARD

Organisational Sustainability

MLHD continues to explore all opportunities to work within allocated resources while continuing to provide quality services to its communities.

MLHD’s Sustainability Framework paves the way for the District to reorientate healthcare to support more even access to services for people across our rural area. The strategies, driven from the Board’s vision, will work to improve health outcomes for the population, improve the experience of care for both patients and staff, and be delivered as value for money.

Leading Better Value Care initiatives (aligned across the NSW Health system) are designed to measure value in terms of improved health outcomes, experience of care and more efficient and effective care. This will be a focus away from the traditional approach of measuring value in terms of volume/output in relation to cost, to measuring value in terms of health outcomes, experience of care and efficient and effective care.
Towards 2021

Our Communities, Our Future

*Healthier Together*

Keeping people healthy through supporting individuals and communities to improve their own health and wellbeing, and that of their communities; seizing every interaction as an opportunity to focus on and improve people’s health and wellbeing.

Build capability in our people to deliver great health care services, and be known as the best place to work, volunteer, teach, learn and grow.

Keeping people healthy through supporting individuals and communities to improve their own health and wellbeing, and that of their communities; seizing every interaction as an opportunity to focus on and improve people’s health and wellbeing.

With the four priorities of our Strategic Plan 2016-2021 (*Focus on Wellness, Invest in our People, Together in Partnership and Aspire to Excellence*) as the foundational pillars supporting future directions, this document outlines the key actions for the next three years. These actions have been developed from conversations with our communities and staff across the District.

Together with partners within the health system and across the community, we will provide quality services close to where people live and work.

A compassionate and consumer focussed health care system that is there when you need it is a fundamental goal, to support our people and our communities to be as healthy as possible.

The following actions detail how we will deliver on our purpose to support a healthier future for all.

> “Healthcare is going through a historic period of change. New technologies, informing and involving patients are increasingly important parts of the health care process.”  
> — Studer Group Australasian Conference 2018
During conversations with our communities in 2018, we heard:

**Wellness**

“we need to build a resilient community, focused on improving their own health”

“provide compassionate care, ALWAYS.”

“be responsive to local needs”

“focus on younger generations – starting life well”

“shift the balance from hospital to primary and community care”

“supportive of End of Life Care, focused on individual’s needs”

Our staff and communities want to be active partners in the change process, “do it with us, not to us”

**Excellence**

“we want equity of access to services, no matter where we live”

“ready to embrace new ways of working / treatment, if it means I can stay closer to home”

“real time data – access to live information and support”

“pilot programs at the smaller sites, we are willing to innovate”

“use and expand telehealth services and new technological advances to drive systematically change”

*messages summarised and themed from over 30 consultations, in discussion with over 200 MLHD residents across June/July 2018. See appendix 1 for further detail.*
Our Communities, Our Future

Murrumbidgee Local Health District

Towards 2021

Our Vision: Wellness is our Goal, Excellence is our Passion, Our People are Our Future

Our CORE Values: Collaboration, Openness, Respect, Empowerment

Focus on Wellness

Supporting people to improve their health and wellbeing, and that of their communities.

We will focus on:
- Growing healthy children, families and communities
- Building resilient communities
- Promoting wellness, early intervention and prevention across the life stages
- Shifting the balance of care from hospitals to the community; services delivered where people need them
- Improving access to community care and support for mental health services
- Enhancing healthy lifestyle choices
- Supporting healthy ageing strategies to optimise mental, social and physical wellbeing functions for older adults.

Invest in our People

Build capability in our people to deliver great health care services.

We will focus on:
- Supporting and enhancing the learning, development and engagement of our people
- Developing new and innovative strategies to build a workforce fit for the future
- Growing our medical, nursing and allied health workforce, providing training, development and career opportunities
- Developing cultural competency skills across our workforce
- Engaging our staff in design and delivery of health care systems and new models of value based care
- Providing real time support for clinicians from smaller sites and services

Aspire to Excellence

Focus on improving services & embrace new technologies where it makes the most impact.

We will focus on:
- Improving quality care and safety of our consumers, residents, staff and communities
- Listening and utilising consumer feedback to improve patient experience
- Embracing new ways of working; using leading technology, real time data and contemporary models of care
- Delivering value clinical care and reducing variation in clinical outcomes
- Improving equity of access to services, no matter where you live
- Increasing the use of research and innovation to improve health outcomes

Together in Partnership

Connect and collaborate with individuals, partners & communities to improve health and social outcomes.

We will focus on:
- Providing an interconnected system of health care
- Working with local stakeholders in the design, delivery and access to health services
- Involving consumers in the design, delivery and evaluation of healthcare
- Improving health outcomes for Aboriginal and multicultural communities
Improving people’s health and wellbeing;
Keeping people healthy through supporting individuals and communities to improve their own health and wellbeing, and that of their communities.

MLHD seizes every interaction as an opportunity to focus on wellness.

WHAT WE WILL DO
- Focus on growing healthy children, families and communities
- Build a resilient community
- Promote wellness, early intervention and prevention across the life stages
- Shift the balance of care from hospitals to the community; services delivered where people need them
- Improve access to community care and support for mental health services
- In partnership, enhance healthy lifestyle choices throughout the community
- Support healthy ageing strategies to optimise mental, social and physical wellbeing functions for older adults.

HOW WILL WE DO IT
- Implement Local Plan for Growing Healthy Children (0-16yrs)
- Implement health promotion strategies – healthy eating and physical activity with focus across the ages and inclusion of childhood obesity prevention
- Implement smoking cessation strategy
- Engage with consumers to increase individual involvement, health literacy and decisions for health care needs
- Work with communities to deliver locally appropriate primary and community based services
- Improve response to appointment times and access to services, close to where people live
- Implement MHDA Clinical Service Plan; in line with the NSW Mental Health Reform Initiatives
- Progress the NSW Strategic Framework and Workforce Plan for Mental Health
- Continue to implement Ageing in Place Strategy and Living Well in MPS initiatives
- Implement the Healthy Food and Drink Framework
- Explore new ways in which the arts can benefit the health and wellbeing of people, by participating in the Health and the Arts Framework
- Continue to explore opportunities to improve access to community and inpatient mental health services, including in partnership with service providers of the Murrumbidgee MHDA Alliance
- Administer our services with compassion

WHAT SUCCESS WILL LOOK LIKE
- A healthier start to life and a reduction in lifestyle risk factors; including reduced smoking rates, increased activity and weight management of children
- Fewer hospital admissions for lifestyle related illnesses, with a shift to care in the community
- Services and resources are targeted to achieve the best outcomes for consumers
- Increased access to contemporary models of care and best practice for mental health services, co-designed with consumers
**WHAT WE WILL DO**

- Support and enhance the learning, development and engagement of our people
- Develop new and innovative strategies to build a workforce fit for the future
- Grow a medical, nursing and allied health workforce that provides training and career opportunities within our region
- Develop cultural competency skills across our workforce to support working with our diverse communities
- Engage our staff in the design and delivery of health care systems and new models of value based care
- Provide real time support for clinicians from smaller sites and services

**HOW WILL WE DO IT**

- Work with universities, Murrumbidgee Primary Health Network (MPHN) and medical representatives to become an employer of choice
- Develop a medical workforce training program that delivers training and career opportunities across the General Practice (GP) and specialist platform
- Extend the nurse practitioner program across the district to meet identified needs and provide career development for nurses
- Focus on the recruitment and retention of the Aboriginal workforce, including supporting the training and development of specific Aboriginal health positions and leadership roles
- Implement a cultural sensitive training program across the district
- Support the development of care teams across the district to build linkages between specialist and local services
- Develop real-time support in the form a business partnership model for services and sites, ensuring key contacts for safety, quality, finance and recruitment, clinical advice and support are available and responsive to the needs of our workforce
- Continue the Our People, Our Future way of working, with a focus on learning, coaching and building leadership skills and developing teams
- Develop and implement a district-wide allied health service structure inclusive of career pathways, role clarity and support systems
- Engage our people in change projects, such as redevelopments and new models of care, ensuring support and training is ongoing and responsive to needs
- Support and engage with new staff to ensure they feel connected and valued when joining our organisation
- Celebrate achievements by rewarding and recognising success in all forms
WHAT SUCCESS WILL LOOK LIKE

- A resilient and united leadership team
- Our staff are connected to our core values and motivated to achieve their full potential and professional development
- An increase in employee engagement as measured by the People Matter Employee Survey
- New employees experience a welcoming and positive environment that supports effective performance from their first day
- A culturally safe and diverse workplace
- An increase in representation of Aboriginal employees
- Increased career opportunities and retention rates
- Our employees recommend MLHD as a great place to work and develop
- We attract, recruit and retain an appropriately skilled workforce aligned to our core values
Focus on **improving services** and embracing new **leading edge technologies**; building on quality and safety principles to enhance how we provide services

**WHAT WE WILL DO**

- Improve quality care and safety of our patients, consumers, residents, staff and community
- Listen and utilise consumer feedback to improve patient experience
- Embrace new ways of working using leading technology, real time data and contemporary models of care
- Deliver value clinical care and reduce variation in clinical outcomes
- Provide equity of access to services no matter where you live
- Increase the use of research and innovation to improve health outcomes

**HOW WILL WE DO IT**

- Maintain accreditation/National Safety and Quality Health Service Standards (NSQHS) for all services
- Upskill staff to better utilise data to underpin clinical decision making
- Continue and expand the Leading Better Value Care approach to measure value in terms of health outcomes, experience of care and efficient and effective care
- Increase and expand the use of technology, particularly telehealth, for all new and redeveloped services
- Implement the Patient Safety First Framework
- Deliver Safety and Quality Accounts, ensuring transparency and commitment to improving services
- Develop new models of care that support specialist access to services locally
- Utilise the Accountability Framework to monitor, review and improve service and program operations
- Use patient experience to improve consumers quality of care and contact with the Health Service
- Utilise co-design methodology in the development of new services and models of care
- Ensure all services provide in a welcoming, culturally appropriate and safe environment for Aboriginal and culturally diverse people
- Build innovation through partnerships with universities and the NSW Rural Health Research Alliance
- Continue to invest in innovation projects across the district (Edison Projects / Clinical Redesign/ Leading Better Value Care) in partnership with relevant stakeholders, with particular focus on rural and remote communities
WHAT SUCCESS WILL LOOK LIKE

- We are recognised as an innovative health care system, partnering with consumers to engage them in health care decision making
- A consistent approach of collaboration “do it with us, not to us”
- Increased consumer satisfaction index (overall percentage rating of care received by adult admissions)
- Improved access to health services particularly for vulnerable communities
- Improved clinical outcomes for people with chronic diseases
- New models of care implemented, providing care closer to home
- Increased innovation and research opportunities
- Evidence of using information technology to improve clinical practice and outcomes
- Culturally and clinically safe workplace - no harm to anyone, at any time at MLHD
Connect and collaborate with individuals, partners and communities; to improve health and social outcomes for all, ensuring individuals and communities are active participants in decisions about their own health care

**WHAT WE WILL DO**

- Provide an interconnected system of health care that is seamless and delivered to those who need it most, where and when they need it
- Work with local government, Murrumbidgee Primary Health Network (MPHN), Local Health Advisory Committees (LHACs), aged care and other providers in the design, delivery and access to health services
- Involve consumers in the design, delivery and evaluation of healthcare
- Improve health outcomes for Aboriginal and multicultural communities

**HOW WILL WE DO IT**

- Build one care team across multiple sites and providers; e.g. clinical networks
- Work with MPHN to focus on the development and implementation of chronic and complex care patient pathways
- Improve discharge planning information always provided to the patient and health care provider, on discharge
- Increase access to specialist services across the District
- Work with the multicultural community to support access to health services and improve health outcomes
- Ensure consumer participation in planning and design of facilities and new models of care.
- Finalise and implement a whole of system mental health service care pathway through the Murrumbidgee Mental Health and Drug and Alcohol Alliance
- Review access and response timeframes for central intake systems e.g. Community Health, ensuring a feedback system enables clients and referrers to be easily updated on progress and outcomes.
- In partnership with Aboriginal communities develop an Aboriginal Engagement Framework, that improves direction on access and service provision
- Partner with local stakeholders to understand and address the impact of environmental issues that reduce inequities to healthcare; e.g. access to transport

**WHAT SUCCESS WILL LOOK LIKE**

- Improved access to services across the District
- Decreased unnecessary hospital admissions, more care provided in community
- Improved experience and health outcomes for Aboriginal people
- Multidisciplinary services in place for people with chronic disease
- Fewer people leave the district for care
- Positive consumer feedback measured in real time
ENABLERS FOR SUCCESS

- putting the plan into action

Teamwork
All members of the care team within and across the district work together to achieve the best outcome for the client.

To achieve this we will:

- Create and foster a positive workplace culture, driven by Our People Our Future principles
- Focus on training, education and career development for our people
- Engage with clinicians in change and service redevelopment projects
- Transition from workforce focused strategies to a people and culture focused organisation

Responsive and Real Time Technology
Use technology to drive and enhance service changes that bring services closer to where people live.

To achieve this we will:

- Use technology that is reliably available, easy to use, real time responsive and supportive for those that use it
- Implement the eHealth and eMed strategy
- Ensure systems are supportive and responsive to users
- Consider telehealth and technology in all service reviews, models of care and redevelopments

Research, Innovation and Change
Using research and best practise we will actively seek new ways of delivering better health services and improved health outcomes

To achieve this we will:

- Work with Agency for Clinical Innovation on improvement projects
- Continue and increase Leading Better Value Care projects
- Develop our Innovation and Research Hub
Contemporary Infrastructure
Maintain and improve our facilities and assets ensuring they are ‘fit for purpose’ now and into the future

To achieve this we will:

- Develop a capital plan that aligns with clinical service frameworks/plans
- Seek every opportunity for capital investment to ensure our facilities are fit for purpose
- Work in partnership with Health Infrastructure on delivering capital projects
- Incorporate technology/telehealth capacity in all capital projects

Financial Sustainability
Improve our organisational financial performance

To achieve this we will:

- Achieve our Sustainability Framework (2018-2020)
- Ensure cost of service benchmarks are a key measure of service performance
- Maintain value for money in service development and review
- Increase efficiency and consider a return on investment for new services and monitor and review progress
- Evaluate and seek efficient approaches to service delivery-contrast and compare with like services
- Focus on efficiency and improvement strategies
- Monitor and review service performance to budget, including escalation and review processes
- Build financial literacy, analysis and reporting capability

“Our organisation is focused on providing affordable, effective and accessible healthcare in an environment of rapid change and complexity. Our strategies are positioning the organisation to be digitally enabled, consumer centric and to have flexible operating models.”

– Jill Ludford, Chief Executive
Implementation and progress of actions against each priority, will be measured through MLHD annual reports and against Ministry of Health service performance agreements.

Key performance indicators:

| **Utilisation of services** | Meet or exceed service performance agreement measures; e.g. potentially preventable hospital admissions, length of stay rates, mental health and primary health indicators |
| **Quality indicators and results** | Accreditation results and recommendations, monitor, address and prevent adverse events e.g. falls prevention and hospital acquired complications |
| **Population health indicators** | Health indicators including smoking rates, physical activity and weight management across all ages |
| **Patient feedback, experience and satisfaction rates** | Measured by the Bureau of Health Information Admitted Patient Survey, Mental Health Your Experience Survey (YES), MLHD Real Time Patient Survey data and Patient Reported Experience/Outcome Measures as part of MLHD’s Leading Better Value Care initiatives |
| **Employee engagement, satisfaction and culture index rates** | Measured by the NSW Public Sector People Matter Employee Survey |
| **Financial performance and sustainability** | Strong financial performance results; zero variance to expenditure budget and own source revenue is match to budget. |
| **Digitalisation of health service** | Includes telehealth and electronic medical record implementation |

**Longer term measures of success:**

- Increased life expectancy
- Reduction in travel for staff, patients and consumers
- Significant reduction in potentially preventable hospitalisations
- Population’s health ratings
- Leading the state with clinical and financial performance

“We are determined to broaden our use of innovation, research and partnerships to anticipate challenges and take advantage of opportunities. Our vision is fresh, our priorities are clear and our commitment is solid.” — MLHD Strategic Plan 2016-2021
Definitions

ACI  
Agency for Clinical Innovation

COPD  
Chronic Obstructive Pulmonary Disease; long term lung condition / respiratory disease

eMR  
Electronic Medical Records

eMeds  
Electronic Medication Records

KPIs  
Key Performance Indicators

LBVC  
Leading Better Value Care; state-wide program transforming how we deliver care

MHDA  
Mental Health and Drug and Alcohol

MLHD  
Murrumbidgee Local Health District

MPHN  
Murrumbidgee Primary Health Network

MPS  
Multipurpose Services

NSQHS  
National Safety and Quality Health Service Standards (second edition)

Standard 1 – Clinical Governance
Standard 2 – Partnering with Consumers
Standard 3 – Preventing and Controlling Healthcare, Associated Infection
Standard 4 – Medication Safety
Standard 5 – Comprehensive Care
Standard 6 – Communicating for Safety
Standard 7 – Blood Management
Standard 8 – Recognising and Responding to Acute Deterioration

NSW  
The State of New South Wales

OPOF  
Our People, Our Future

The MAP  
The Murrumbidgee Action Plan 2015-2018 (expired)

WWBH  
Wagga Wagga Base Hospital

MLHD References

1. MLHD Strategic Plan 2016-2021; released March 2016
2. Sustainability Framework 2018-2020; developed August 2018
3. MLHD Annual Plans; accessed October 2018
   - District Operational Plan 2018-19
   - Accountability Framework 2018-2020
   - Our Goals 2018-19

Data Sources:

- ^ Murrumbidgee Primary Health Needs Assessment 2019-2022, accessed October 2018
- HealthStats NSW, accessed August 2018 (behavioural risks, leading causes, and hospitalisation)
- MLHD Headcount Data - MLHD BI Report. Source data: “HealthShare Hyperion Dataset”.
- ^ Need for Assistance – ABS, Census 2016 compiled (Kim Gilchrist, MLHD Epidemiologist).

*MLHD acknowledges the structure of this plan is adapted from the Western NSW Local Health District Strategic Plan 2016-2020.*
Appendix 1
Consultation for Future Directions of MLHD 2018-2021

During June and July 2018, a small project team undertook a number of community and staff consultations seeking information on MLHD’s future directions. This document was developed on considerations of the future needs of our communities and configuration of community and health services to meet those needs.

Consultations held between 26 June and 27 July, visiting:
- Tumut
- Young
- Cootamundra
- Griffith
- Leeton
- Narrandera
- Wagga Wagga
- Deniliquin
- Berrigan
- Corowa

A number of opportunities to ‘have your say’ on the future directions of MLHD were also provided online and via teleconference for those not able to make a face to face session around the district. There main questions were asked;

1. What future do we want to create?
2. What are the significant health or social issues for your community?
3. What can we do as a community to make change happen?

A number of stakeholders were included in sessions, including:
- Local Health Advisory Committee
- Aboriginal community representatives
- Multicultural groups in Griffith (represented by six nationalities)
- Murrumbidgee Primary Health Network
- Riverina Medical and Dental Aboriginal Corporation
- Local Governments (representation from multiple Councils)
- Clinicians
- Staff and volunteers
- MLHD Board and Executives

Overall, 30 consultations with over 200 people in attendance were held seeking input into this document; Our Communities Our Future – Healthier Together.

During consultations, staff and community representatives were also asked online to provide input in titling this plan. Responses received noted a clear favourite (38% of all respondents), which was supported and endorsed by MLHD Senior Executive Committee in August 2018.
Key themes were identified during consultation, across all stakeholder groups:

- Compassionate approach remains a priority for staff and communities – “we are there when people need us”
- Staff and communities are supportive of new models of care if developed in partnership and accept that services will need to be delivered differently in the future – “do it with us, not to us”
- Consumers are supportive of new models, if it means they can access more services closer to home, and are willing to try a different focus
- Wellness approach to health remains a dominant future model; keeping people healthy and at home longer, with better health outcomes
- More real time, direct access to service inclusive of technology
- Expand and increase the utilisation of telehealth and technology, providing it is simple, reliable and culturally appropriate
- The final document should be community-minded and accessible to all; noting the length and complexity of previous plans (The Murrumbidgee Action Plan)

MLHD will continue to engage and consult with consumers and the wider community to ensure this plan delivers for the organisation and the community. By listening and working with our communities and partners we will ensure care provided is safe, compassionate, coordinated and trusted across our region.

Figure 1. Excerpts from consultations presentations held with Stakeholders
Our Communities, Our Future

Healthier Together

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