



Mercy Health

Care first

Mercy Hospital for Women

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MERCY HOSPITAL FOR WOMEN

LONG-TERM PLAN 2008-2018

Mercy Hospital for Women is a public tertiary specialist teaching hospital, which cares for women and babies from across Victoria. The hospital is managed by Mercy Health & Aged Care – a Catholic community benefit organisation, founded by the Sisters of Mercy. From 2008, Mercy Health & Aged Care will be known as Mercy Health, with a new logo used throughout this document. The new 'care first' motto embodies what Mercy has always been about – following Jesus Christ in his mission of mercy through the delivery of health, aged care and community services.

Our vision is to build an enduring capacity and passion to serve those with special needs. To achieve this, Mercy Hospital for Women is committed to being Victoria's leading provider of tertiary health and education in maternity, gynaecology and neonatal services.

Compassion
Respect
Innovation
Stewardship
Teamwork

Executive summary

After 30 years of service in central Melbourne, Mercy Hospital for Women relocated to Heidelberg in 2005 to form part of Australia's largest health precinct. On moving to Heidelberg it became apparent that the hospital had to secure a new future to ensure its long-term viability.

Mercy Hospital for Women is one of the leading providers of maternity/obstetrics, gynaecology and neonatal services in Australia. The service boasts some of Victoria's most respected health care professionals who work together under the Mercy values to deliver high quality health services to women and babies.

The hospital's senior staff have worked together to develop this long-term plan. The plan articulates strategies that will be developed over the next 10 years to ensure the hospital maintains its high quality reputation and continues to provide clinical excellence in women's and babies' health.

The hospital will build on its research, training and education reputation. This will contribute to the hospital's ongoing development of services and staff.

The future will see an increased focus on the development and achievement of gynaecology and specialist gynaecology services while not compromising the hospital's ability to respond to some of the state's most vulnerable expectant mothers and newborn babies.

The hospital will continue to advance models of care and develop specialist women's allied health and clinical support services. It will also continue to work with families of young children who are 'at risk' in terms of growth and development following pre-term birth, and deal with the provisions of parenting.

There will be a significant focus on the development of strategic partnerships with other services, health care professionals and communities to ensure the long-term sustainability of the hospital and its provision of specialist women's and newborn babies' health services.

This paper outlines the major principles and operational objectives needed to secure our long-term vision of being the leading provider of tertiary health and education in maternity, gynaecology and neonatal services that responds to the Victorian community.

Background

Mercy Hospital for Women is a major public teaching hospital with 229 beds; one of Victoria's largest maternity hospitals, and home to one of four Neonatal Intensive Care Units in the state. It is affiliated with a number of universities including the University of Melbourne and LaTrobe University. The hospital is a leader in women's health management, a major teaching institution and the regional centre for maternity services, general and specialist gynaecology and neonatology.

After more than 33 years at a prominent East Melbourne site, Mercy Hospital for Women relocated in 2005 to a new state-of-the-art facility in Heidelberg, alongside the Austin Hospital. This move enabled the development of one of Australia's most innovative and technologically advanced tertiary referral and teaching women's and neonatal hospitals. It also provided staff with the opportunity to work in a state-of-the-art teaching and learning institution.

In its new location, the hospital now responds to different local community issues while continuing its strong tradition of providing the highest quality women's and newborn babies' health care and management services to more than one third of Victoria's population.

With the relocation and the global transformation of health care in the world, Mercy Hospital for Women seeks to develop new and appropriate strategic priorities in service provision and advancement. These priorities include how to respond to demographic changes and other factors that impact on service provision; how to deliver services in light of technological advances, changes in models of care and clinical practices; and finally how to survive the impacts of policy and its costs on health care delivery. Developed by Mercy Hospital for Women's leaders in health care provision, this document outlines the future direction of the hospital as it attempts to meet these many and varied challenges.



Mercy Health – strategic objectives

Mercy Hospital for Women is governed by the Board of Mercy Health.

This plan outlines the key issues for the hospital over the next 10 years within the context of the following five high level strategic objectives, which guide the development of all Mercy Health services.

Strategic Objective 1

Build a culture that is passionate about serving people through the Mercy mission.

Embedding the Mercy mission and tradition in all of our staff is a key objective.

We believe in creating a shared understanding of the purpose, values and associated behaviours about what we do and why we do it.

In supporting this culture we will be able to deliver high quality efficient and effective services to our communities in a manner that is consistent with our values and the required state policies.

Strategic Objective 2

Ensure that as an organisation we keep up to date with and respond to changing needs.

Mercy Health is committed to ensuring its reputation as an excellent provider of health and aged care services to Victorians is both maintained and enhanced. We strive for a capacity to identify changing needs and a well developed ability to rapidly respond in both decision making and resources.

In developing and maintaining a learning and innovative environment, we will strengthen our ability and reputation as an organisation that makes a difference.

Strategic Objective 3

Work towards ensuring appropriate health, aged care and community services are available to all who need them, especially those with special needs.

We want to be recognised as a leader in the provision of service to those in need and as an advocate for those in need. This includes being a respected provider of services in areas of special need and being a new contributor to the community.

Strategic Objective 4

Build on our reputation as an ethical and effective organisation delivering quality services.

Having clear business processes, which have ethical considerations embedded within is essential to the delivery of our services. We strive to link our ethical, values and quality frameworks into everyday decision making.

This ensures transparency and our sense of social accountability is robust. A shared understanding of what is ethical and why it is important, both as people and as an organisation provides us with a sound framework to review and deliver our current service and identify opportunities for expanding to meet future demand.

Strategic Objective 5

Build the financial resources to deliver our mission.

Ensuring we are able to deliver our services within a defined budget is essential in delivering our mission. This requires us to develop and maintain sound business and management processes and reporting structures. We use our critical mass to centralise finance systems and build robust and standardised processes and shared services where possible. These management processes and systems include ensuring we are providing our services in the most efficient manner and that we obtain the best use and flexibility from our facilities.

Achievement of these and all other strategic and long-term objectives will be managed and monitored in annual business plans.



Our current services – strengths and weaknesses

Mercy Hospital for Women has a strong history of providing high quality women's and neonatal services in Victoria. Our reputation as a tertiary women's and babies' hospital is well established, particularly in the areas of maternity, neonatal and specialist gynaecology services.

We are a well-regarded teaching and training institution for a range of professionals and have particularly strong relations with both the University of Melbourne and LaTrobe University, which support the clinical school of Medicine and Chair in Obstetrics and Gynaecology, and the clinical school of Midwifery and Chair in Midwifery and Neonatal Nursing respectively.

In addition to these professorial appointments, the service also boasts numerous associate professorial and other academic appointments in medicine, midwifery and allied health services.

Our research and academic program is strong in all areas, with significant research being undertaken in preventing the onset of pre-labour and understanding more about gestational diabetes.

Accordingly, we are seen as one of the leading training facilities in Victoria for maternity, obstetrics, gynaecology, paediatric and neonatal nursing and training.

Our clinical services are renowned for high quality care. With a strong presence of senior medical staff underpinned by a medical specialty unit structure we have been able to attract and retain some of the country's most respected medical professionals. Further, this structure has allowed us to obtain a reputation as one of the finest women's and babies' teaching and training hospitals in Australia. Relations between clinical staff are also strong.

There are some philosophical differences between professionals such as midwives and obstetricians, but in the main these are conducive to sound professional debate and subsequent improvements to patient outcomes.

The hospital has also experienced a history of strong relations between clinicians and management although this needs further strengthening.

Clinical indicators such as perinatal and infant morbidity and mortality, hospital acquired infection rates and medico legal claims all return favourable results evidencing high quality clinical services.

Coupled with these strengths are some weaknesses, which need to be addressed to further develop services.

With such a strong focus in obstetric/maternity and paediatric services, the development and advancement of gynaecology services has not received the same priority. The leadership of our general gynaecology services needs to be addressed to ensure the future growth of this important area.

Growth of our general gynaecology service needs to be prioritised and coordinated in a manner that does not negatively impact on other services, but which also promotes the ongoing development of our specialist gynaecology services for which we have become renowned.

Specific consideration must be given to ensuring our service is clear about what it provides and why.

There are numerous advantages of being a public hospital governed by a Catholic community benefit organisation. However, in the area of women's health this also presents some challenges.

There are limitations in the types of services provided particularly in gynaecology and reproductive medicine. Further discussion and clarification on how we ensure consistent and appropriate communication and help women and referrers to navigate the health system appropriately needs to be given attention.

We also need to invest time and funds into developing our research agenda, particularly in gynaecology, and improve processes for measuring research outcomes.

Further attention must be given to the development of consistent and contemporary clinical governance and assurance processes. This includes the development and standardisation of clinical audit processes and practices as well as the implementation of a standardised credentialing and competency assurance framework for clinical services.

Finally, with changes to the hospital's management structure, professional and operational reporting lines will need clarification.

The future – our vision, aspirations and commitments

Mercy Hospital for Women is one of Victoria's most recognised hospitals, having provided women's health, gynaecology, maternity and neonatal care to Victorians since 1971.

Following relocation from East Melbourne to the new facility in Heidelberg, we are now one of the most modern and technologically advanced women's hospitals in Australia.

Our aim now is to continue to build on our reputation as a quality provider of women's and babies' health services and ensure that we remain at the cutting edge as a specialist teaching hospital.

However, remaining a leader in any field of health care is becoming increasingly difficult. Health services throughout the world are in a state of transformation as they begin to respond to changing trends and future challenges in health care delivery.

In an effort to remain a contemporary leader in women's health, Mercy Hospital for Women will deliver women's health services.

The hospital will strengthen its general and specialist gynaecology services to ensure it can offer women a broad range of services and meet the training and development needs of the future workforce.

The hospital will develop a high profile in the local and regional community and will have processes in place to ensure consumers have input into service design and delivery.

Strategic partnerships will be forged with private and public services as well as other health care providers to ensure the hospital is leading the delivery of women's health services provided in the right setting and across all levels of health care.

Alternate models of care will be developed to acknowledge skill shortages in specific areas without compromising overall care.

Our academic and research program and affiliation will be extended and developed, especially in the areas of neonatal medicine and gynaecology.

Specialist gynaecology services will continue to be advanced and the hospital will be a central referral and specialist provider for these services in the state.

As a leading provider of general and specialist women's health services, Mercy Hospital for Women will be a central figure in advocating for the development and improvement of women's health services in Victoria and nationally.

Our models of clinical care in women's health continue to advance preventative care and disease management strategies.

As with health services universally, Mercy Hospital for Women will face challenges to sustainability involving cost, quality and consumer trust.

The hospital will develop improved competency assurance processes to meet the expectations of the empowered consumer. Such processes will need to be consistent and transparent, and as a minimum meet the emerging standards for audit and assurance programs and the principles of open disclosure.

Developments in Information and Communication Technology (ICT) will enhance improvements in this area and allow the hospital to respond to a range of solutions in health care.

All these developments come at a cost and a significant future issue for Mercy Hospital for Women will be how future funding is applied.

Health spending is expected to increase at a much higher level of growth than in the past. It is estimated by some researchers that costs will triple in real dollar terms over the next 12 years.



Key priorities

The next 10 years will bring many challenges for Mercy Hospital for Women. To meet these we have established a number of key priorities.

Most importantly the hospital will continue to provide high quality, outcome focused care for women and babies in Victoria.

To continue providing high quality specialist services and maintain our commitment to training and education in women's and babies' health we must ensure equal focus on maternity, neonatal and general women's health services.

A key focus of the hospital over the coming years will be to develop and enhance its women's health services with a focus on general and specialist gynaecology services.

This will mean that management and clinical support services will be structured in a manner to support the development of three major clinical areas: gynaecology/women's health, maternity/obstetric care and neonatal paediatric services.

The hospital will continue its uncompromised focus on women's and newborn babies' health and use this to advocate and influence public policy.

The focus on the service's commitment to research and development in the three areas of speciality will continue.

As a leading women's and newborn babies' health service, Mercy Hospital for Women will actively develop new models of care and where possible lead and direct changes in clinical care. This will include developing new models of care outside the hospital's wall and developing mechanisms to support complementary services.

Finally, the hospital will continue to expand its links with the O'Connell Family Centre and build on its current work in providing ongoing and early parenting services to at risk families.

Mercy Hospital for Women's priorities for the future are:

1. Develop strategic partnerships with services to ensure the provision of contemporary high quality women's, babies' and at risk family health services in Victoria.
2. Ensure research, teaching and training development in all three areas of speciality and in areas of strategic priority including:
 - Support a rich teaching and learning culture for students, trainees and staff.
 - Enhance aspects of training, development and support in specialist clinical practice in Victoria and Australia.
3. Implement best practice in managing people, teams, resources and systems ensuring compassion and respect for all people at all times.
4. Develop community partnerships to ensure consumer involvement in service design and delivery.
5. Develop an advocacy agenda and ensure the organisation represents its client group and responds to public policy.
6. Enhance all aspects of care for women and babies with a focus on developing tertiary models of care.



Developing strategic partnerships

A key element to the future delivery of health services will be the need to develop strategic partnerships with a range of public and private providers.

One of the major issues affecting the long-term viability of our service will be the issue of funding. With growth in health expenditure increasing, more effort will need to be made on ensuring common and complementary approaches to health care provision.

The development of common policy and funding platforms that promote public and private services working together as equal partners in health care provision is required, but responsibility rests mainly with the government. Nonetheless, Mercy Hospital for Women must prepare itself to respond to changes in public policy and be in a position to effectively advocate for an appropriate funding and policy framework for its services. A future focus should be on the development of collaborative models of care based on health care outcomes. Such initiatives will not only provide innovative and more sustainable models of care, they will be essential in attracting and retaining a future workforce. The hospital will also need to develop local alliances and frameworks aimed at improving the wellbeing of those it serves.

As a tertiary service we need to take a lead in the training, development and support of non-tertiary sites. To continue to provide a full range of women's health services and advance our tertiary and specialist care, we need to ensure alliances are in place with other non-tertiary providers and health service practitioners.

As systems are reviewed we need to advocate that those most at risk are not unjustly disadvantaged. Such alliances have already commenced with integrated cancer services and palliative care consortiums. Models of care involving general practitioners have been developed and will require further enhancement.

To be sustainable in the health care industry one cannot rely simply on government funding. There will need to be an increased focus on the development of revenue opportunities and private partnerships. Where there are limited opportunities for such ventures, alternative funding mechanisms with the government will need to be advocated and negotiated.

Developing strategic partnerships – operational priorities

- Develop collaborative models of care that ensure patients have access to the most appropriate service for their particular need.
- Develop partnerships that support non-tertiary metropolitan and rural hospitals in maintaining and developing local neonatal, maternity/obstetric and gynaecology services.
- Ensure the availability of tertiary women's health services by developing referral pathways/demand management algorithms for the referral and treatment of maternity/obstetric patients.
- Continue to build on the shared care model of service provision in women's health.
- Continue to develop women's health education development programs and market these to the primary and secondary health care sectors.
- Maintain relations with like institutions and benchmark services accordingly.
- Develop close relations with Warringal Hospital to attract private maternity beds to the region.
- Ensure representation on local, national and international peak bodies.
- Build relations with women's health services both regionally and nationally.
- Plan and develop services in our region in response to community needs.
- Develop partnerships with clinical areas within Austin Health, which can advance the provision of women's health services.
- Maintain close relations with state and federal funding and policy bodies to influence direction and outcomes for women's health.
- Maintain close relations with peak professional bodies to ensure women's health issues are advanced and professional standards are appropriate.
- Participate in collaborative ventures aimed at improving care for women and babies in Victoria.
- Support new models of service delivery and develop new services e.g. super clinics, maternity and child psychiatric services, well women's services.
- Develop relationships with non government professional advocacy groups within areas of service provision.
- Develop strong partnerships with local councils and community organisations to improve services to women and disadvantaged groups in the region.
- Further develop relationships with Aboriginal women to ensure we continue to respond to their health care needs in an appropriate and sensitive way.

Research, education and development



Mercy Hospital for Women aims to achieve national excellence in all types of development and research it undertakes.

The hospital will articulate a research and development agenda to outline the key areas of research that will be supported, and will promote opportunities for staff to achieve these.

Research will be supported and acknowledged as a significant component of clinical work and considered in workforce planning initiatives. This will include assisting in fundamental, curiosity driven work to improve the knowledge of women's or babies' health issues through to applied research that can result in treatment and clinical advancement.

There is a need for ongoing research and development in new and alternate treatment options, and in how health services put research and development into practice. The hospital will advance multidisciplinary research initiatives.

The continued development of strategic alliances between professionals and academic agencies will complement work in research, education and development.

Research will be used to advance care and services to our clients. The hospital will also ensure that learning experiences are actively promoted and supported.

Structured learning programs will be in place in all areas of specialty. Programs will be built with an emphasis on promoting independent learning and team interaction.

Education programs will be available both internally and externally and the hospital will continue its key role in providing advanced training and support in the areas of specialist and general maternity/obstetrics, gynaecology, neonatal and at risk family services.

Advances in technology will be needed to achieve this environment. Importantly, as we advance technology to support us in the provision of high quality health services we will also need to up-skill staff in information technology platforms and the resulting changes in jobs and processes.

Research, education and development – operational priorities

- Improve the hospital's research performance in obstetrics, maternity, neonatal, growth and development, specialist gynaecology and women's health.
- Maintain links with universities and support the placement of academic chair positions to lead collaborative research and training opportunities.
- Advance research into women's health with a view to establish a leadership chair in women's health or gynaecology women's health.
- Develop relationships and opportunities with other service providers for collaborative research projects.
- Provide opportunities for staff to develop their research capabilities and promote service development.
- Ensure all staff have access to training and development opportunities.
- Seek opportunities to improve collaboration and strategic partnerships in teaching and learning with other health services locally, nationally and internationally.
- Build opportunities to provide training and support in areas of clinical practice to non-tertiary services and providers.
- Provide development opportunities to support all staff in being proficient in principles and practices of teaching and education.
- Increase the use of smart technologies to make learning, education and development more effective for staff, students and trainees.
- Develop an ongoing and regular multidisciplinary information forum (i.e. grand round) to encourage a culture of learning and innovation within Mercy Hospital for Women and across Victoria.
- Develop a regular Mercy Hospital for Women conference to share information and developments with local and national practitioners and services.
- Ensure our continued development and presence in bioethics especially as it relates to the delivery of women's and babies' health.
- Continuous improvement in treatment, efficiency and outcomes.

Management and resources



With finite resources there is a need to ensure that allocation satisfies competing demands on systems to control costs while providing sufficient access to care for most people.

Forecasts for in-patient services to 2011–2012 indicate continuing growth in demand. This is not associated with changes in technology or an ageing population, but with population growth in Victoria.

Continuing pressure on services will require us to ensure our resources are deployed in the most appropriate manner, at the most appropriate time and in the most appropriate place.

To achieve this, the hospital will need effective management structures, and policies and systems aimed at ensuring the effective, efficient and economic delivery of care.

Processes will need to ensure the devolvement of resources to the most appropriate level to ensure the hospital's clinical areas take responsibility for implementing the strategic directions of this plan.

There will need to be transparent processes in place and information will be available to demonstrate quality service delivery for staff and consumers.

Our people will be engaged in the need to improve our services and ensure our policies and practices are consistent with our mission and values.

Systems and processes for managing services and monitoring compliance need to be standardised and made user-friendly to ensure greater understanding of expenses and service outcomes. Robust processes will need to be in place to regularly and consistently evaluate models of care, determine their appropriateness and efficiency and implement changes where needed.

Processes to predict changes in demand or service provision will need to be refined to ensure service provision is maintained and developed in a planned and considered manner.

Finally, where possible shared management infrastructure should be fostered to reduce costs and allow economies of scale.

Management and resources – operational priorities

- Develop a transparent management framework, which promotes clinical involvement in decision making.
- Implement modern systems which support clinical practice and effective health service management.
- Ensure all areas of the hospital participate in long-term and annual business planning and evaluation, and that staff performance objectives are aligned to these plans.
- Where possible participate in organisational, divisional and departmental benchmarking exercises.
- Maintain strong links with the Department of Human Services and funding bodies.
- Maintain a focus on effective financial and clinical management.
- Improve contract management.
- Maintain quality accreditation with the national body.
- Implement modern and user-friendly financial and operational management systems.
- Maintain effective and accurate clinical costing information and work with the state and other like services in managing costs.
- Identify and develop supplementary funding streams.
- Ensure effective communication within the hospital and between the three clinical divisions.
- Ensure effective working relationships and clear lines of accountability and responsibility.
- Develop strategies to limit the risk of increasing demand for various services.
- Develop forecasting processes and use them to predict and manage demand.
- Ensure activity is matched to requirements including services, training, development and research.
- Ensure efficiency and market competitiveness in terms of both value for money and quality of service.
- Ensure effective clinical governance processes are in place.
- Ensure robust risk management and risk avoidance processes are in place with particular emphasis on preventing and effectively managing clinical risks.
- Further develop robust methods of competency assurance to ensure the organisation can determine and manage its ability to provide the quality, range and type of services required.



Community partnerships – keeping close to our community

Mercy Health is committed to social accountability. The need for any hospital or community service to stay close to its community is obvious.

The hospital will develop closer links with the wider community. Stakeholder relationships will remain a central focus of service delivery and strategies to improve these will continue to be refined and developed in line with the organisational values and strategic objectives.

Strategic partnerships with local communities will be enhanced and established to reflect our overall priorities and service direction. With a state-wide service mandate, processes will not be limited to an advisory committee but to a range of options that obtain feedback from the many local and regional communities served by Mercy Hospital for Women.

These processes will increase liaison with our local communities and seek feedback from them on perceived needs and important health issues affecting services. They will ensure our models of care and planning maintain a community/consumer focus and that community perspectives are factored into innovations of care delivery.

The hospital will foster and collaborate with the health industry (and other relevant industries) on activities that promote community benefit. We will actively promote health care for women, babies and families as underpinning the economic health and wellbeing of our country.

As an organisation committed to social accountability we will ensure that when health care policies and systems are reviewed, we advocate that those most at risk are not unjustly disadvantaged.

Community partnerships – operational priorities

- Develop a community action plan outlining how the hospital contributes and stays close to its community.
- Develop a community advisory committee.
- Develop community feedback mechanisms that capture state-wide information or feedback, such as country and regional forums.
- In partnerships with communities, government, local providers and other services, identify needs that the hospital is well-placed to address.
- Have a pivotal role in leading discussions within the community on cultural, ethical and social issues that affect the advancement of women's, babies' and at risk families' health.
- Refine processes that advocate for those most in need.
- Participate in local collaborative processes established to meet the needs of specific client groups.
- Ensure regular communication and cooperation with other community health care providers in the provision of accessible women's, babies' and at risk family services to communities in Victoria.
- Develop links with specific communities and special interest groups.
- Further develop processes to ensure minority groups are not disadvantaged.
- Develop processes for the engagement of those who might be marginalised due to race, culture and spiritual beliefs.
- Maintain links with local service organisations and key community organisations.
- Introduce consumer representatives on specific committees to oversee quality access and provision of health services.
- Refine processes for obtaining client and community feedback, including patient satisfaction surveys, suggestions and other processes.
- Increase awareness in the local, regional, national and international community of the hospital's excellence in service provision, research and education.
- Develop and refine the range and types of education and development programs in women's, babies' and family health offered to communities by the hospital.

Service delivery and our people

The need for flexible care settings and employment is essential for sustainability and the provision of care in the future.

With changing technology some positions are becoming redundant while new ones are developing. This is occurring in health care whereby technology and advances in medicine are seeing higher specialisation of health care workers.

Educationalists in Australia are also advising that as the technology age advances, almost half the children currently in primary school will enter professions yet to be developed.

These issues will see a shortage of qualified health care professionals. These shortages will be worsened by population shifts, competition to secure resource and globalisation of the workforce. While some use of technology and specialised community based services will hopefully see a reduction in the number of clinicians required in the future, a skill shortage is still inevitable.

Future policy will focus on ensuring the reduction of bottlenecks in hospitals to ensure the system is not overburdened by demand. Current workforce models need to be reviewed.

The role of the generic health care worker will need further review and the reintroduction of alternate carers such as enrolled nurses and personal care attendants in hospitals will need to be considered.

Further developments of the nurse practitioner role will need to occur, not based on the past premise of cheaper health care options but on providing genuine alternatives to medical practitioners. Of course the greater specialisation of nursing will also see shortages in specific areas.

The future health care workforce will be vastly different to what we have today. The changes will occur with the expectation that quality or competency also improve.

To achieve this, the health system will need to review conventional training and licencing practices and review the current competency assurance frameworks.

While there are current developments in this area, strong clinical leadership will be essential and so will incentives to attract and retain our people.

Service delivery and our people – operational priorities

- Develop and implement a human resources strategy.
- Develop processes to be an employer of first choice.
- Continue developing formal links with universities to promote the development of our staff.
- Ensure the provision of a contemporary information technology system for employees.
- Ensure education, training and development opportunities are available to medical, nursing, midwifery, allied health and other professional staff.
- Develop online education and training opportunities to improve staff access to development initiatives.
- Develop online services for employees.
- Develop initiatives to improve staff climate and culture.
- Refine succession planning processes and ensure long-term plans target recruiting priorities.
- Ensure models of care reflect contemporary practice and staff are supported to achieve outcomes.
- Ensure the Mercy values are reflected in all we do.
- Maintain a medical unit structure and the strong presence of senior medical staff for patient outcomes and teaching and training.
- Confirm and maintain the role of the volunteer and provide training and development opportunities.
- Work with staff and peak bodies to identify and develop alternate workers, including investigating the roles of nurse practitioner and division one and two registered nurses in midwifery.
- Appoint a dedicated director of gynaecology to advance the hospital's status in specialist and general gynaecology services.
- Investigate and address issues and barriers to service provision and the attraction and retention of staff.
- Respond to the changing demographic demands by developing and upskilling our people for cultural competency.
- Strengthen and develop allied health and clinical support services.
- Maintain strong links with general practitioners and develop innovative models of care.

High quality women's and babies' health services

There is a defined need for mandatory clinical standards and the establishment of mechanisms for accountability and enhanced transparency, which builds consumer trust.

Well defined quality standards will be developed to ensure effective health care delivery. There are currently national and state policy and funding incentives to promote quality and safety in health care. Programs such as open disclosure and the introduction of clinical governance frameworks provide significant developments in this area.

Assurance frameworks will be refined with further development of audit processes. However, for this to be successful, error reporting must be voluntary, anonymous and without fear of disciplinary procedures. The adoption of 'learning organisations' principles and the associated policy frameworks to ensure these can exist is essential.

Continued focus will be given to risk management and avoidance, with clinical risk management attracting significant attention.

Accreditation will continue to be a major focus for service delivery. While peer review systems of accreditation might continue (e.g. EQUiP), there will be an increased focus on ensuring these systems provide consistent outcomes.

Technological advances in health are critical. By adopting advances we can accelerate integration, standardisation and knowledge transfer of clinical and administrative information.

The development of electronic solutions will greatly enhance how we deliver our health services. Technology developments will also advance clinical practice and continue to occur at a rapid pace, both improving treatment options and also escalating care costs. This is a challenge for public health care providers where the investment in such developments must continually be analysed against immediate opportunity costs.

High quality women's and babies' health services – operational priorities

- Refine clinical governance practices and processes.
- Review and refine clinical audit processes ensuring a common platform is in place to identify trends and address concerns.
- Develop and implement open disclosure principles and processes.
- Improve care coordination services and implement processes that help clients navigate the complex health system.
- Improve service provision to regional services by using technology such as telemedicine and online care.
- Ensure processes are in place to evaluate new technologies and their impact on the care of women and babies.
- Develop an advocacy agency and respond to public policy in the area of women's and newborn babies' health.
- Development of the 'Client for Life' concept where women choosing Mercy Hospital for Women are informed and encouraged to maintain contact with the service for all women's health needs in the future.
- Refine and develop our gynaecology services, training and development.
- Articulate and educate on our approach to gynaecology services.
- Improve and increase our mental health services.
- Advance work in allied health and clinical support services such as diabetes, obesity, lymphoedema, women's health, physiotherapy, oncology, etc.
- Ensure the provision of a contemporary information technology system.
- Ensure the capacity to respond to the rapid development of technology and implement solutions that enable clinical staff to provide efficient and effective high quality care.
- Develop capabilities for data, voice and video technologies to improve effectiveness and reduce staff workloads.
- Implement an electronic health record and picture archiving services.

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