



*Connecting health to meet local needs*

## **2012-14 Strategic Plan**

# **Bentley-Armadale Medicare Local**

## Document History

This table is to record the document's history, ie dates of submission and any resubmission to the Department following revisions. As each version is drafted and submitted, the version number and summary of changes made should be recorded below:

Version No.	Date	Description of Revision
1	18/08/12	First Draft
2	24/08/12	Revision1
3	27/08/12	Final Draft v1
4	31/08/2012	Final Draft
5	25/09/12	Submitted to DoHA
6	27/3/2013	Amended to Annual Plan Mission/Vision and Values

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# 1 Introduction

In developing this strategic plan, we have drawn on the input and extensive knowledge and expertise of our people, managers and directors. In future years, as we build strong linkages and relationships with our external stakeholders we will also draw heavily on their expertise and views.

We have considered our strategic direction, mission and vision within the context of our region's needs and specific characteristics as well as within the context of the National Health Reform Agenda and are confident that this strategic plan will serve as a blueprint to transform the way that primary health care needs of our community are met and anticipated. It is meant to be a living document that will evolve over the next two years as we mature as an organisation and fully grow into the role of catalyst of better health outcomes for our community.

## 2 Strategic Direction

By June 2014 the Bentley-Armadale Medicare Local (BAML) will be a respected, well-known and high credibility organisation working in true partnership with all our stakeholders including consumers, service providers, Local Hospital Networks (LHN), NGOs, local government and State and Federal agencies. BAML will be the first port of call for information or advice about or support for primary health care initiatives in our region and will take a proactive role in influencing policy on primary health issues at a state and national level.

The primary health care needs of our region will have been assessed in a professional and collaborative manner. We will have gathered and analysed high quality data using contemporary technology and leveraging our strong capabilities in this area. Our community will feel that its input is welcomed and its concerns are heard as we strive for regular engagement in the form of forums and surveys.

We will have started to work with stakeholders such as LHNs, service providers, local government to integrate and coordinate the provision of the services our community needs, where it needs them. As a first step we will have mapped the existing services and created an up to date and comprehensive directory available to professionals and consumers seeking appropriate pathways. We will have started to streamline the offer to eliminate redundant services and respond to the most urgent needs and begun the process of collaboratively plan the future of our regions' service delivery.

We will continue to make strong headways by building on our highly successful and recognised Aboriginal Health, Mental Health, Chronic Disease Management (CDM) and Clinical Services programs and making linkages with other service providers and organisations.

Our philosophy of integrated, holistic and supportive care and emphasis on prevention will drive our planning efforts - led by our new Population & Health Services team - and we will have started to implement coordinated programs aimed at having a noticeable impact on the health choice of our community.

Internally, we will have gained accreditation by working to rigorous standards of quality and safety. Our organisation will pride itself of an open and embracing culture and a bonded team of passionate and professional people who feel supported and adequately resourced in their drive to make a difference to our community.

In summary:

**Our Mission** is to

Plan and coordinate high quality, accessible and sustainable services to meet the primary healthcare needs of all members of our community.

**Our Vision** is to

Promote a culture of collaboration and high quality service delivery will be enabled through the coordination of integrated primary health care services that meet the needs of our local communities.

**Values**

The values that drive everything we do are:

- **C**are;
- **C**ommitment;
- **C**ollaboration; and
- **E**xcellence

### 3 Opportunities and Challenges

In developing our strategic plan, we have undertaken a broad environmental scan of the factors that are likely to impact on our ability to deliver our purpose and achieve our vision. As a result of our analysis we have identified the key challenges facing BAML and the opportunities available to us. They are described below:

#### **Challenges**

- Minimal collaboration between service providers, Department of Health WA (DOHWA), NGOs and other MLs.
- Shortage of primary health care providers particularly service providers who bulk-bill and service providers who are appropriately qualified to service the needs of specific population groups such as children.
- Patient access issues, particularly the lack of transport options or transport assistance services.
- Varying uptake of Information Management/ Information Technology (IM/IT) practices by primary care providers.
- Limited understanding of allied health practices and/or poor referral pathways.

#### ***Internal Challenge:***

- Transition smoothly from Canning Division of General Practice to BAML both in terms of our internal processes, our offices, the awareness and perception of external stakeholders.
- Meet the demands of our mission and vision with limited resources.
- Attract and retain quality staff in a competitive labour market.
- Build and refurbish our offices to professional standards and manage the move with minimal disruption to the operation.
- Maintain relationship with GP practices.

#### **Opportunities**

- Develop a deeper and evidence-based understanding of the specific primary health care needs of our region and its various areas.
- Create awareness amongst various stakeholders of the primary health reform agenda as it applies to our region.
- Bring together all appropriate stakeholders to plan and realise a truly integrated model of care for our region.
- Coordinate the delivery of flexible services to meet the specific requirements of groups.
- Coordinate the delivery of services targeted to the needs of specific population groups to ensure equitable services are tailored to their needs. These include in our region: Youths (preventive focus), the Aged, Aboriginal people, migrants especially those of non-English background, refugees, the homeless, families, children and chronic disease sufferers.
- Ensure a significant focus on the delivery and uptake of preventive health initiatives such as immunisation campaigns, parenting skills training, cooking classes, exercise sessions, weight-loss programs, eye-testing etc. for optimum health outcomes.

***Internal Opportunities:***

- Appoint and develop the skills of a high performing Board.
- Hone our internal communication processes to ensure inclusion of all team members in the organisations strategic objectives.
- Invest in the continuous training and development of our people.
- Maintain a sustainable company based on recognised governance principles (eg AICD) applying sound HR and work management systems.
- Establish Committees & Advisory Groups.

## 4 Goals, Strategies and Milestones

In developing this strategic plan, we have drawn on the input, knowledge and expertise of our people, managers and directors. We have considered our strategic direction, mission and vision within the context of our region's needs and specific characteristics as well as within the context of the National Health Reform Agenda. The following goals, strategies and milestones will take us a long way towards realising our vision.

### 4.1 Goals

The goals of the organisation for the next two years to 30 June 2014 must deliver on the organisation's strategic direction and vision to:

**Be recognised and valued by all stakeholders as the coordinator of primary health care that makes a tangible difference in our region**

BAML has decided to adopt the strategic objectives as our strategic goals for the duration of this strategic plan and beyond as they will drive us to achieve every aspect of our vision, address our challenges and leverage our opportunities as well as deliver on our remit as a Medicare Local. Furthermore, the adoption of the strategic objectives as our BAML goals will assist in simplifying our messages to our internal and external stakeholders and focus our strategies. Consequently, our goals for our 2012-14 Strategic Plan are:

1. Improve the patient journey in our region through developing integrated and coordinated services
2. Provide support to Clinicians and service providers in our region to improve patient care
3. Identify the health needs of local areas within our region and develop locally focused and responsive services
4. Facilitate the implementation and successful performance of primary health care initiatives and programs
5. Be efficient and accountable with strong governance and effective management



## 4.2 Strategies and Milestones

Each of our goals will be achieved through the implementation of a range of strategies and activities as described below. Some of our strategies will assist in the achievement of more than one of our goals / strategic objectives.

Goal 1: Improve the patient journey in our region through developing integrated and coordinated services							
Strategies	Milestones, Outputs and Outcomes	Timeframe	Strategic Objectives Met				
			1	2	3	4	5
1.1 Generate awareness of and support for primary health care services in our region	1.1.1 Development and implementation of a stakeholder management strategy that identifies all relevant stakeholders including patients, clinicians, local Hospital Networks(LHN) etc, their wants and needs, the relationship between them and the best way to engage them.	2012/13	✓		✓		
	1.1.2 Development and dissemination to stakeholders of a current directory and map of available services and service providers. Use the document as a tool to promote cooperation between providers and show gaps in service delivery as well as make it easier for patients to find the relevant services.	Directory 2012/13  Mapping 2013/14	✓	✓	✓		
	1.1.3 Creation of a representative Community Engagement Advisory Group to effectively engage our community and establish processes to obtain ongoing feedback on the quality, accessibility and sustainability of care in our region.	2012/13	✓	✓	✓		

Goal 1: Improve the patient journey in our region through developing integrated and coordinated services								
Strategies	Milestones, Outputs and Outcomes	Timeframe	Strategic Objectives Met					
			1	2	3	4	5	
1.2 Develop clear and shared models of care tailored to our region	1.2.1 Creation of a Population and Health Service Plan Advisory Group (PaHS) involving representatives of LHNs, service providers and the community.	2012/13	✓		✓			
	1.2.2 Development of a shared and endorsed Population and Health Service Plan.	2013/14	✓	✓	✓			
1.3 Implement integrated and coordinated services to meet the health needs of our region	1.3.1 Feasibility study in the creation of a referral pathways database.	2012/13	✓	✓	✓			
	1.3.2 Development, promotion and use of the database on the website.	2013/14	✓	✓	✓			
		2012/14	✓	✓	✓			
	1.3.3 Organisation and delivery of inter-professional education workshops focussing on effective integration and coordination of services.	2013/14	✓	✓	✓			
1.3.4 Implementation of services in the community that are currently offered only in hospitals (eg. Iron infusion clinics).								

Goal 2: Provide support to Clinicians and service providers in our region to improve patient care								
Strategies	Milestones, Outputs and Outcomes	Timeframe	Strategic Objectives Met					
			1	2	3	4	5	
2.1 Improve referral pathways by ensuring service providers are aware of each other and that all necessary information is available to service providers to effectively engage with clients	2.1.1 Creation of communication and information linkages between providers including LHNs to improve coordination.	2012/13	✓	✓				
	2.1.2 Promotion of best practice local and common templates for referrals and discharges.	2012/13	✓	✓	✓			
2.2. Support and promote e-Health initiatives with all groups of primary health care providers	2.2.1 Creation of a Population and Health Care support team to run workshops and go out to provide support to individual service providers as required.	2012/13		✓				
	2.2.2 Support visits to providers.	2012/13		✓				
	2.2.3 Workshops run.	2012/13		✓				
	2.2.5 Uptake rate of tools like e-Prescribing, PCEHR and secure messaging amongst providers in our region.	2012/14		✓			✓	
2.3 Explore the ability to work with service providers to make serving resource-intensive clients more viable	2.3.1 Implementation of educational events such as CDP events that meet the training requirements of providers within the BAML region.	2013/14		✓				
	2.3.2 Implementation of pilot support services such as team care arrangements, GP management plans and health checks.	2013/14	✓	✓				

<b>Goal 2: Provide support to Clinicians and service providers in our region to improve patient care</b>								
<b>Strategies</b>	<b>Milestones, Outputs and Outcomes</b>	<b>Timeframe</b>	<b>Strategic Objectives Met</b>					
			<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	
2.4 Encourage BAML service providers to keep up to date with contemporary professional development	2.4.1 Creation of a Clinical Governance Committee.	2012/13		✓		✓	✓	
2.5 Communicate up to date standards of safety and quality and best practice in primary health care services required to become an accredited practice	2.5.1 Provision of jointly run CPD workshops for primary health care providers.	2013/14		✓	✓	✓		
	2.5.2 Dissemination of relevant information in newsletters and on BAML's website.	2012/13		✓				
	2.5.3 Induction into the BAML region for newly established service providers.	2013/14		✓	✓			

<b>Goal 3: Identify the health needs of local areas within our region and develop locally focused and responsive services</b>								
<b>Strategies</b>	<b>Milestones, Outputs and Outcomes</b>	<b>Timeframe</b>	<b>Strategic Objectives Met</b>					
			<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	
3.1 Undertake a needs assessment jointly with LHNs, NGOs and other stakeholders by running focus group sessions, engaging with appropriate experts and analysing shared evidence-based data	3.1.1 Facilitation of Memorandums of Understanding between key stakeholders.	2012/13			✓			
	3.1.2 Creation and ongoing updating of a shared database of relevant data to plan for the region's needs now and in the future.	2012/14			✓			
	3.1.3 Needs Assessment 2012-14 endorsed by all key stakeholders.	2013/14			✓			

**Goal 3: Identify the health needs of local areas within our region and develop locally focused and responsive services**

<b>Strategies</b>	<b>Milestones, Outputs and Outcomes</b>	<b>Timeframe</b>	<b>Strategic Objectives Met</b>				
			<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
3.2. Collaboratively plan to address service delivery gaps and optimise the use of resources by <ul style="list-style-type: none"> <li>• Exploring alternative opportunities in the delivery of health care</li> <li>• Developing mechanisms to ensure consumers and the community have meaningful opportunities to engage</li> <li>• Identifying and recommending the streamlining of redundant and duplicated services</li> </ul>	3.2.1 Evidence of coordination and continuity of care <ul style="list-style-type: none"> <li>• Electronic surveys of patients and service providers.</li> <li>• Evaluation of BAML primary health care programs.</li> <li>• Outcomes of focus groups with community.</li> <li>• Recommendations of PAHSP Advisory Group.</li> </ul>	2012/14	✓	✓	✓		
3.3 Implement selected programs to address currently known gaps in service delivery	3.3.1 Delivery of affordable podiatry services for aged clients in the community.	2012/14	✓		✓		
	3.3.2 Delivery of an obesity program.	2012/13	✓		✓		
3.4 Influence the development of Government health reforms	3.4.1 Active participation in forums, working groups and conferences.	2012/13			✓	✓	

**Goal 4: Facilitate the implementation and successful performance of primary health care initiatives and programs**

Strategies	Milestones, Outputs and Outcomes	Timeframe	Strategic Objectives Met				
			1	2	3	4	5
<p>4.1 Build on and enhance current successful programs including:</p> <p>4.1.1 Chronic Disease Management</p> <p>4.1.2 Aboriginal Health</p> <p>4.1.3 Mental Health</p> <p>4.1.4 Clinical</p>	<p>4.1.1 Chronic Disease Management.</p> <ul style="list-style-type: none"> <li>• Increase in number of groups in the Heartbeat cardiac rehabilitation program.</li> <li>• Expand delivery of the Healthy Lifestyle Program.</li> <li>• Expansion of the delivery of chronic disease self-management programs including through train the trainer programs.</li> </ul> <p>4.1.2 Aboriginal Health</p> <ul style="list-style-type: none"> <li>• Evaluation and further improvement to the “Wangen linkage and brokerage service” to better tailor it to community needs.</li> <li>• Expansion of “GP Links”.</li> <li>• Expansion of the care coordination of “Closing the Gap” initiative by implementing a clinical outreach program.</li> <li>• Delivery of a maternal health program.</li> </ul> <p>4.1.3 Mental Health</p> <ul style="list-style-type: none"> <li>• Expansion of “In-Focus” program to meet community demand in local areas.</li> <li>• Establishment of a child equivalent program to the current adult “In-Focus” program.</li> <li>• Expansion of the referral base from local hospitals, GPs and other authorised providers.</li> <li>• Establishment of relationships in acute mental health care.</li> </ul>	2012/14	✓		✓	✓	
			✓		✓	✓	
			✓		✓	✓	

**Goal 4: Facilitate the implementation and successful performance of primary health care initiatives and programs**

<b>Strategies</b>	<b>Milestones, Outputs and Outcomes</b>	<b>Timeframe</b>	<b>Strategic Objectives Met</b>				
			<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
4.1 Build on and enhance current successful programs including: 4.1.1 Chronic Disease Management 4.1.2 Aboriginal Health 4.1.3 Mental Health 4.1.4 Clinical	4.1.4 Clinical Services <ul style="list-style-type: none"> <li>Review of After Hour services to meet needs assessment requirements.</li> <li>Feasibility study into an expansion of ante-natal and multicultural clinics.</li> <li>Feasibility study into the outsourcing of outpatient clinics in the community.</li> </ul>	2012/14	✓	✓	✓		
4.2 Coordinate the delivery of local primary health care reform initiatives	4.2.1 Coordination and integration of services offered to age care. 4.2.2 Improvement of immunisation rates to reach the National guidelines. 4.2.3 Establishment of a user-friendly resource to assist consumers and service providers find appropriate health services. 4.2.4 Promotion of the use of IM/IT, PCEHR and TeleHealth in the community.	2012/14	✓	✓	✓	✓	✓

<b>Goal 5: Be efficient and accountable with strong governance and effective management</b>							
<b>Strategies</b>	<b>Milestones, Outputs and Outcomes</b>	<b>Timeframe</b>	<b>Strategic Objectives Met</b>				
			<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
5.1 Appoint a skills-based Board	5.1.1 Appointed Board. 5.1.2 Creation of Board Committees.	2012/13					✓
5.2. Implement Medicare Local accreditation standards of <ul style="list-style-type: none"> <li>• Clinical governance</li> <li>• Resource training</li> <li>• Financial management</li> <li>• Human Resource Management</li> <li>• IT and records management, etc</li> </ul>	5.2.1 Delivery of training on each standard. 5.2.2 Clear accountability for each standard. 5.2.3 Progressive implementation of standards based on priorities. 5.2.4 Application for accreditation. 5.2.5 Induction of Board, Management and Staff of the principles of continuous quality improvement.	2013/14	✓	✓			✓
5.3 Develop and implement an organisation structure to support our strategy	5.3.1 Implementation of a structure with clear roles and responsibilities that aligns the organisational structure with the strategic plan	2012/13	✓				✓
5.4 Continuously improve the competencies and practices of BAML to deliver on our mission	5.4.1 Board Governance training 5.4.2 Managers receive finance, leadership, people management training and submission writing etc if required 5.4.3 Staff receive job specific training which may include project management/submission writing etc depending on their role ie. If a staff member is earmarked for promotion or takes on managers responsibilities then they are trained in management disciplines 5.4.4 Personal development plans developed that are aligned with individual roles and tasks.	2012/14	✓		✓		✓



