



HEALTHIER CHOICES ON THE MENU AT CABOOLTURE HOSPITAL



Metro North Hospital and Health Board Chair Dr Robert Stable AM joined Caboolture Hospital staff at the reopening of the canteen which now provides a greater variety of healthier food and drink options for sale.

Caboolture Hospital has removed sugar-laden soft drinks and sport drinks from its retail areas as part of an initiative to provide staff, patients and visitors with a greater range of healthier food and drink options.

Metro North Hospital and Health Board Chair Dr Robert Stable AM said hospitals were places you go for healthcare, so stopping the sale of unhealthy sugar-loaded drinks made perfect sense.

“As a hospital, we’re about making people feel better and improving the food options we provide to staff, patients and visitors can make a big difference to everyone’s health,” Dr Stable said.

The removal of sugary drinks from sale is supported by more options in the hospital’s canteen and vending machines.

Director of Allied Health and Service Partnerships at Caboolture Hospital Donna Ward said the hospital is proud of the efforts made by staff to embrace their own health and well being.

“Not only are Caboolture staff more active through our Fit Fab Cab exercise program, they are now better informed with food labelling throughout the hospital from green to red,” Ms Ward said.

“We are pleased the canteen now stocks a variety of wholesome foods from salads to stir-fries and the vending machines have healthier snacks and drinks.

“We are committed to working beside our staff and local community to improve the overall health journey.”

The initiative is part of a broader Enabling A Better Choice program that is progressively rolling out across Metro North facilities in 2017.



BETTER HEALTH OUTCOMES FOR VULNERABLE PEOPLE

The Indigenous sexual health team, based at Pine Rivers Community Health Centre, is reaching marginalised communities through an outreach program across North Brisbane.



Indigenous Sexual Health team members, Ronald, Kim and Dene, with New Farm Neighbourhood Centre Coordinator Jenny.

The team regularly visits community centres and areas where potentially high risk people reside, providing culturally appropriate access, sexual health education, prevention services and referral pathways for screening.

Program Manager Ronald Abala said target groups are Aboriginal and Torres Strait Islander people across Metro North, especially at-risk youth (15-29 years), homeless people, injecting drug users and sex industry workers.

“We are able to provide education, either in a group setting or one-to-one,” Mr Abala said.

Demand for the service has grown over the years and the team has been able to look at innovative ways of reaching those at risk.

“One of the more successful programs is our art workshop held in Aspley. We are able to promote holistic health and promote discussion around sexual health issues in a relaxed and safe environment,” Mr Abala said.

The team also visits New Farm Neighbourhood Centre on a weekly basis. The centre provides an open house program during the week offering meals, washing and shower access, art classes and internet facilities.

IMPROVING OUTCOMES



LONG STAY REHAB PATIENTS DISCHARGED TO COMMUNITY

The Jacana Acquired Brain Injury (ABI) centre in Bracken Ridge is discharging more clients back into the community than ever before, with multidisciplinary, goal-focused rehabilitation and early discharge planning among the initiatives driving strong results.

Community, Indigenous and Subacute Services Director of Nursing Andy Carter said the number of clients being discharged to be with their loved ones had grown significantly over recent years and was still rising.

“Six years ago, we were discharging about two or three clients a year into the community, but recently we’ve jumped to about 10 to 13 clients and last year, we discharged 16,” he said.

More than half of the clients admitted to Jacana between 2013-16 were admitted less than six months from injury. However despite the significant effort required to rehabilitate these often severely injured clients, 32 of the 43 admissions to the service in this time have now been discharged.

Mr Carter credits this success to the hard work of Jacana’s specialised multidisciplinary, goal-focused team, as well as ensuring a clear delineation between where a client’s rehabilitation pathway stops and their community pathway begins.

“Now discharge planning occurs early in the piece while the client is still in the rehabilitation phase, so by the time they are close to the end of their rehab, the staff have prescribed all the equipment that is required and have all the services in place so they are able to facilitate discharge in a timely manner,” he said.

“Having a multidisciplinary team working towards the goals of the clients and their families is an integral part of the rehabilitation phase, and the Jacana team give their clients every opportunity to achieve their goals and celebrate even the smallest achievements.

“The end result is that these clients are achieving goals that were thought to be unachievable in the acute setting.”

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Metro North Board back row (l-r): Professor Mary-Louise Fleming, Mr Mike Gilmour, Professor Helen Edwards, Mr Geoff Hardy, Ms Bonny Barry, Dr Margaret Steinberg. Front row (l-r): Mr Adrian Carson, Professor Robert Stable (Chair), Dr Kim Forrester, Associate Professor Cliff Pollard.

The Board

The Board is appointed by the Governor in Council on the recommendation of the State Minister for Health and Minister for Ambulance Services and is responsible for the governance activities of the organisation, deriving its authority from the *Hospital and Health Boards Act 2011 (Qld)* and the *Hospital and Health Boards Regulation 2012 (Qld)*.

The functions of the Board include:

- Developing the strategic direction and priorities for the operation of Metro North
- Monitoring compliance and performance
- Ensuring safety and quality systems are in place which are focussed on the patient experience, quality outcomes, evidence-based practice, education and research
- Developing plans, strategies and budgets to ensure the accountable provision of health services
- Ensuring risk management systems are in place and overseeing the operation of systems for compliance and risk management reporting to stakeholders
- Establishing and maintaining effective systems to ensure that the health services meet the needs of the community.

The Board are all independent members, strengthening local decision making and accountability for health policies, programs and services within Metro North. Each of the Board Members brings a wealth of experience and knowledge in public, private and not-for-profit sectors with a range of clinical, health and business experience.

During the reporting period, terms of office of four members expired on 17 May 2017 with all four members reappointed by the Governor in Council. These members are Ms Bonny Barry, Mr Mike Gilmour, Mr Geoff Hardy and Professor Mary-Louise Fleming. During the reporting period, Mr Philip Davies resigned office. Mr Adrian Carson was appointed to the Board in May 2017.

A schedule of Board Member attendance at Board and Committee meetings for 2016–17 is available in Appendix 2.

Board meetings are held at Metro North facilities including RBWH, TPCH, North Lakes Health Precinct, Kilcoy Hospital, Caboolture Hospital, Redcliffe Hospital and Brighton Health Campus.

The following committees support the functions of the Board, each operates with terms of reference describing the purpose, role, responsibilities, composition, structure and membership.

Executive Committee

The role of the Executive Committee is to support the Board by working with the Chief Executive to progress strategic issues and ensure accountability in the delivery of services within Metro North. The committee oversees the development of the Strategic Plan and monitors performance, the development of the clinician, consumer and community engagement strategies and the primary health care protocol, and works with the Chief Executive in responding to critical and emergent issues.

All Board Members are members of the Executive Committee.

Safety and Quality Committee

The role of the Safety and Quality Committee is to provide strategic leadership in relation to clinical governance. The committee oversees the safety, quality and effectiveness of health services and monitors compliance with plans and strategies, while promoting improvement and innovation for the safety and quality of services within Metro North.

Committee membership: Dr Kim Forrester (Chair), Dr Robert Stable AM, Associate Professor Cliff Pollard AM, Dr Margaret Steinberg AM, and Professor Mary-Louise Fleming.

Finance and Performance Committee

The role of the Finance and Performance Committee is to oversee the financial performance, systems, risk and requirements of Metro North. The committee reviews the financial strategy, financial policies, annual operating plans and capital budgets, cash flows and business plans to ensure alignment with key strategic priorities and performance objectives.

Committee membership: Mike Gilmour (Chair), Bonny Barry, Geoff Hardy and Professor Helen Edwards OAM

Risk and Audit Committee

The role of the Risk and Audit Committee is to oversee the internal and external audit function and matters relating to risk and compliance for financial, accounting and legislative requirements. The committee provides independent assurance and assistance to the Board on the risk, control and compliance frameworks and external accountability responsibilities as prescribed in the *Financial Accountability Act 2009*, *Auditor-General Act 2009*, *Financial Accountability Regulation 2009* and *Financial and Performance Management Standard 2009*.

Committee membership: Geoff Hardy (Chair), Dr Kim Forrester and Mike Gilmour.

PUTTING PEOPLE FIRST



CASE STUDY

EXPANDING QUEENSLAND'S SPECIALIST REHABILITATION SERVICES

A key component of the Herston Quarter redevelopment will be the addition of a new public health facility—a state-of-the-art specialist rehabilitation and ambulatory care centre valued at over \$300 million.

This centre will complement existing Metro North Hospital and Health Service facilities at Herston through the provision of modern infrastructure to support the future growth and expansion of Metro North's delivery of health services.

The 132-bed health facility will comprise 100 rehabilitation beds, special purpose rehabilitation support areas and a surgical and endoscopic centre with a 32-bed surgical inpatient unit, seven operating theatres, three endoscopy rooms and recovery spaces. The facility will be future-proofed through the construction of two additional floors to accommodate the future growth and expansion of health services.

From early 2017, Metro North embarked on a comprehensive engagement and design process to progress various elements of the clinical design for the new facility to deliver improved patient outcomes and to inform best practice models of health service delivery.

Engagement included consultation with approximately 200 clinical and non-clinical stakeholders, including consumers, across 19 functional user groups. This engagement was supported by a roadshow involving the presentation of the design to other Metro North facilities and staff associations. The first phase of the clinical design process for the new facility was completed in May 2017 with the second phase, of the three-phase process, commencing in June 2017.

The specialist rehabilitation and ambulatory care centre will be the first health facility to be delivered in Herston Quarter. It is anticipated to be completed in late 2020 and operational in 2021.



BLUE ROOM BOOSTS ENDOSCOPY NUMBERS

More Queenslanders than ever before will now have access to specialist endoscopy services at the Royal Brisbane and Women's Hospital (RBWH).



A new blue procedure room will increase the number of endoscopies by almost 50 per cent to more than 9000.

RBWH Director of Gastroenterology and Hepatology Dr Mark Appleyard said the 'Blue Room' is a brand new theatre capable of handling additional and more complex procedures than the current two.

"More complex interventional and diagnostic gastroenterology services are possible with the room's blue walls providing a high contrast to the pink tissues being examined," Dr Appleyard said.

"This service expansion includes an automated sterilising system as well as an equipment tracking and drying room to improve safety. At the push of a button the room is automatically set up to the surgeon's requirements which saves time between procedures.

The new procedure room has blue tempered glass walls and 'kick bars' for staff to exit the room without using their hands. A fully integrated digital system includes a touch panel to control equipment, communication devices, lighting and sounds.

Dr Appleyard said one of the features of the state-of-the-art equipment provided increased scope to expand training and research options.

"The 'Blue Room' is equipped with cameras and videoconferencing equipment capable of broadcasting procedures to students around the globe. Conversely our surgeons will benefit from teachers interstate or overseas being able to dial into complex procedures to help with training," Dr Appleyard said.

The gastroenterology redevelopment project included delivering the 'blue room' by 30 June for the first patient on 1 July.

GOVERNANCE

Professor Robert Stable AM

MBBS, DUniv (QUT), MHP, FRACGP, FAICD, FCHSM (Hon)

Board Chair

Professor Stable's 47 year career in health has included roles as a rural and remote General Practitioner, a Flying Doctor, Hospital Medical Superintendent and Chief Executive, Director-General of the Queensland Department of Health, Member and Chair of the Australian Health Ministers' Advisory Council, Vice-Chancellor and President of Bond University and Non-Executive Board Director/Member.

He holds other Board appointments as Chair and Director of Health Workforce Queensland, and Director of the Royal Flying Doctor Service – Queensland Section, Rural Health Workforce Australia, and North and West Remote (Primary) Health.

He is a Fellow of the Royal Australian College of General Practitioners (FRACGP), the Australian Institute of Company Directors (FAICD) and the Australian College of Health Service Management (FCHSM (Hon)), has an honorary Doctorate from the Queensland University of Technology (DUniv), a Master of Health Planning (MHP) degree from the University of New South Wales and an undergraduate degree in Medicine (MBBS) from the University of Queensland.

Professor Stable was appointed a Member of the Order of Australia in 2013 and awarded a Centenary Medal in 2001. He was conferred the honour of Emeritus Professor by the Council of Bond University in 2003.

Dr Kim Forrester

RN, BA, LLB, LLM (Advanced), PhD, Member AICD

Deputy Chair* and Chair, Safety and Quality Committee

Dr Kim Forrester is a registered nurse and barrister at law. Her clinical background includes intensive and coronary care nursing. She is a member of the Australian College of Nursing and established the Masters in Emergency Nursing program at Griffith University where she was also a foundation academic in the School of Medicine. Dr Forrester is an Associate Professor in the Faculty of Health Sciences and Medicine at Bond University.

As a barrister, Dr Forrester's areas of legal practice include coroner's inquests, professional regulation and child protection. She held the position of Assistant Commissioner (legal) on the Queensland Health Quality and Complaints Commission from 2006 to 2009, and is a member of the Queensland Law Society's Elder Law Committee and Health and Disability Law Committee. She publishes extensively in the area of health law including as editor of the Nursing Column in the *Journal of Law and Medicine*, and co-author of *Essentials of Law for Health Professionals*, *Australian Pharmacy Law and Practice* and *Essentials of Law for Medical Practitioners*.

* Governor in Council approved the appointment of Dr Kim Forrester as Deputy Chair on 26 August 2016.



**Mr Mike Gilmour***

Dip Acctg, MBA, GradDipACG, FCPA, FAICD, FGIA JP (Qual)

Chair, Finance and Performance Committee

Mr Gilmour has over 40 years' experience as a senior finance and commercial executive. His past executive healthcare appointments include Uniting Healthcare Queensland, a private hospital group (The Wesley Hospital Auchenflower, St Andrews War Memorial Hospital, The Sunshine Coast Private Hospital, etc), and the Royal Flying Doctor Service Queensland. Mr Gilmour has significant experience in governance, having held many appointments as a non-executive director, which currently include: Isis Central Sugar Mill Ltd, Open Minds Australia Ltd (Chair) and Aviation Australia Pty Ltd. He is a member of the CPA Australia Disciplinary Tribunal.

Mr Gilmour's past governance appointments include: inaugural Chair of the Metro North Brisbane Medicare Local; Director of South East Alliance of General Practice; Chair Southbank Institute of Technology and Chair Metropolitan South Institute of TAFE; Director Centre for Rural and Remote Mental Health; Company Secretary and financial advisor to the Palm Island Community Company; and Director of Sugar Research Australia. He is a former President of the Queensland Division of CPA Australia.

Mr Geoff Hardy*

B Bus (Econ), Dip HA, Grad Dip Commerce (Mkt), MAICD, AFCHSM

Chair, Risk and Audit Committee

Mr Geoff Hardy's extensive career in healthcare management has spanned over 30 years, including operational roles at Royal North Shore Hospital, Westmead, and the Royal Women's Hospital in Melbourne. After a period as Chief Executive at one of Ramsay Healthcare's facilities, he established and ran their Malaysian subsidiary working closely with the Malaysian Ministry of Health in the planning of several major new facilities.

In addition to a period as a consultant to healthcare organisations in Queensland, Mr Hardy has also worked as CEO of two Brisbane law firms and was Global Leader for a commercial advisory practice providing strategic and commercial advice to government clients around the world.

In recent years he has worked more broadly as an advisor to governments and private sector clients on significant infrastructure projects in the transport, health care and resources sectors, and is currently AECOM's Infrastructure Advisory Leader for Australia & New Zealand and their market sector lead for Healthcare and Transaction Advisory.

* The Board approved on 5 July 2016 that Mike Gilmour chair the Finance and Performance Committee and Geoff Hardy chair the Risk and Audit Committee.

INTERIM CARE SERVICE DECREASES LENGTH OF STAY

The introduction of an Interim Care service at Zillmere has resulted in patients spending a total 3700 less days in hospital while awaiting a nursing home placement.

Interim Care originally commenced as part of the 2016 Metro North Winter Bed Strategy, designed as a temporary suitable care alternative to hospital, specifically for older patients, to help relieve the increased pressure faced by acute settings over flu season.

Older patients in hospital beds awaiting placement in a nursing home were identified as a suitable population for whom to investigate alternative care options. Changes to aged care within Metro North also provided an opportunity for a vacant facility at Zillmere to be recommissioned to provide this care.

Project lead Kate Schultz, of Community, Indigenous and Subacute Services, said the interim care service had exceeded expectations and now had permanent funding.

"Fast forward 12 months and Interim Care is now a successful, 32-bed capacity service caring for those who no longer require care in a hospital but are unable to return to their own home and need support to move to an aged care home," she said.

"Not only has it contributed to reducing pressure on the acute sector, it has also offered a pleasant, safe and suitable environment that provides the necessary support and resources to properly care for patients in that interim period until alternative accommodation can be found."

The service is now also taking on up to three complex care management cases, after a streamlining of process within Interim Care resulted in clients now being settled into their new environments on average about nine days earlier than first planned.

Associate Professor Cliff Pollard AM

BD, MB BS QLD, FRACS, FRCS Edin, FACS

Member and representative on the Royal Brisbane and Women's Hospital Foundation Board

Associate Professor Cliff Pollard is a retired general surgeon. He completed his surgical training in Queensland and obtained post-Fellowship experience in the United Kingdom. Dr Pollard has been the staff surgeon and visiting medical officer at Redcliffe Hospital, prior to moving to the Royal Brisbane and Women's Hospital in 2008 as the Director of the Trauma Service. He retired in 2012.

Dr Pollard has a major interest in all aspects of trauma management in both pre-hospital and hospital environments and he has presented widely on the topic both nationally and internationally. As a member of the Royal Australian Army Medical Corps, he deployed to Bougainville and East Timor. Dr Pollard is a member of the Royal Australasian College of Surgeons (RACS) National and Queensland Trauma Committees; the State Trauma Clinical Network; the Australian Trauma Registry Executive and Steering Committee; and the Department of Transport Serious Injury Expert Panel.

A former examiner in general surgery for the Royal Australasian College of Surgeons, Dr Pollard also teaches anatomy in the Advanced Surgical Anatomy Course in the School of Medicine at The University of Queensland. Dr Pollard is also involved in research activities including the Brisbane Diamantina Health Partnership Trauma, Critical Care and Recovery Stream and Queensland University of Technology CARRS-Q.

Ms Bonny Barry

RN BNsg Member AICD

Member and representative on The Prince Charles Hospital Foundation Board

Ms Bonny Barry is a Registered Nurse with over 28 years' experience in community, hospice, hospital and clinic settings in Queensland and Victoria.

Ms Barry was the Professional Officer for Aged Care and Private Hospitals for the Queensland Nurses Union for six years. From 2001, she was State Member for Aspley for eight years, and served on several parliamentary committees including Chair of Caucus, Chair of Health Estimates, and the Assistant Minister for Education, Training and the Arts from 2006 to 2009.

More recently, Ms Barry has worked for the private sector before returning to nursing in 2012. She is co-author of *The Nature of Decision Making of the Terminally Ill*.

Professor Helen Edwards OAM

DipApSc, BA, BA (Hons), PhD, FACN, FAAN, MAICD

Member

Professor Edwards is a Registered Nurse and Registered Psychologist. She is currently the Assistant Dean (International and Engagement) for the Faculty of Health, Queensland University of Technology, and a member of the Institute of Health and Biomedical Innovation.

Professor Edwards has 40 years of experience in higher education and health sectors and has served on several state, national and international committees. She is a Board Member of the Australian Nursing and Midwifery Accreditation Council and has served on three retirement village boards. She also is a current member of the NHMRC Ethics Committee. Professor Edwards is internationally recognised for her research in wound management, ageing and chronic disease. She was involved in establishing the Wound Management Innovation Cooperative Research Centre which is the largest wound research initiative globally. It focuses on development of cost-effective and practical wound therapies, diagnostics and interventions.

Dr Margaret Steinberg AM

PhD (Child Health and Education), MPhty (Research), BPhty (Hons), Dip Phty, University of Queensland

Member and Board Sponsor, Community Board Advisory Group (CBAG)

Dr Margaret Steinberg has expertise in governance and ethical decision making, as well as experience as a clinician, health administrator, academic and director of public, private and third sector organisations. She is a former Commissioner of the Criminal Justice and Crime and Misconduct Commissions and Chair of their Audit and Governance Committees. She was Foundation Deputy President of the Guardianship and Administration Tribunal, Assistant Commissioner of the Health Quality and Complaints Commission and Chair of its Consumer Advisory Committee.

Dr Steinberg holds a PhD in Child Health and Education and a Masters of Physiotherapy. Her work has been recognised through a Churchill Fellowship (in early intervention), an NHMRC/ PHRDC Travelling Fellowship (in telemedicine/telecommunications and health), and a World Health Organisation study (in HIV/AIDS).

In 2003, Dr Steinberg was made a Member of the Order of Australia in recognition of her service to public health and welfare policy through research in the areas of ageing, disability and social justice.

Professor Mary-Louise Fleming

BEd (QUT), MA (Ohio), PhD (Qld), Member AICD

Member and Deputy Chair, Community Board Advisory Group

Professor Mary-Louise Fleming is Head, Corporate Education in the Faculty of Health at the Queensland University of Technology. She has experience in teaching and research in higher education, public health and health promotion for over 30 years.

Her research activity focuses on evaluation research and translational research for the World Health Organization, both Commonwealth and Queensland Governments, as well as consultancy projects for Queensland Health and the not-for-profit sector. Professor Fleming has co-authored two books on health promotion and public health, and contributed to several other books.

Professor Fleming is a member of the Queensland Government Ministerial Oversight Committee, *Advancing Health 2026*, a Board member of Wesley Medical Research Institute and a member of the Strategic Planning Committee. Her appointments have included Health Promotion Queensland; Board of the Wesley Research Institute; Board of Governors St Andrew's Hospital; National Heart Foundation; the Queensland Cancer Fund and Chair of the Quality Management Committee for BreastScreen Queensland. She has an active consultancy practice involving reports on policy and practice for single health issues, policy development and implementation, and reviews and evaluation of numerous projects and programs.

Mr Adrian Carson

GCertHServMgt

Member

Mr Adrian Carson joined Metro North in May 2017 and has almost 25 years' experience in Aboriginal and Torres Strait Islander health. As the current CEO of the Institute for Urban and Indigenous Health, Mr Carson plays a leading role in the coordination of planning, development and delivery of comprehensive primary healthcare and integrated social support services to Aboriginal and Torres Strait Islander communities across South East Queensland. He has worked as CEO of Queensland Aboriginal and Islander Health Council (QAIHC), the peak body for the Aboriginal and Torres Strait Islander Community Controlled Health Sector in Queensland, and has previously worked with both Queensland and Australian Governments. Mr Carson is currently completing a MBA and holds directorships of QAIHC, and the National Aboriginal Community Controlled Health Organisation (NACCHO).

IMPROVING OUTCOMES

CELEBRATING 20 YEARS OF LUNG TRANSPLANTATION

The Queensland Lung Transplant Service (QLTS) has given 400 Queenslanders a second chance at life in its first 20 years.

Based at The Prince Charles Hospital, QLTS supports lung and heart-lung transplant patients from northern New South Wales to Darwin.

QLTS Director Associate Professor Peter Hopkins said the team is at the forefront of major technological advancements.

“We’re the centre in Australia, in fact in Australasia, with the most experience in performing triple organ transplants, which was unthinkable for this hospital when I first started here. We’ve done seven of those in the last 13 years,” Dr Hopkins said.

Dr Hopkins said it was rewarding to be part of an incredible team that helped transform the lives of so many people.

“One of our most impressive accomplishments was that we’ve helped four female transplant patients deliver four healthy babies. Not only has it saved the life of one patient but it’s allowed them to have their own children,” he said.

Dr Hopkins said another major breakthrough was bringing XVIVO perfusion technology to Australia which allows more donor organs to be transplanted.

“Our transplant numbers per annum have increased over a 12 year period from 10 to 12 per year to 36 to 40 and there’s no sign of it plateauing,” Dr Hopkins said.

“I’d like to acknowledge donors and their families because without them we wouldn’t be in a position to pass on such an amazing and enduring gift.”

CELEBRATING STAFF EXCELLENCE

Achievements, innovation and high performance across our health service were recognised at the second annual Metro North Hospital and Health Service Staff Excellence Awards.

The awards reflect the extraordinary talent that exists within Metro North and recognise excellence either individually, in teams, or through partnerships across all facilities, services and streams, and with community partners.

The 2016 Awards attracted more than 170 nominees across nine categories.



Royal Brisbane and Women's Hospital Cancer Care Outpatient Clinic took the award in the Patients as Partners category for its collaborative approach to redesigning the outpatient waiting area, which now has a new colour scheme and artworks as well as information stands and front line clinical staff for patients who need them.

The winners were:

Excellence in Clinical Training and Education

Carmel Fleming, Mental Health

Excellence in Integrated Care

Caboolture Health Care Alliance

Excellence in Performance

Angela Matson, Adult Cystic Fibrosis Centre, The Prince Charles Hospital

Excellence in Training and Education

Taking Time to Care, Redcliffe & Caboolture Education and Training Unit

Innovation

Patient Access Coordination Hub (PACH)

Leadership

Peter Lazzarini, Allied Health Research Collaborative

Patients as Partners

Redesigning and Improving the Patient Experience, Royal Brisbane & Women's Hospital Cancer Care Outpatient Clinic

People Focus

Support for socially disadvantaged, Metro North Oral Health Services

Values in Action

Margaret Cousins, Cardiac Investigations Unit, The Prince Charles Hospital

Executive Management

The Board appoints the Health Service Chief Executive (HSCE) and delegates the administrative function of Metro North HHS to the HSCE and those officers to whom management is delegated. The HSCE's responsibilities are:

- Managing the performance and activity outcomes for Metro North;
- Providing strategic leadership and direction for the delivery of public sector health services in the HHS;
- Promoting the effective and efficient use of available resources in the delivery of public sector health services in the HHS;
- Developing service plans, workforce plans and capital works plans;
- Managing the reporting processes for performance review by the Board;
- Liaising with the executive team and receiving committee reports as they apply to established development objectives;
- The HSCE may delegate the Chief Executive's functions under the *Hospital and Health Boards Act 2011* to an appropriately qualified health executive or employee.

Health Service Chief Executive

Mr Ken Whelan (retired 23 June 2017)

Mr Shaun Drummond (Acting from 26 June 2017)

Mr Ken Whelan was Chief Executive up to 23 June 2017. Mr Shaun Drummond commenced as acting Chief Executive at this time.

As Acting Chief Executive of Metro North Hospital and Health Service, Shaun Drummond is responsible for the day to day management of Australia's largest public health authority. Prior to his commencement as Acting Chief Executive, Shaun held the role of Executive Director Operations for more than two years. In this role, Shaun has led high profile projects including the Specialist Rehabilitation and Ambulatory Care Centre, the biofabrication partnership with QUT, and the Patient Access Coordination Hub.

Shaun brings extensive health experience from across Australia (Queensland, New South Wales and Victoria) and New Zealand working closely with hospital and health boards.

The following Senior Executive positions support the HSCE in the development and execution of the Metro North strategy as approved by the Board. The list includes the names of incumbents as at 30 June 2017.

Executive Director Operations

Mr Shaun Drummond (up to 23 June 2017)
Dr David Rosengren (Acting from 26 June 2017)

Chief Finance Officer

Mr James Kelaher

Executive Director Clinical Governance, Safety, Quality and Risk

Ms Linda Hardy

Executive Director Clinical Services

Dr Elizabeth Whiting

Executive Director Organisational Development, Strategy and Implementation

Mr Luke Worth

Professional Leads

Executive Director Medical Services

Dr Elizabeth Rushbrook

Executive Director Nursing and Midwifery Services

Adjunct Associate Professor Alanna Geary

Executive Director Allied Health

Mr Mark Butterworth

Directorate Executive Directors

Executive Director

Royal Brisbane and Women's Hospital

Dr Amanda Dines

Executive Director

The Prince Charles Hospital

Mr Anthony Williams

Executive Director Redcliffe Hospital

Ms Louise Oriti

Executive Director Caboolture and Kilcoy Hospitals

Dr Lance Le Ray

Executive Director Community, Indigenous and Subacute Services

Mr Chris Seiboth

Executive Director Oral Health Services

Mr Andrew McAuliffe

Executive Director Mental Health Services

Associate Professor Brett Emmerson AM

Executive Director Medical Imaging

Associate Professor Noelle Cridland

Clinical Stream Executive Directors

Executive Director Heart and Lung

Professor Darren Walters

Executive Director Medicine

Dr Jeffrey Rowland

Executive Director Surgery

Dr Jason Jenkins

Executive Director Critical Care

Dr Colin Myers

Executive Director Women's and Children's

Ms Tami Photinos

Executive Director Cancer Care


Associate Professor Glen Kennedy

Research

Executive Director Research

Professor Scott Bell

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STAFF
RECEIVED THE
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AT WORK





PEER MENTORING PROGRAM BRINGS REWARDS

It's a match made in heaven for Royal Brisbane and Women's Hospital (RBWH) medical interns with the successful Peer Mentoring Program in full swing.

Featuring increased training and 24/7 access to advice and support, junior doctors are feeling more empowered and skilled than ever to lead future healthcare delivery.

Mentor Dr Devlin Elliott is a huge advocate for the program.

"Mentoring was missing when I was a junior doctor and I know from experience it can be intimidating seeking advice from your superiors," Dr Elliott said.

"To ensure we get good doctors we need to help the next generation. I'm happy to share my learnings and help someone navigate this challenging but rewarding career."

Also reaping the rewards of the program is Dr Elliott's mentee Dr Grace Brownlee.

"Since med school I've always sought advice from those ahead of me; it was a natural progression for me to get involved in the program," Dr Brownlee said.

"I have found the program to be very beneficial but it comes down to the people involved. You get out what you put in, so enthusiasm is key!" she said.

RBWH's Dr Sonia Chanchlani's own experience as a junior doctor inspired her to set up the mentoring program, and also explore the benefits of peer-led mentoring on the psychosocial wellbeing of junior doctors.

Her research won her the 2016 AMA Junior Doctor Research Award.

"The program supports new doctors juggling long hours, high stress as well as providing quality patient care by matching them with experienced peer house officers."

"It's a simple concept but it's had a massive impact on our junior doctors by providing more robust support structures and giving them the tools they need to succeed."

This year, 81 per cent of RBWH interns opted into the program and Dr Chanchlani has been approached by facilities across Australia about the program following its success.



"The program supports new doctors juggling long hours, high stress as well as providing quality patient care by matching them with experienced peer house officers."

Pictured: Dr Sonia Chanchlani's own experience as a junior doctor led her to establish the mentoring program



Metro North Hospital and Health Board Deputy Chair Dr Kim Forrester and Board member Assoc Professor Cliff Pollard AM welcomed some of the 25 new medical interns to The Prince Charles Hospital in January 2017.

TRAINING THE NEXT GENERATION

Metro North Hospital and Health Service welcomed 162 junior doctors to its ranks at the start of 2017.

The interns join 318 nursing and midwifery graduates who have begun work progressively throughout 2016-17 year at facilities across the HHS.

All these graduates have chosen Metro North hospitals and facilities as the place they want

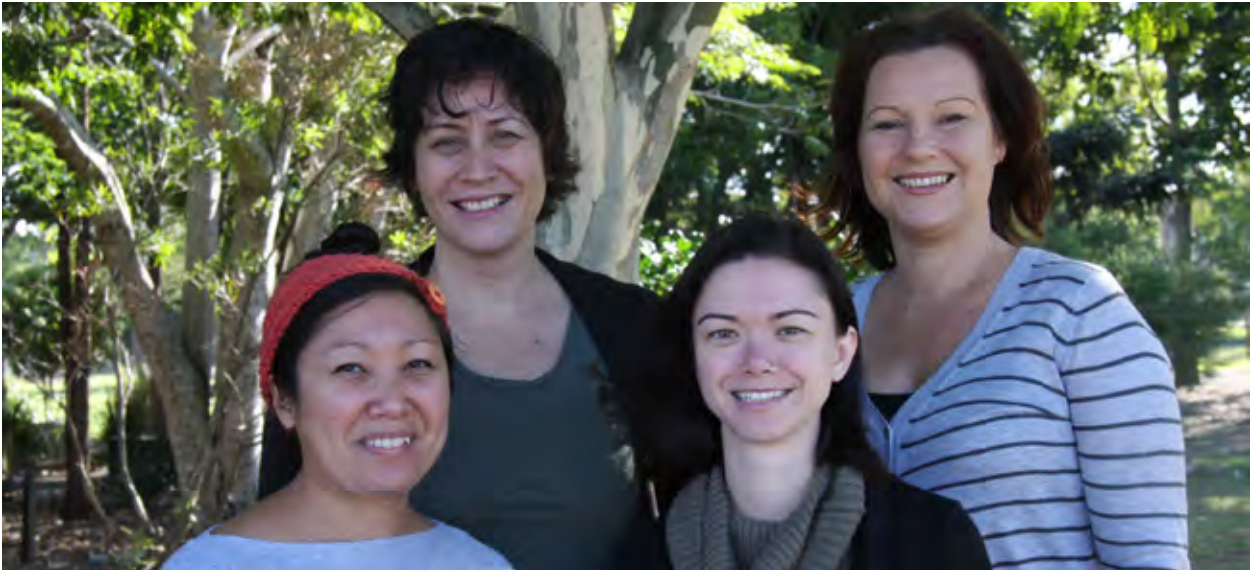
to start their careers and take advantage of the opportunities to learn from an outstanding team of medical professionals.

Their preference for our hospitals highlights the national and international standard of our training institutions and research facilities.



EMPOWERING MENTAL HEALTH RECOVERY AT HOME

The Hospital to Home Program supports people to improve their mental health and ability to live independently in the community, and help prevent hospital admissions, supports early discharge home from hospital and reduces the risk of being readmitted to hospital.



Trisha Suriano, Sue Mahoney, Lisa Gregory and Michelle Dove are members of the intensive home based recovery support service Hospital to Home.

A new program supporting mental health consumers to self-manage their recovery, connect with social networks and minimise feelings of isolation is achieving good results in reducing hospital readmission rates.

The Hospital to Home program (H2H) is an intensive home based recovery support service for people living within The Prince Charles Hospital (TPCH) catchment area. It is supported by the Richmond Fellowship and Metro North Mental Health.

Kellie Prefol, Social Work Professional Lead at TPCH, said H2H addressed a gap in service provision for consumers who did not require inpatient treatment, but who could benefit from additional intensive support in their home environment where both recovery support services and clinical services can be tailored to meet their needs.

“Research consistently demonstrates that the provision of intensive home based recovery support services reduces demand on inpatient services and therefore is a cost effective complimentary service that can contribute to a decreased length of hospital stay and assist with reducing pressure on acute beds,” Kellie said.

“Patients who are in an acute admission ward are referred to H2H as soon as possible so our support workers can spend time with them and develop a rapport, assess their needs from a clinical and non-clinical perspective.”

Since beginning in mid-May 2016, 214 patients have been referred to the program.

Preliminary data indicates a 4% decrease in readmission rates for H2H patients, highlighting the value of supporting suitable patients to stay in the community rather than be admitted to hospital.

Kellie said the amount of support provided by H2H would depend on the person’s need, but generally can be up to six weeks post discharge.

“In broad terms, the support is social and emotional life skills,” she said.

“It may range from building independence and resilience, managing finances or setting up a house, to everyday tasks such as banking, shopping or attending appointments.

“We also link people with resources they need whether it’s recreation opportunities, or employment and education.”

Risk Management and Audit

Metro North's risk management system aligns with the Australian/New Zealand Standard ISO31000:2009 on risk management principles and guidelines and the National Safety and Quality Health Service Standard 1, Governance for Safety and Quality in Health Service Organisations.

Metro North is committed to a philosophy and culture that values open, fair and equitable behaviours, and that encourages staff members to proactively manage risk. The Board has communicated a zero tolerance for preventable patient harm as the key organising principle for all risk identification, assessment, treatment, monitoring and reporting.

For 2016–17, Metro North's strategic plan identified six overarching strategic risks:

- Workforce capability and capacity
- Service demand
- Fragmented healthcare
- Quality and safety of services
- Community confidence
- Asset management and renewal

Metro North's directorates and support services are responsible for identifying and managing operational risks.

Key achievements for 2016-17:

Metro North continues to improve its risk management system with the third annual evaluation identifying the following improvements in relation to how we identify, treat and respond to risk:

- Risk maturity assessed as moving from consistently designed to consistently implemented.
- Risk management is incorporated into day to day decision making and business processes.
- Risks are measured, evaluated and inform continuous improvement.

PUTTING PEOPLE FIRST



MENTAL HEALTH REFORM

The Mental Health Act 2016 (MHA) commenced on 5 March 2017, replacing the Mental Health Act 2000. Although the documents are similar, the MHA 2016 has improved practices and an increased focus on patient rights.

More than 900 Metro North Mental Health (MNMH) staff completed competency training requirements prior to the Act's implementation, with the new legislation having improved focus on least restrictive practice, capacity in decision making and the following of advance health directives.

The MHA 2016 also appoints new positions—Independent Patient Rights Advisers—who play a key role in advising people of their rights under the Act. Five of these positions have been appointed to MNMH.

To support consumers, carers and other key stakeholders in understanding the changes, more than 1500 individual letters were sent to consumers and their support person and the service delivered 12 information sessions to consumers, carers and non-government organisations.



317,992
X-RAY AND
ULTRASOUND
ATTENDANCES



54
MORE
INFANTS

TRANSPORTED BY NEORESQ

494 INFANTS WERE TRANSPORTED
(473 RETRIEVALS) IN 2016–2017



Benjamin Quick from The Lakes College and Jazz Yaldwyn from Southern Cross Catholic College were among 67 Year 10 students who attended the Careers Expo at Redcliffe Hospital.

CULTURE OF LEARNING



ENCOURAGING HEALTHCARE WORKERS OF THE FUTURE

The next generation of healthcare workers got a taste of careers available in the industry at the second annual Redcliffe Hospital Career and Pathways Expo in June.

Year 10 students from eight schools in the Metro North Hospital and Health Service region attended interactive one-hour seminars covering 15 specialty areas within health including nursing, medicine, oral health, pharmacy, medical imaging, pathology, occupation therapy, physiotherapy, health sciences, operational services and administration.

The Hospital's Coordinator of Education and Youth Engagement, Kylie Boccuzzi said students were able to experience and discuss the roles with frontline staff and have a behind the scenes look at the hospital.

"This helped them to understand each service area and they went away with a good idea of what the positions do and the pathway they need to take to pursue their chosen career," she said.

"Health careers are wide and varied and it's not just about becoming a nurse or doctor."

"Students in grade 10 need to know what subjects to choose at school as well as the entry requirements for courses and how they can access these courses."

The Expo was hosted in partnership with the Beacon Foundation.



MODERNISING HEALTH FINANCIAL MANAGEMENT ACROSS QUEENSLAND

The Financial System Renewal (FSR) Project is transitioning Queensland health services from the current finance and materials management information system (FAMMIS), to a contemporary business, financial and logistics solution (SAP S/4HANA).



FSR Project subject matter experts at the induction and onboarding sessions.

Metro North Hospital and Health Service Chief Finance Officer James Kelaher is Chair of the FSR Project Board and the Project Executive.

Mr Kelaher said the FSR Project represented a once a generation opportunity to modernise the way finances were run across Queensland Health.

“The project is delivering a contemporary foundational SAP solution on a platform, which is innovative, supports integration and is straightforward to use,” he said.

“The S/4HANA solution will meet current and future requirements of the Department of Health (DoH) and all 16 Hospital and Health Services (HHSs).”

Mr Kelaher said the project was on track, having received Governor-in-Council approval in December 2016 to commence and spend \$105 million funding allocated in the 2016–17 State Budget.

“Key activities this year included engaging SAP regarding licensing, prototyping, integration, deployment and hosting and receiving a prototype which was evaluated by Subject Matter Experts (SMEs) from the business,” he said.

“The project also commenced Fit/Gap activities to confirm adoption of SAP Best Practices.”

Mr Kelaher said a major project activity included change management and capability uplift with the aim for all staff to have a consistent base of knowledge.

“We are investing in Queensland Health staff to bring them up to a level which is very contemporary and the benefits expected to be derived from improved, contemporary processes are substantial.”

Mr Kelaher said there were more than 350 SMEs contributing to the FSR Project.

“We were very fortunate to receive significant interest from Queensland Health staff all across the state wanting to be involved in the project,” he said.

“These highly experienced employees have been authorised to represent every HHS and DoH as well as each key functional area, such as finance, asset management and procurement.

“Metro North has great representation and participation with 32 authorised SMEs contributing to key project activities,” he said.

External Scrutiny

The operations of Metro North are subject to regular scrutiny and validation from numerous external agencies.

All Metro North services are currently accredited with the Australian Council on Health care Standards (ACHS) and the Australian Aged Care Quality Agency for aged care services.

The ACHS conducted a Whole of Organisation survey visit for accreditation of hospital and health services in 2017 for the following services:

- Redcliffe Hospital
- Caboolture Hospital
- Woodford Correctional Centre
- Kilcoy Hospital
- Community, Indigenous and Subacute Services
- The Prince Charles Hospital
- Mental Health Services

All services successfully met all Standards and maintained accreditation.

In 2016–2017, Parliamentary reports tabled by the Auditor-General which broadly considered the performance of Metro North included:

- Efficient and effective use of high value medical equipment (Report 10: 2016–17)
- Hospital and Health Services: 2015–16 financial statements (Report 9, 2016–2017)
- Queensland state government: 2015–16 results of financial audits (Report 8, 2016–17)

The recommendations contained within these Auditor-General reports were considered and action was taken to implement recommendations or address any issues raised, where appropriate.

CULTURE OF RESEARCH



COMMITTED TO RESEARCH

A new strategy will guide and support researchers across Metro North to further innovative approaches to healthcare.

As part of our commitment to research, the first *Metro North Research Strategy 2017-2022* has been developed in consultation with researchers and clinicians to ensure a meaningful, relevant and useful framework.

The strategy focuses on three themes: diagnostics, therapeutics, and health services. These themes represent both excellence and opportunity to build capacity across Metro North to improve patient outcomes.

In addition, the strategy identifies the key enablers of research—our patients, people, infrastructure, systems and partners. These enablers and themes integrate with the research direction from defining the question, discovering new knowledge, translating research into new ways of working, implementing those ways, and measuring the long term impact on health outcomes for our patients.

The strategy aims to strengthen Metro North's already rich culture of research through clear, consistent and coordinated research principles which will support clinical directorates, streams and professional services to pursue a research agenda embedded within clinical care.

Specific priorities for 2017-22 include providing more patients the opportunity to participate in research; establishing career pathways for researchers; providing research education and training; developing and supporting access to internal and external funding; and fostering new and existing research partnerships and collaborations.

To support the delivery of the strategy, a suite of research policies and procedures are being developed, underpinned by an action plan that will begin implementation in 2017-18. The *Metro North Research Strategy 2017-2022* is available online at <https://www.health.qld.gov.au/metronorth/research/research-in-metro-north>

The first Metro North Snapshot of Research 2016 has also been published, showcasing examples of research excellence across the HHS. It is available at <https://www.health.qld.gov.au/metronorth/research/reports>



WORLD-LEADING RESEARCHERS RECOGNISED

Metro North has recognised outstanding achievements by some of its best and brightest at the second Annual Research Excellence Awards.

The variety of research happening across Metro North—from evidence-based practice at the bedside, to drug and device trials, through to end-to-end clinical research and knowledge translation—draws on the strengths of our people to improve healthcare at all stages of the patient journey.

Award submissions were up by 37 per cent this year across seven categories including the new Research Support award that received twice the number of submissions as any other category. A special CE Award was also presented.

The Researcher of the Year award was presented to Professor Jeff Lipman. Prof Lipman is a full-time intensivist with research interest in infection management in intensive care and the pharmacokinetics of antibiotic dosage. His research has been instrumental in changing antibiotic prescribing habits worldwide for critically ill patients and he has inspired countless emerging researchers.

The Rising Star Award went to Dr Jonathon Fanning, who has gained international interest for his multi-centre research to identify the characteristics of neurological injury associated with transcatheter aortic valve implantation, including patient and procedural risk factors, and novel strategies for prevention. Dr Fanning has a reputation as a high calibre early career researcher with the potential to improve outcomes for high risk and inoperable patients.

Dr Alka Kothari received the Research Support Award. As Deputy Head of The University of Queensland Northside Clinical School and Staff Specialist in Obstetrics & Gynaecology, Dr Kothari has brought a passion and dedication for research that has led many junior doctors, medical students and other health professionals take their first steps as clinician-researchers. She has mentored junior clinicians in the completion and publication of seven research projects with a further 25 research projects progressing to publication.



Researcher of the Year

- Professor Jeffrey Lipman

Rising Star Award

- Dr Jonathon Fanning

Research Support Award

- Dr Alka Kothari

Discovery and Innovation Research Award

- Translational Osteoarthritis Research Group

Clinical Research Award

- Queensland Centre for Gynaecological Cancer Research, Laparoscopic surgery for endometrial cancer

Complex Health Challenges Research Award

- Obstetric Medicine Research Team

Health Services and Implementation Research Award

- Kidney Supportive Care Program

Chief Executive Award

- Brighton Research Advancement Team

Pictured above: Metro North's Executive Director of Research Professor Scott Bell (left) with Research Support Award winner Dr Alka Kothari, Researcher of the Year Professor Jeffrey Lipman and Rising Star Award winner Dr Jonathon Fanning.

Internal Audit

The internal audit function provides an independent and objective assurance and consulting service to management and the Board. The audits undertaken are risk-based and are designed to evaluate and improve the effectiveness of risk management, control and governance processes.

The function operates with due regard to Treasury's Audit Committee Guidelines, a Board approved Charter and contemporary internal audit standards. Overall service delivery and audit operations are aligned with the Institute of Internal Auditors – Australia, International Professional Practices Framework (IPPF). The IPPF provides a proven, professional, ethical and defensible audit framework. This framework supports the delivery of effective, efficient and economical audits.

Annual and strategic audit plans are developed in consideration of the Board's risk management (strategic and operational risks) and governance processes, designed and maintained by management. Following consultation with management and members of the risk and audit committee, the audit plans are approved by the Board.

The delivery of audits is assisted through a co-source partnership arrangement using a global consulting firm and a specialist clinical consultant. These firms provide subject matter experts and lead audits requiring specialist knowledge and skills. Although the function liaises regularly with the Queensland Audit Office (QAO) it remains independent of the QAO.

Key achievements for 2016–17:

During the period, Internal Audit completed eighteen internal audits covering both clinical and non-clinical risk areas including:

- IT cyber security readiness and maturity review
- Succession planning and retention strategies for Metro North staff
- Medication management in operating theatres
- Line manager – payroll responsibilities
- Management of sensitive information – patient records
- Review of end of life care practices and procedures
- Framework for college accreditation across Metro North
- Payroll and expenditure analytics – fraud risk focus
- Access and security controls across Metro North
- Interdisciplinary clinical handover practices

Information systems and record keeping

Metro North is committed to enabling value-based healthcare through appropriate financial, human resource, information, communication and technology related services and systems to deliver connected care to our patients. Metro North is also hosting the Financial System Renewal Project on behalf of all HHSs and the Department of Health which will transition Queensland Health from the current finance and materials management information system (FAMMIS) to the new business, financial and logistics solution (SAP S/4HANA).

Implementation of the electronic Documents and Records Management System and Recordkeeping Strategy has provided Metro North with the platform to drive increased business functionality, streamlined approval processes, enhanced information security and ongoing monitoring and compliance with legislative, business and accountability requirements.

Information disclosures

Section 160 of the *Hospital and Health Boards Act 2011* requires that any confidential information disclosures made in the public interest by a service are outlined in the annual report for that service. There was one disclosure of confidential information by Metro North Hospital and Health Service under this provision in 2016-17:

- Release of relevant census information to the Australian Bureau of Statistics to ensure that there is a complete record of all patients at Queensland Health facilities for the purposes of completing the 2016 Census of Population and Housing.

Open data

Additional annual report disclosures relating to expenditure on consultancy, overseas travel and implementation of the Queensland Language Services Policy are published on the Queensland government's open data website www.data.qld.gov.au

METRO NORTH

RECYCLES
MORE THAN **1.1 MILLION KG**



OF WASTE A YEAR

INCREASING BY
AROUND 60,000
KILOS A YEAR FOR
THE PAST 3 YEARS

PUTTING PEOPLE FIRST



Dr Liz Kenny AO and Assoc Prof Brett Emmerson AM following their investiture at Government House in May 2017.

AUSTRALIA DAY HONOURS RECOGNISE CONTRIBUTIONS TO MEDICINE

Two of Metro North's most respected clinicians were recognised in the 2017 Australia Day Honours for their significant contributions to medicine.

Internationally-renowned radiation oncologist and Senior Radiation Oncologist at the Royal Brisbane and Women's Hospital, Adjunct Professor Liz Kenny was appointed an Officer (AO) in the General Division.

Executive Director, Metro North Mental Health, Associate Professor Brett Emmerson, was appointed a Member (AM) in the General Division for his work in psychiatry, medical administration and through contributions to mental health groups.

Dr Kenny also was honoured with a Distinguished Fellowship by the Cardiovascular and Interventional Radiological Society of Europe (CIRSE) in September 2016. This Fellowship honours physicians and scientists who have made exceptional contributions to the practice and science of Interventional Radiology.

Clinical Governance

The Board, Chief Executive and management are responsible and accountable for ensuring the systems and processes are in place to support clinicians in providing safe, high quality care, and for clinicians to participate in governance activities. These systems are established to set, monitor and improve the performance of the organisation, and communicate the importance of safe, high quality care to all members of the workforce.

The Metro North clinical governance framework provides an integrated system of governance, risk and compliance across five key areas:

1. Governance and quality improvement systems: delivering quality reliably
2. Clinical practice: clinical effectiveness through measurement of performance
3. Performance and skills management: engaged and effective workforce
4. Incident and complaints management: optimising and standardising processes through organisational learning
5. Patient rights and engagement: consumer participation and partnership

Key achievements for 2016-17:

- The inaugural patient safety and quality forum held in September 2016 involved more than 100 staff as well as community partners and consumers, and provided an opportunity to build participants' understanding and experience redesigning systems to reduce preventable harm and learning from the consumer experience;
- Designed and piloted the Metro North systems and safety improvement model at Caboolture Hospital with consumer partners;
- Third annual patient safety culture survey undertaken, seeking staff opinions to assess safety culture, with nine of the 14 dimensions surveyed showing improvement since the previous year;
- Regular internal reporting on safety and quality commences with the "voice of the patient" which provides an opportunity for the Board and senior executives to hear directly from patients and family about their experiences with the healthcare system;
- Strong consumer feedback in clinical governance with the Community Board Advisory Group (CBAG), the peak consumer engagement body for Metro North, actively reviewing safety and quality performance and working in partnership on improvement initiatives.



283,628
EMERGENCY
DEPARTMENT
PRESENTATIONS

PUTTING PEOPLE FIRST



MEASURING PATIENT SATISFACTION

Patients at The Prince Charles Hospital can now provide feedback faster following the introduction of patient satisfaction kiosks in busy areas.

The kiosks, which are linked to the hospital's existing patient flow management system, allow patients and visitors to give feedback about various aspects of their hospital experience including decisions about their care, treatment and courtesy from staff, and whether patients would recommend the hospital to friends or family.

TPCH Acting Facility Services Director Amarney Gould said the kiosks provided an additional way of collecting and measuring information about patient experiences.

"The advantage of these kiosks is that we have the ability to alter the questions at any time. This allows us to be responsive to a range of issues that affect the experiences of our patient," Ms Gould said.

The touch screen devices include a scale of satisfaction using emoticons, making them user-friendly. They also allow the patient experience to be reported in real time, at 15 minute intervals and on the patient lounge television screens.



"Consumers can provide a free text comment if they have specific information they need to tell us. They can also leave their name and contact details if they would like to be contacted to discuss their comment in further detail," Ms Gould said.

A popular feature of the kiosks is that consumers can swipe their appointment letter, and have their details automatically uploaded in to the hospital system when they arrive.

Feedback from kiosks is presented monthly to the hospital's Patient Centred Care Committee, where suggestions are considered and implemented where possible.