



OUR
HEALTHCARE
FUTURE

Delivering our elective surgery plan

Progress Report for Year 3 of
the Statewide Elective Surgery
Four-Year Plan 2021–2025

September 2024

Acknowledgement of Country

The Department of Health Tasmania respectfully acknowledges Tasmanian Aboriginal people as the traditional custodians of the land on which we live, work and play and pays respect to Aboriginal Elders past and present.

Recognition statement

Tasmanian Aboriginal people's traditional lifestyle promoted physical and emotional health and wellbeing, centred around Country, Kin, Community and Spirituality. Aboriginal people continue to value the importance of culture, community connection and being on Country as vital components of health and wellness. Through colonisation, Aboriginal people experienced displacement and disconnection, which has significantly affected their health and wellbeing. We recognise Aboriginal people are the

knowledge holders and provide best practice in promoting health and wellbeing for Aboriginal people. We acknowledge and learn from the ongoing work of Aboriginal organisations in ensuring continued health and wellness. We commit to working in partnership with Tasmanian Aboriginal communities and health leaders now and into the future to improve health and wellbeing.

Artist Statement

The coast between Mmuntarikawtim and Munrak, also known as Kings Run, on the North West coast of Lutruwita/Tasmania, a 338 hectare property returned to the Aboriginal community in 2017 through philanthropic donations and an Indigenous Land Corporation grant. It is home to important Aboriginal heritage – middens, seal hides, stone tools and hut depressions – a reminder of the tens of thousands of years Aboriginal people have lived there, and home to threatened species, including the Tasmanian Devil, Orange-bellied Parrot, and Tasmanian Wedge-tailed Eagles. Photographer – Jillian Mundy.

Contents



Acknowledgements	2
Acknowledgement of Country	2
Recognition Statement	2
Goals of the Four Year Plan	4
Strategies to Continue Achieving the Four-Year Plan	5
Key Achievements	6
Our Progress	7
Growth in Demand	7
The Patient Journey	8
Year 3 Activities Completed	9
Year 4 Activities for Implementation	10

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Goals of the Four-Year Plan

The *Statewide Elective Surgery Four-Year Plan 2021–2025* (the Four-Year Plan) outlines strategies and actions for increasing access to more publicly provided elective surgery procedures for the Tasmanian community. Our goals are to:

- Ensure equitable access for all patients needing surgery, regardless of where they live or what procedure they are waiting for.
- Enable patients to receive procedures within clinically recommended times.
- Promote the implementation of best practice, evidence-based models of care that optimise patient outcomes.
- Provide greater transparency to Tasmanians of the process that determines access to elective surgery.
- Ensure the system is designed to adequately meet the elective surgery needs of the Tasmanian population.

We are making progress against these goals.

Strategies to Continue Achieving the Four-Year Plan

In the final year of the Four-Year Plan, we will continue to drive performance and increase activity in service delivery to ensure that the wait list continues to reduce to improve the number of people seen within clinically recommended timeframes.

A substantial elective surgery program will continue to be delivered over the remaining year of the Four-Year Plan to ensure sustainability of services into the future. To ensure this happens, the Department of Health and the Tasmanian Health Service must ensure strategies:



Use the capacity we have more effectively and efficiently.



Enhance our **private sector partnerships** to assist in the delivery of more elective surgery.



Invest in public sector capital infrastructure and equipment to increase elective surgical capacity.



Invest in our workforce to ensure higher levels of elective surgery throughout can be safely delivered and sustained.



Implement **innovative improvement** and service development programs to improve the way we deliver elective surgery and ensure patients receive contemporary, best practice models of care.

Key Achievements

In Year 3, we have:

- ✓ **Delivered 22 196 elective surgery admissions**, which is 706 admissions (3.3%) above the annual target and more surgeries than we have ever delivered on record.
- ✓ **Delivered 13 394 endoscopies**, more than we have ever delivered on record.
- ✓ **Public hospitals increased 'in-house' elective surgery admissions by 7.3 percent** when compared to the previous financial year. Increasing public sector capacity is a key goal of the Four-Year Plan.
- ✓ **Performed 23 223 emergency surgeries** and other procedures over the past twelve months, in addition to the record-number of elective surgeries achieved.
- ✓ **Reduced the number of people waiting overboundary on the elective surgery wait list by 223 (7.3%)**. This was despite demand increasing significantly, due to surgical specialists seeing 16 251 more patients in outpatient clinics.
- ✓ **Reduced the number of longest waiting patients by 85.8 percent**, with the largest number of long-waiting people seen from the orthopaedic surgery, general surgery and plastic and reconstructive surgery specialties.
- ✓ **Eight surgical specialties reduced the number of overboundary patients on the wait list, including:**
 - Cardiothoracic Surgery
 - General Surgery
 - Gynaecology
 - Neurosurgery
 - Oral Maxillo Facial Surgery
 - Orthopaedic Surgery
 - Paediatric Surgery
 - Urology
- ✓ **The percent of patients seen on time increased** for all patient urgency categories (1 – Urgent, 2 – Semi Urgent, and 3 – Non Urgent).
- ✓ **The average overdue wait time of patients waiting decreased** for all patient urgency categories (1 – Urgent, 2 – Semi Urgent, and 3 – Non Urgent), which indicates the wait list 'tail' is reducing.

Our Progress

During the third year of our Four-Year Plan, surgical and perioperative services made significant improvements by delivering a record number of elective surgeries, increasing the utilisation of our public hospitals, and improving timeliness to surgery, despite additions to the elective surgery wait list (demand) increasing significantly.

Growth in Demand

During 2023–24, demand for elective surgery increased by 13.2 percent on the previous year (Figure 1), which meant that despite a record level of surgeries, our wait list did not reduce as we had projected.

The increased demand is due to a significant uplift in patients seen by surgical specialists in outpatient clinics. This is attributed to improvements made to the efficiency of outpatient services, resulting in a record number of outpatient attendances under the *Transforming Outpatient Services Four-Year Strategy 2022–2026*. When more people are seen in outpatients for surgical specialties, more people are referred to an elective surgery procedure.

However, this increased outpatient clinic capacity will have ongoing benefits into the future. Being seen sooner in the outpatient part of the patient journey makes elective surgery demand more transparent and helps reduce the total wait time in the journey to surgery.

We are taking action to meet this increased demand, by opening more theatres, running extended theatre lists and recruiting specialist, nursing and allied health staff. We continue to work closely with our private hospital providers to maximise available capacity across the State, to ensure that Tasmanians receive access to timely treatment, regardless of where they live.

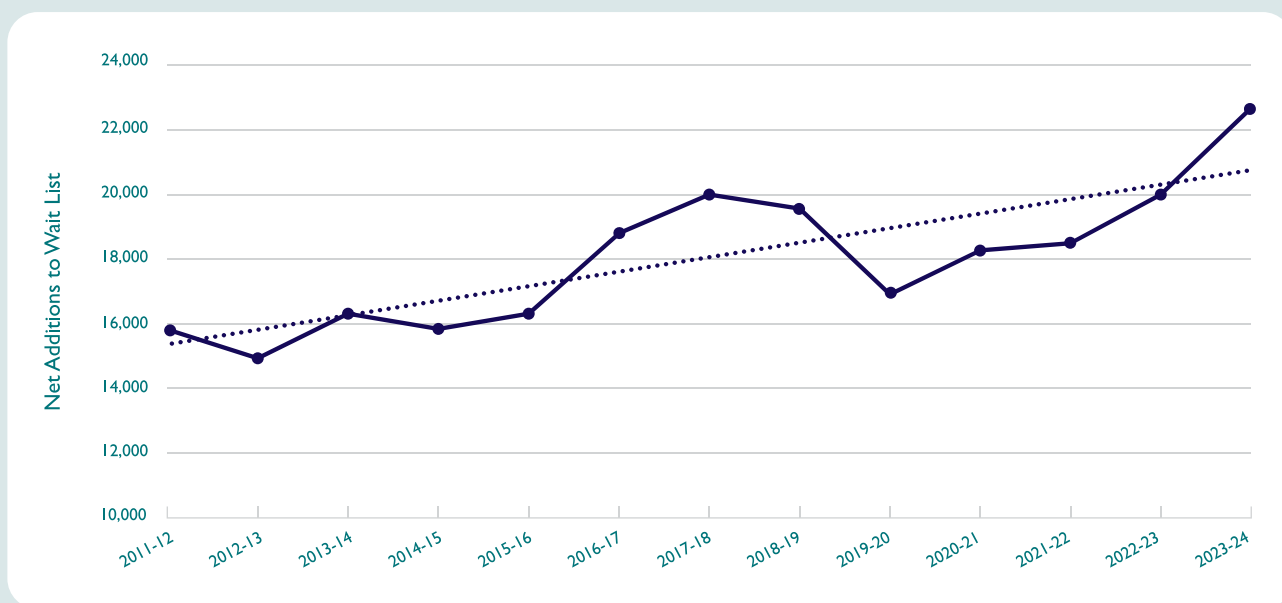


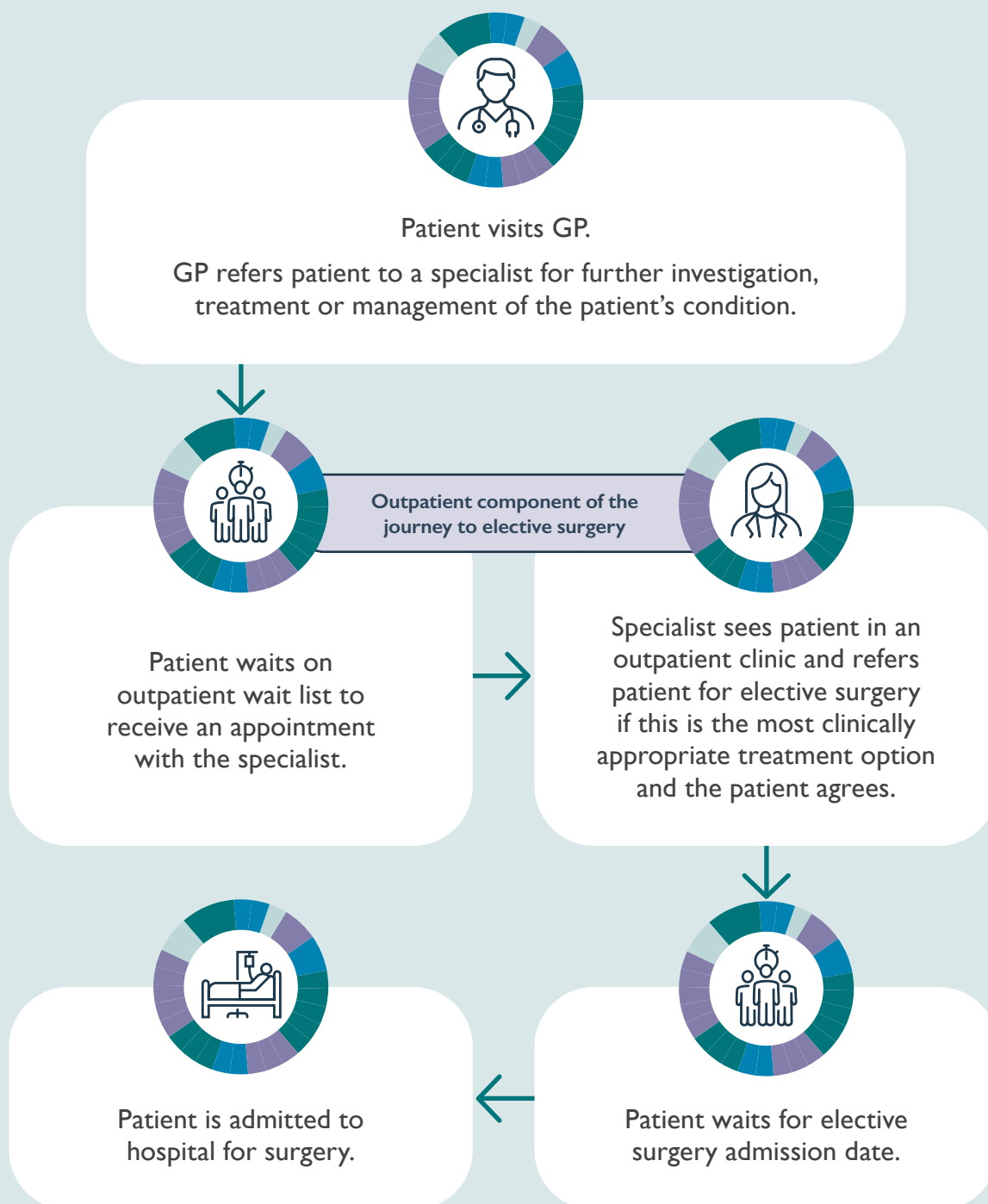
Figure 1. Number of people added to the elective surgery wait list by year

The Patient Journey

The diagram below shows the patient journey from GP referral to specialist appointment to surgical admission.

Through the *Statewide Elective Surgery Four-Year Plan 2021–2025* and the *Transforming Outpatient Services Four-Year Strategy 2022–2026*, the Department of Health will:

- implement strategies to reduce the time people wait along the entire patient journey, and
- consider ways to increase the visibility and transparency of our service through publicly-reported information. This will enable patients to make informed choices and will help drive accountability and facilitate improvements across the Tasmanian health system.



Year 3 Activities Completed

In Year 3, key activities completed through the Four-Year Plan include:

- ✓ **Continued to build our workforce**, through an effective national and international recruitment campaign to fill several vacant specialist positions.
- ✓ **Developed a successful business case for robotic technology** to enhance digital technology and support surgical delivery at the LGH.
- ✓ **Implemented a successful conscious sedation pilot program at Oral Health Services Tasmania** within the Southern Dental Centre in New Town, reducing the need for patients to have a general anaesthetic in a theatre setting and freeing up theatre sessions for other complex surgeries.
- ✓ **Strengthened our private-public partnerships**, through the development of an Outsourcing Framework, based on feedback and consultation with our private hospital sector.
- ✓ **Developed new models of care** and other service enhancement reforms.
- ✓ **Improved the administration** and management of our waiting lists.
- ✓ **Undertook detailed analysis of the processes and systems** supporting our Request for Admission process, to consider the feasibility of digital enhancements to the existing paper-based process.



Year 4 Activities for Implementation

In Year 4 of our Four-Year Plan, we will progress a range of reforms and enhancements to services that will drive efficiencies in activity and quality of care for surgical and perioperative services. The following strategies are either ongoing or new, have been aligned to our strategic policy environment and will form the program of work over the remaining year to help achieve the goals of the *Statewide Elective Surgery Four-Year Plan 2021–2025*.

Infrastructure and Equipment Strategies

ID	ACTION	TIMEFRAME	ACTION DETAILS	STATUS
1.0	Continue implementation of the Regional Masterplan Infrastructure redevelopments	Ongoing	<p>Investments in health infrastructure will increase the capacity of surgical and perioperative services across the state and will facilitate the introduction of innovative models of care.</p> <p>Implementation of the Masterplans for the Launceston General Hospital and the Royal Hobart Hospital is underway. The Draft North West Hospitals Masterplan was released in April 2023 with the final Masterplan expected to be released in the coming months.</p> <p>In Year 4, the Department of Health will expand outpatient clinics and operating theatres at the Mersey Community Hospital, with additional endoscopy, day surgery and theatre suites opening as part of the works. The upgraded facilities will improve access to sub-speciality surgeries and help reduce waiting times for a range of elective surgeries. Construction is expected to finish in early 2025.</p>	✓ EXISTING REFORM – CONTINUE

Workforce Strategies

ID	ACTION	TIMEFRAME	ACTION DETAILS	STATUS
2.0	Continue implementation of the <i>Health Workforce 2040 Strategy</i>	Ongoing	<p>Key health workforce activities delivered in Year 3 for surgical and perioperative services were:</p> <ul style="list-style-type: none"> Contributing to the implementation of the National Independent Review of Australia's Regulatory Settings Relating to Overseas Health Practitioners to improve systems and processes for overseas health practitioners to work in Australia. Employing 57 of the first North West UTAS School of Nursing graduates that completed their degrees in 2022, to start work locally in 2023. Committing to growing our nursing workforce supply by establishing jobs for all UTAS nursing graduates. The \$1.125 million allied health scholarship program targeting allied health students who are completing their final year of study to either stay in the State after graduating or to relocate to work in Tasmania was introduced attracting 45 Allied Health graduates to areas of workforce need across the state. <p>Efforts will continue in 2024–25 across the six focus areas of <i>Health Workforce 2040</i>.</p> <p>In Year 4, we will explore how dedicated resources in specialist medical and nursing recruitment can be established to provide tailored support to the Clinical and Nursing Directors of surgical and perioperative services, on issues such as retirement and succession planning, recruitment campaigns, research, education and training opportunities, concierge and onboarding support and an escalation point for navigating complex system issues.</p>	✓ EXISTING REFORM – CONTINUE

Strategies to Enhance Surgical Support Services

ID	ACTION	TIMEFRAME	ACTION DETAILS	STATUS
3.8	Statewide Surgical & Perioperative Services Digital Strategy	September 2024 December 2024 June 2025	In Year 3, a comprehensive review of the processes and systems that support the referral, triage and acceptance of patients added to the planned surgical wait list commenced. Recommendations accepted by the Department of Health will be progressed in Year 4 as part of the <i>Digital Health Transformation Strategy 2022–2032</i> to improve systems and processes that support efficient and high quality surgical and perioperative services.	✓ EXISTING REFORM – CONTINUE
3.9	Explore investment in new technologies to support surgical and perioperative services	June 2024	Following announcement of additional funding in the 2024 Tasmanian State Election, robotic technology to support surgical delivery at the LGH will be implemented. The LGH will commence a procurement process, and will develop all relevant protocols and procedures, staff training and education requirements, clinical criteria and guidelines for care delivery.	✓ EXISTING REFORM – CONTINUE

Strategies to Partner with the Private Sector

ID	ACTION	TIMEFRAME	ACTION DETAILS	STATUS
4.0	Strengthen public/private partnership for elective surgery and endoscopy services	June 2025	In Year 3, consultations between key stakeholders occurred to review existing elective surgery contracts and inform the development of an Outsourcing Framework. The Outsourcing Framework provides a set of guiding principles to engage with the private sector in future tender processes. In Year 4, the Department of Health will implement recommendations from the Outsourcing Framework. The Department of Health will also undertake a procurement process for the new outsourcing contracts, which is scheduled to be completed by June 2025.	✓ EXISTING REFORM – CONTINUE

Reform and Service Enhancement Strategies

ID	ACTION	TIMEFRAME	ACTION DETAILS	STATUS
5.12	Phase I – Statewide Musculoskeletal Service	June 2025	Models of care for Rheumatology and Persistent Pain Services in the North/North West were developed in Year 3, alongside a concept design for a statewide musculoskeletal service, which will form the basis of future service development initiatives.	✓ EXISTING REFORM – CONTINUE
5.13	Phase I – Persistent Pain Services North / North West		BAC assessment services were established in the North in 2022, for eligible people in the North and North West presenting with low back pain. Some supporting elements of the statewide MSK framework, for example a training pathway for advanced scope physiotherapy clinicians, will be scoped and drafted in 2024/25.	
5.14	Phase I – Rheumatology Service North / North West			
5.15	Implement Ear, Nose and Throat Service Improvements	June 2025	An Ear, Nose Throat (ENT) Special Working Group has provided specialist advice for ENT services in Tasmania. In Year 4, recommendations of the ENT Special Working Group will continue to be progressed.	✓ EXISTING REFORM – CONTINUE
5.17	Implement a pilot conscious sedation program	June 2025	OHST have piloted a conscious sedation program within the Southern Dental Centre in New Town. In Year 4, OHST will expand this model of care to the Northern region. It is anticipated that approximately 10–12 days of sedation will be delivered each year statewide, with 7–8 patients seen per day. This program will greatly assist in reducing demand for dental surgery under a general anaesthetic in a hospital setting and will enable theatre sessions to be reallocated to other urgent cases.	✓ EXISTING REFORM – CONTINUE
5.18	OHST Major Dental Centres to focus on interventions to minimise need for dental care under general anaesthetic	June 2024	For dental patients requiring hospital-based day surgery, OHST is continuing to use alternative options for care to minimise the need for patients to be treated under general anaesthetic. This initiative has been incorporated into core business for OHST.	✓ COMPLETED
5.19	Bariatric Surgery and Metabolic Services	June 2025	In Year 4, a working group will progress the following outputs: <ul style="list-style-type: none"> • Confirm existing patient pathways, • Identify the feasibility of non-surgical interventions and complementary pathways to surgery where clinically recommended, including models of care implemented in other jurisdictions, • Confirm which bariatric surgical interventions should be offered, • Document a statewide model of care for bariatric surgery and metabolic services. • Identify gaps in resourcing required to implement the model of care, and • Develop a business case for ongoing funding if required. 	✓ EXISTING REFORM – CONTINUE
5.20	Enhance the Capacity Planning Tool	February 2024	The capacity tool is being used to set Year 4 elective surgery targets within budget that address differing levels of demand expected for surgical specialties.	✓ COMPLETED

ID	ACTION	TIMEFRAME	ACTION DETAILS	STATUS
5.21	Develop a performance framework for surgical and perioperative services	June 2025	The Department of Health will continue to review and improve information that is internally used and publicly released about surgical and perioperative services.	✓ EXISTING REFORM – CONTINUE
5.22	Start planning for the next Statewide Elective Surgery Four-Year Plan	June 2025	The Department of Health has commenced planning for surgical and perioperative services beyond 2025 to ensure people are seen within clinically recommended times and to deliver high quality, safe and sustainable surgical services for the Tasmanian community.	✓ EXISTING REFORM – CONTINUE
5.23	Maximising theatre efficiency	June 2025	<p>The Department of Health will continue to drive reform and service enhancements to maximise theatre efficiency across the state. This includes assessing the feasibility of theatre efficiency initiatives that have been deployed in other jurisdictions within the Tasmanian context.</p> <p>The assessment will consider hospital resources, governance, operating theatre culture, roles and responsibilities, patient pathways and management, hospital patient flow, operating theatre metrics and benchmarks, access to data, and monitoring costs. Outputs may include statewide clinical guidelines, KPIs or a list of strategies to implement.</p>	NEW
5.24	Pre-surgery optimisation reform or pre-habilitation programs	June 2025	<p>Pre-habilitation improves a patient's physical and psychological function to support them before, during and after surgery. This can lead to a faster recovery, better patient experiences and cost savings for the health system. Programs that optimise patients prior to surgery, helps to ensure the best possible outcomes for patients, by reducing length of stay, reducing risk of post-operative complications, enhancing recovery post-surgery and preparing patients psychologically, physically and emotionally for surgery.</p> <p>In Year 4, initiatives to support pre-surgery optimisation and pre-habilitation programs will be scoped for implementation.</p>	NEW
5.25	Same-Day Surgery	December 2024 – June 2025	<p>In Year 4, the Department of Health will investigate the potential to implement a same-day surgery model and pilot program for Tasmania, considering best practice guidelines developed in other States.</p> <p>Day surgery models – also known as same-day surgery models – admit and discharge the patient the same day they have surgery. The benefits of day surgery models for well-selected patients include:</p> <ul style="list-style-type: none"> • supporting patient engagement in their care decisions and empowering them in their recovery by facilitating their return to a familiar environment, • reducing risks of hospital-acquired complications, and • promoting early mobilisation and faster return to baseline performance in activities of daily living. <p>Day surgery models optimise use of health system resources, including:</p> <ul style="list-style-type: none"> • decreasing hospital length of stay, • improving patient flow (service wide), • minimising hospital-initiated postponements secondary to bed blockages, • increasing theatre utilisation, and • reducing surgical waitlists. 	NEW

ID	ACTION	TIMEFRAME	ACTION DETAILS	STATUS
5.26	Waitlist Management Optimisation	December 2024 – June 2025	<p>In Year 4, the Department of Health will update the Statewide Planned Surgery Access Policy and implement improvements to our planned surgery waitlist management processes, including the development of standardised communication templates and training materials to support the onboarding of staff. The scope of the policy will broaden to include patients waiting for dental surgery under a general anaesthetic.</p> <p>The Department of Health will also update its clinical and clerical auditing process, to review those patients who have been waiting for their surgery and to provide an appropriate treatment plan and/or improved pre-surgery optimisation whilst they prepare for surgery.</p>	NEW

