



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

A storm brews over the east end of Truwana/Cape Barren Island. Truwana was returned to the Tasmanian Aboriginal community in 2005 and is home to around 80 people. Photographer – Jillian Mundy.

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Goals of the Four-Year Plan

In 2023, the Tasmanian Government committed additional funding for public endoscopy services and released the *Statewide Endoscopy Services Four-Year Plan* 2023–2027 (the Four-Year Plan). The Four-Year Plan includes service reforms and actions to deliver on our goals of:

- I. Service sustainability By delivering this plan, we will improve the number of people seen within clinically appropriate times to ensure Tasmania has a sustainable public service for the future.
- **2. Delivering care on time** By fully utilising capacity across the health system, we will deliver more endoscopies to ensure people receive the care they need in a timely manner.
- 3. High quality, person-centred care By partnering with consumers, implementing contemporary models of care and aligning our services to the national standards, we will continue to build high quality and safe endoscopy services, ensuring patient needs are at the forefront of our planning.

We are making progress against these goals.



Action Areas to Continue Achieving the Four-Year Plan

The first year of the Statewide Endoscopy Services Four-Year Plan 2023–2027 has laid the foundations for success across a range of measures. These foundational activities will ensure we can continue to achieve the goals of the Four-Year Plan.

Over the next three years, we will continue to build on the following action areas to ensure Tasmanians can continue to receive timely access to high quality endoscopy services:



Deliver more endoscopies



Build public capacity



Fully utilise public capacity

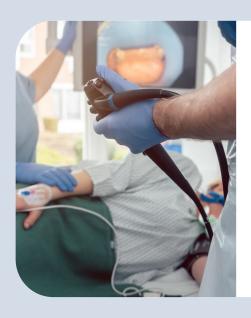


Partner with the private sector



Continually improve service quality

Our Progress



Record Number of Endoscopies

Through the Four-Year Plan, more people have received an endoscopy in Tasmania than any year on record.

- The Year I activity target for endoscopies was 13 010 admissions. Hospitals have delivered 13 394 admissions in 2023–24, which is 3.0 percent above target.
- Endoscopies delivered by private providers to public patients increased by 9.5 percent statewide, demonstrating our strengthened partnership with the private sector and utilisation of available capacity in the State to help address the public wait list for endoscopies.



Growth in Demand

Over the past year, growth in demand for endoscopies was higher than the long-term average, with 13 804 people added (in net terms) to our planned procedure list.

- The high growth in demand has been attributed to a range of factors, including an increase in referrals from GPs, improvements made to the efficiency of outpatient services and system enhancements to the eReferrals process that facilitates GP referrals.
- The consequence of high growth in demand was the number of patients on the wait list at June 2024 who had waited too long (overboundary patients) increased by 612 compared to June 2023.
- However, the average (median) wait time of patients on the wait list decreased, from 116 days in June 2023 to 111 days in June 2024. This indicates the longest waiting patients were targeted for admission in 2023–24.
- Also improving in 2023–24 was the average (median) wait time to admission, from 84 days in 2022–23 to 76 days in 2023–24.

Year I Activities Completed



Allocated \$1.2 million in additional funding

for essential endoscopy equipment to all hospitals, as announced in the 2023–24 State Budget.



Continued to build our workforce, through successful recruitment to fill vacant

gastroenterology positions.



Implemented gastroenterology Statewide Referral Criteria (SRC) in the

eReferrals platform, making it easier for GPs and referring specialists to submit a referral, and improving the quality of information required to triage.



Strengthened our private-public partnerships, through the development of an Outsourcing Framework, based on feedback and consultation with our private hospital sector.



Strengthened consumer representation on the Tasmanian Endoscopy Network,

providing the opportunity for unique insights and lived experiences, and an additional consumer voice to inform decisions.



Partnered with consumers to increase education to the community to raise awareness about bowel preparation and to help patients make informed decisions about their care.



Progressed system upgrades to EndoVault, the digital application used to capture procedure information and generate reports for endoscopic procedures. The upgrades enable integration of reports with the Digital Medical Record (DMR), eliminating the necessity for staff to print and scan reports.

Year 2 Implementation Activites

In Year 2 of the Four-Year Plan, the Department of Health is progressing a range of reforms and enhancements to the endoscopy service that will drive efficiencies in activity and improve quality of care. 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 years to help achieve the goals of the *Statewide Endoscopy Services Four-Year Plan 2023*—2027.

I. Deliver more endoscopies

ACTON	ACTION DETAILS		TIMEFRAME	PROGRESS IN 2023–24	ACTIONS PLANNED FOR 2024–25
I.I	Set activity targets	Set annual performance targets to meet required activity levels through THS Service Plan.	Annually	✓ COMPLETED	✓ EXISTING REFORM – CONTINUE
1.2	Service monitoring	Develop a performance framework for endoscopy services and provide regular reporting on activity, waiting list reduction, and number of people at risk of waiting longer than clinically recommended (over boundary).	Ongoing	A Statewide reporting template has been endorsed by the Tasmanian Endoscopy Network and is being integrated into the Endovault electronic health record platform to ensure statewide consistency, transparency, and validity of data reporting for KPIs aligned to the Colonoscopy Clinical Care Standards.	Investigate the feasibility of further upgrades to Endovault, including the integration and automation of pathology data to enhance reporting against the Colonoscopy Clinical Care Standards.
1.3	Capacity planning	Review demand and activity projections, system capacity and other influencing factors to inform service profile adjustments to maximise regional capacity (as required).	Annually	✓ COMPLETED	✓ EXISTING REFORM – CONTINUE

2. Build public capacity

ACTON	ACTION DET	AILS	TIMEFRAME	PROGRESS IN 2023–24	ACTIONS PLANNED FOR 2024–25
2.1	Develop infrastructure to support additional endoscopy and elective surgery	Increased endoscopy capacity to be achieved through the development of surgical and support services, including greater inpatient bed numbers and increased outpatient services.	Ongoing	COMMENCED Infrastructure services are providing quarterly updates to the Tasmanian Endoscopy Network on progress for review, with issues escalated as required.	Department of Health's Health Planning Unit will continue to work with Infrastructure Services and the Tasmanian Endoscopy Network to identify issues and implement strategies as part of the regional masterplans and redevelopments.
2.2	New equipment	Allocate funding for new and replacement equipment to enable service delivery.	Annually	\$1.2 million in additional funding was allocated to all Hospitals for essential endoscopy equipment, as announced in the 2023–24 State Budget.	✓ COMPLETED
2.3	Refurbish existing endoscopy suites to increase capacity	North West Regional Hospital – upgrade Theatre 4 and endoscopy reprocessing areas.	Completed	✓ COMPLETED	✓ COMPLETED
		Mersey Community Hospital – theatre refurbishment project.	Expected completion early 2025	✓ COMMENCED Work is nearing completion to expand the outpatient clinics, endoscopy suites and operating theatres at the MCH.	Due to the staging and decanting requirements of the build, theatre I and endoscopy suites I and 2 will be operational by the I9 August 2024, with theatre 2 being used as a storeroom while demolition of D block is underway. Works are continuing, with planning for the demolition of D Block well underway and the installation, commissioning and familiarisation of the temporary Central Sterile Supply Department (CSSD) ongoing.
		Royal Hobart Hospital – refurbish endoscopy unit.	Stage & 2 Completed	✓ COMPLETED	✓ COMPLETED

ACTON	ACTION DETAILS	TIMEFRAME	PROGRESS IN 2023–24	ACTIONS PLANNED FOR 2024–25
	Launceston General Hospital – reprocessing area upgrade (CSSD).	Completed	✓ COMPLETED	✓ COMPLETED
	Launceston General Hospital – create additional dedicated endoscopy suite in Day Procedure Unit.	To be set as part of Stage 2 LGH Masterplan	COMMENCED Work is progressing to finalise the infrastructure requirements for the LGH Day Procedure Unit.	✓ EXISTING REFORM – CONTINUE

3. Fully utilise public capacity

ACTON	ACTON ACTION DETAILS		TION DETAILS TIMEFRAME PROGRESS IN 2023–24	ACTIONS PLANNED FOR 2024–25	
3.1	Build endoscopy workforce	Pursue recruitment strategies that are tailored to each region, including recruiting new gastroenterologists and utilising fly-in fly-out models. Continue to implement the Health Workforce 2040 Strategy.	Ongoing	NEW	In Year 2, the Department of Health will investigate the feasibility of Nurse-led models to increase the timeliness of triaging colonoscopy referrals (including those generated from the National Bowel Cancer Screening Program) and to standardise and streamline results management in accordance with clinical practice guidelines recommendations. Efforts will continue in 2024–25 across the six focus areas of Health Workforce 2040.
3.2	Waitlist management	Establish statewide system for waitlist management, including activity profile management, routine waitlist data cleansing processes and business improvement initiatives.	March 2024	Endoscopy outpatient waitlist has been audited for multiple listings and duplicate records. Outpatient waitlist auditing is now part of business as usual.	 EXISTING REFORM - CONTINUE In Year 2, the Department of Health will: Review and update the Statewide Waitlist Access Policy and Handbook. Review and update the Endoscopy Implementation Standards, including the processes surrounding a clinical and clerical review. Ensure alignment of urgency categorisation with Victorian Categorisation Guidelines 2017. Optimise the eReferral smart forms with clinically defined, proposed assisted triage.

ACTON	ACTION DETAILS		TIMEFRAME	PROGRESS IN 2023–24	ACTIONS PLANNED FOR 2024–25
3.3	Capacity planning	Review demand and activity projections, system capacity and other influencing factors to inform service profile adjustments to maximise regional capacity.	Mid-year review, annually by 31 January	✓ COMPLETED	✓ EXISTING REFORM – CONTINUE

4. Partner with the private sector

ACTON	ACTION DETAILS		TIMEFRAME	PROGRESS IN 2023–24	ACTIONS PLANNED FOR 2024–25
4.1	Support private sector to deliver outsourced endoscopies	Work with private providers to support service planning, including providing certainty around outsourced activity volumes. See also Action 4.5: Statewide Elective Surgery Four-Year Plan 2021–2025.	Service profiles reviewed and confirmed annually	In Year I, consultations between key stakeholders occurred to review existing elective surgery and endoscopy 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.	✓ EXISTING REFORM – CONTINUE In Year 2, the Department of Health will implement recommendations from the Outsourcing Framework.
4.2	Increase volume of outsourced endoscopies	Explore opportunities to increase the number of outsourced endoscopies by reviewing arrangements with existing providers and by engaging new providers.	Ongoing	✓ COMMENCED Specifications and conditions of contract have been finalised ahead of a new tender process.	The Department of Health will undertake a procurement process for the new outsourcing contracts, which is scheduled to be completed by June 2025.

5. Continually improve service quality

ACTON	ACTION DET	AILS	TIMEFRAME	PROGRESS IN 2023–24	ACTIONS PLANNED FOR 2024–25
5.1	Engage with stakeholders to drive improvement	Work with the Tasmanian Endoscopy Network to oversee and drive endoscopy service improvement in Tasmania.	Ongoing	✓ COMMENCED	 EXISTING REFORM - CONTINUE In Year 2, the Department of Health will: Implement the Commonwealth's Federal Funding Agreement for the Expansion of Colonoscopy Triage Services for participants of the NBCSP. Standardise the management of surveillance endoscopies (Category 4 Recalls), in consultation with the TEN and the GP and Primary Care sectors. Work towards statewide bowel preparation regimes and consistent, statewide patient information co-designed with consumers.
5.2	Direct Access Endoscopy process, guidelines, and protocols	Formalise and streamline direct access to endoscopy procedures so that patients do not have to be referred to outpatient clinics first.	December 2023	Policies and protocols have been revised, and Statewide Referral Criteria developed for the eReferrals platform to ensure statewide consistency of the referral pathway for direct access endoscopy.	✓ COMPLETED
5.3	Partner with consumers to improve quality of care	Provide increased education to the community and patients to raise awareness about bowel preparation, help patients make informed decisions about their care and to improve service quality.	Ongoing	In Year I, the Department of Health partnered with consumers to explore opportunities to increase education to the community to raise awareness about bowel preparation and to help patients make informed decisions about their care and to improve service quality. This includes the development of a Statewide template for morning and afternoon bowel preparation regimes.	In Year 2, the Department of Health will continue to partner with consumers to co-design a communication strategy for endoscopy services. The strategy will include consistent and easy to understand key messages and educational resources, and development of multimedia tools, to improve health literacy and ensure patient understanding.
5.4	Implement best practice care in line with national standards	Monitor service quality and redesign services to support implementation of the Australian Commission for Safety and Quality in Health Care Colonoscopy Clinical Care Standards.	Ongoing	In Year I, reporting was consolidated within the Department of Health to ensure statewide consistency with how information is accurately collected. This includes the development of a statewide reporting template to capture information on the clinical quality indicators in line with the Australian Commission on Safety and Quality in Healthcare Colonoscopy Clinical Care Standards.	 EXISTING REFORM - CONTINUE In Year 2, the Department of Health will: Update the Endoscopy Implementation Standards to ensure statewide consistency and to create system efficiencies and productivity. Enhance and standardise reporting across the Department of Health, including further reporting on the Colonoscopy Clinical Care Standards and developing public reporting for endoscopy services.



