



OUR
HEALTHCARE
FUTURE

Delivering our outpatient transformation strategy

Progress Report for Year 2 of the
Transforming Outpatient Services
Four-Year Strategy 2022–26

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
Strategy Goals	4
Action Areas to Continue Achieving the Strategy Goals	5
Our Progress	6
Key Achievements	7
Growth in Demand	9
Year 2 Activities Completed	10
Year 3 Activities for Implementation	11

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Strategy Goals

The *Transforming Outpatient Services 2022–26* four-year strategy (the Strategy) outlines the health system reforms that will be implemented to change the way in which outpatient services are delivered to meet the future needs of Tasmanians.

The Strategy reforms will contribute to a sustainable, safe, integrated, and person-centred Tasmanian health system, and ensure Tasmanians can access quality specialist outpatient services at the right time and in the right setting.

We are on track to achieve these goals.



Action Areas to Continue Achieving the Strategy Goals

Reforms have been successfully implemented during the first two years of the Strategy that have laid the foundations to continue achieving its goals over the remaining two years and beyond. The final two years of the Strategy will continue to see improvements in the following action areas:



Care Delivery – design and deliver service models to increase clinic capacity, reduce waiting times and deliver evidence-based, best practice care.



Business Process Redesign – design and deliver an efficient and person-centred central administrative service that enables high quality, efficient outpatient services and contemporary models of care.



ICT & Virtual Care Capability – optimise the use of digital technology and virtual care to enable contemporary models of care and increase efficiency of business processes.



Service Development – with our partners, use research and evidence to plan and deliver system level service developments to increase access and quality of outpatient services to Tasmanian communities.



Connecting Care – with our key partners Primary Health Tasmania and Tasmanian primary care sector, support GPs and hospital-based specialists to better manage and connect the care needs of their patients.



Monitoring & Reporting – drive improvements in quality, access and efficiency through data and information about activity, performance, outcomes and experience.



Funding & Performance – identify, develop and deliver purchasing and funding models that drive service innovation, improvement and efficiency.



Our Progress

During Year 2 of the Strategy, outpatient services have improved access to care by delivering a record number of appointments, including a record number of new patient appointments from the outpatient waitlist.

The increased number of appointments we have delivered has been crucial in meeting the growing demand for outpatient services.

Key Achievements

In Year 2, we have:

- ✓ **Delivered a record number of new and review outpatient appointments**, with nearly 530,000 attendances at an outpatient clinic or by telephone and virtual care. This is an increase of 9.4 per cent on the previous year.
- ✓ **Removed a record number of 85,070 people from the outpatient waitlist** after attending an appointment. This is an increase of 15.3 per cent on the previous year.
- ✓ **Increased the number of waitlist removals** for the following specialties by more than 25 per cent:
 - Neurosurgery
 - Oral Maxillo Facial Surgery
 - Renal Medicine
 - Dermatology
 - Geriatric Medicine
 - Ophthalmology
 - Ear Nose & Throat
 - Colorectal Surgery
 - Allied Health
 - Respiratory Medicine
- ✓ **Reduced the number of people waiting overboundary** on the outpatient waitlist by 2.4 per cent and the number of patients waiting longer than 12 months by 2 per cent.
- ✓ **Significantly decreased the number of people waiting overboundary for the following specialties:**
 - Pain Medicine
 - Renal Medicine
 - Rheumatology
 - Ophthalmology
 - Gynaecology
 - Geriatric Medicine
 - Neurosurgery
 - Colorectal Surgery
 - Oral Maxillo Facial Surgery
 - Orthopaedic Surgery
- ✓ **Recorded the lowest proportion of people on the outpatient waitlist** waiting overboundary since before the COVID-19 pandemic.
- ✓ **Reduced the average overdue wait time of patients** waiting for all patient urgency categories (1 – Urgent, 2 – Semi Urgent, and 3 – Non Urgent), which indicates the waitlist “tail” is shortening.
- ✓ **Continued the reduction in patient non-attendance** that we have seen since the Strategy commenced in July 2022 (Figure 1).

Key Achievements Continued

In Year 2, we have:

- ✓ **Improved the rate of patient non-attendance** from a high of 7.8 per cent in November to 6.4 per cent in June, following the successful 'If you can't make it, let someone else take it' media campaign.

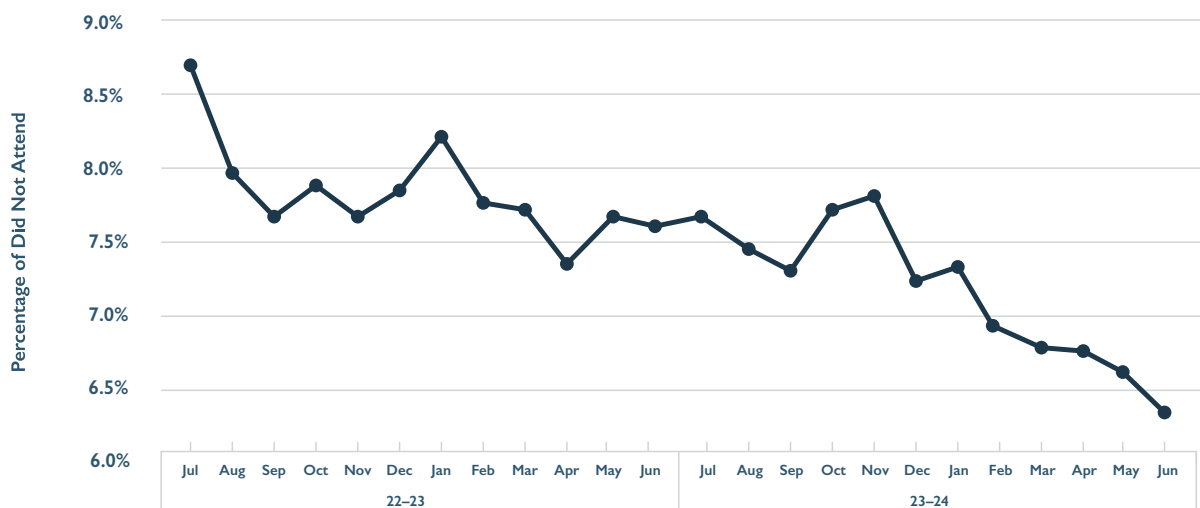


Figure 1: Percentage of did not attend by month



Key Achievements Continued



Growth in Demand

Demand for outpatient services continued to grow during 2023–24. Over 111,000 patients were added to the outpatients waitlist (Figure 2), an increase of 6.5 per cent on the previous year, and above the predicted level of demand.

The higher-than-expected level of demand means that we have not been able to reduce the size of the waitlist as planned.

New models of care and improved processes implemented under the strategy have been effective in managing the increased demand for outpatient services, and have kept waitlist growth below 2 per cent during 2023–24.

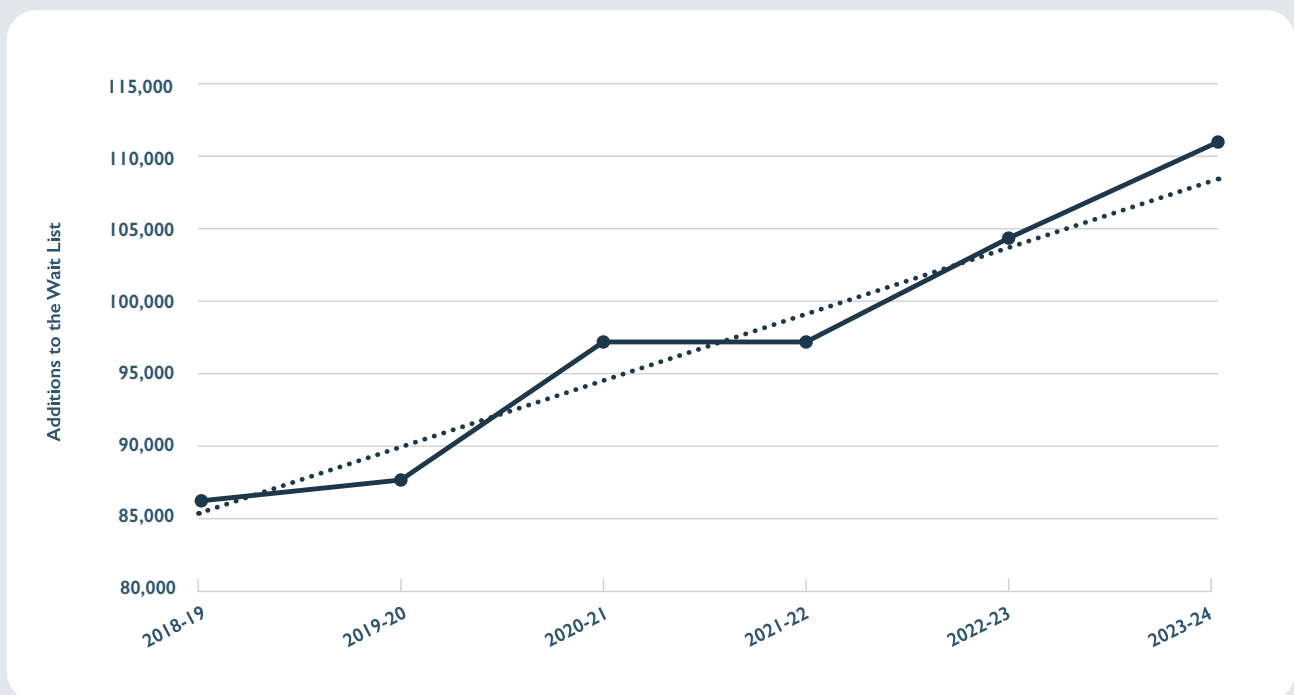


Figure 2: Number of people added to the outpatient waitlist by year.

Year 2 Activities Completed

In Year 2, key activities completed through the Strategy include:

- ✓ **Expanded Statewide Referral Services** to increase the number of clinics statewide utilising standardised referral registration.
- ✓ **Outpatient Central Services expanded call confirmations** of appointments to 90% of clinics.
- ✓ **Audited and updated contact details of approximately 2,000** patients per month on the outpatient waitlist.
- ✓ **Established an administrative staff training framework** and commenced implementation of phase one of the training program.
- ✓ **Employed 10 GPs with Specific Interest to work in Paediatrics, Mental Health, Surgery, Cardiology, Youth Health and Women's Health** clinics across the state, with a primary focus to increase the number of waitlist removals.
- ✓ **Supported advanced nursing practice clinic models** that helped to increase clinic attendances.
- ✓ **Launched the successful 'If you can't make it let someone else take it' media campaign** that has reduced Did Not Attend rates and increased the number of patients proactively cancelling appointments when they are unable to attend.
- ✓ **Implemented contemporary clinical governance models** by developing new clinic management protocols and revising existing statewide outpatient policies and protocols.
- ✓ **Extended the electronic Referral Management System** to community services.
- ✓ **Implemented Tranche 1 and 2 of Statewide Referral Criteria** within the Referral Management System to improve referral quality and provide referrers with an estimated triage category.



Year 3 Activities for Implementation

The Department of Health will progress a range of system reforms and enhancements that will drive improvements in the efficiency and quality of care for outpatient services. The strategies outlined below are either existing or new activities, that have been aligned to our strategic policy environment and will form the program of work during the next two years to help achieve the goals of the *Transforming Outpatient Services 2022–26* four-year strategy.

I. Care Delivery

ACTION	ACTION DETAILS	STATUS	MILESTONE
General practitioners with special interest (GPSI) project	Continue to implement the GPSI workforce initiative. During Year 2, 10 GPs were recruited to the program. Recruitment to a further 2 positions to support cardiac care and gastroenterology at the RHH will be finalised during Year 3.	✓ COMMENCED	June 2025
Nurse-led models of care project	Continue to implement the nurse-led workforce initiative. During Year 2, outpatient activity was increased by implementing nurse-led models of care with several specialties, including cardiology and neurology.	✓ COMMENCED	June 2025
Governance	Implement Phase 1 of revised governance systems to support Outpatient Clinics. To ensure that appropriate clinical and administrative governance systems for outpatient services are in place, in Year 3 we will continue to implement contemporary practice management models at the Launceston General Hospital and Royal Hobart Hospital.	✓ COMMENCED	Ongoing
Service Initiatives	Utilise state funding to implement outpatient service initiatives. During Year 2, funding from the 2023 State Budget was used to support key service improvement initiatives and activities to increase activity and ensure long-waiting patients receive treatment. Funding from the 2023 State Budget will continue to be utilised to support program activities during Year 3. This has already included a weekend 'Super Saturday Clinic' in July 2024 to provide services to nearly 200 people waiting for a cardiac diagnostic appointment.	✓ COMMENCED	Ongoing

2. Business Process Redesign

ACTION	ACTION DETAILS	STATUS	MILESTONE
Waitlist Management	Completed the Waitlist Digitisation Project, enabling streamlined waitlist auditing processes and notification to patients.	✓ COMPLETED	October 2023
Waitlist Management	Ensure not less than 95% of patients on the Outpatient waitlist are audited by Outpatient Central Services every 6 months. Monthly waitlist audits by Outpatient Central Services are now embedded as a standard business practice.	✓ COMMENCED	Ongoing

ACTION	ACTION DETAILS	STATUS	MILESTONE
Waitlist Management	Implement the Vacant Appointment Management Project: Stage 1 – Endocrinology and orthopaedic specialties at the RHH. Stage 2 – Planned expansion into other specialties and facilities across the state.	✓ COMMENCED	November 2024
Waitlist Management	Integrate Day One Digital (DID) with the Digital Medical Record (DMR).	✓ COMMENCED	October 2024
Electronic Appointment Management	Continue implementation of SMS appointment confirmations for clinic notifications at appropriate clinics statewide: Stage 1 – RHH Clinics Stage 2 – North & all remaining Southern Clinics In Year 2, the platform for SMS appointment notifications was successfully designed and launched.	✓ COMPLETED	June 2024
Electronic Appointment Management	Introduce SMS as the preferred method of communication for appointment notifications. Following the successful launch of the SMS appointment notification platform, appointment notification letters will be phased out during Year 3.	✓ COMMENCED	Ongoing
Electronic Appointment Management	Redirect the majority of inbound telephone appointment requests to Outpatient Central Services.	✓ COMMENCED	June 2024
Referral Management	Implement a standardised statewide referrals service within Outpatient Central Services. Key activities for Year 3 include: <ul style="list-style-type: none"> • Expand centralised registration and upload of incoming referrals to include referrals received by all four major hospitals. • Implement statewide referral criteria (SRCs) for additional specialties. 	✓ COMMENCED	Ongoing
Workforce	Stage 1 – Develop and implement the Outpatient Administrative Staff Training Framework: During Year 2, the Outpatient Administrative Staff Training Framework was endorsed by the Outpatients Transformation Steering Committee.	✓ COMPLETED	May 2024
	Stage 2 – Commence Implementation of Outpatient Administrative Staff Training program. During Year 2, statewide training officers were recruited to implement the framework. The training officers will deliver existing and new training modules to administrative staff during Year 3.	✓ COMMENCED	June 2025

3. ICT & Virtual Care Capability

ACTION	ACTION DETAILS	STATUS	MILESTONE
Digital Outpatient Management Solutions	<p>Implement Digital Outpatient Management Solutions.</p> <p>This project has concluded following the Department's decision to end its contract with the selected software vendor.</p> <p>The Digital Health Transformation Program is now considering the ongoing procurement for a statewide Electronic Medical Record (EMR) system and considering whether it will incorporate the functionalities initially envisioned for the Digital Outpatient Management software.</p>	CLOSED	N/A
eReferral Expansion and Optimisation Project	<p>The statewide eReferral platform was implemented at Tasmania's four major hospitals during Year 1 and was enhanced and expanded during Year 2.</p> <p>This included significantly increasing the number of outpatient services with access to eReferrals, to 256 services. eReferral is now the established central platform for referrals from Tasmanian GPs, with over 247,743 electronic referrals received so far.</p> <p>The eReferral platform has been further optimised by integrating internal THS referrals with the platform in August 2024.</p>	✓ COMPLETED	August 2024
Evidence-based Referral and Prioritisation Criteria	<p>Introducing evidence-based referral and prioritisation criteria into electronic solutions improves the quality of referrals and improves triage times by providing an indicative triage category.</p> <p>In Year 2, system enhancements were made to integrate evidence-based referral and prioritisation criteria in the electronic referral platform for an initial eight specialties.</p>	✓ COMPLETED	June 2024
Clinical Alerts Registration Project (CARP)	<p>During Year 2, work commenced to implement an interim clinical alerts solution that would enhance patient safety and outcomes, improve the quality and accuracy of alert information and comply with national standards.</p> <p>The solution design will be finalised during Year 3, followed by user testing and stakeholder engagement ahead of full implementation.</p>	✓ COMMENCED	December 2024
Virtual Care	<p>During Year 2, a range of activities were completed to improve the provision of health services via telehealth and virtual care modalities, with a focus on improving clinician and consumer confidence in accessing these.</p> <p>Key activities included:</p> <ul style="list-style-type: none"> • Incorporating Telehealth and Virtual Care questions into the THS Patient Satisfaction survey to guide service improvements. • Auditing existing infrastructure in District Hospitals and Community Health Centres to support consumers in accessing virtual care services closer to home. • Implementing a secure two-way video conferencing solution that is critical to service delivery. 	✓ COMPLETED	June 2024

ACTION	ACTION DETAILS	STATUS	MILESTONE
Virtual Care	<p>During Year 3, further activities will be completed to enhance how telehealth and virtual care are utilised. These include:</p> <ul style="list-style-type: none"> • Completing the Outpatient Virtual Care Framework to standardise practices, ensure consistent implementation and integration of virtual care in outpatient services, improve patient access to specialist care, and ensure the sustainability of virtual care services. • Develop new communication and promotional materials to raise awareness of virtual care services and to support consumers in accessing these. This will include user guides for patients, regular updates on the virtual care website, and public engagement activities. 	✓ COMMENCED	November 2024

4. Service Development

ACTION	ACTION DETAILS	STATUS	MILESTONE
Phase I Statewide Musculoskeletal Service	Models of care for Rheumatology and Persistent Pain Services in the North and 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.	✓ COMMENCED	Ongoing
Phase I Persistent Pain Services North/ North West	Back assessment clinic 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 musculoskeletal framework, for example a training pathway for advanced scope physiotherapy clinicians, will be scoped and drafted in Year 3.		
Phase I Rheumatology Service North/North West			
Strengthen public/ private partnership for outpatient services	<p>In Year 2, consultations between key stakeholders occurred to review existing contracts with private providers, to 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.</p> <p>In Year 3, the Department of Health will implement recommendations from the Outsourcing Framework.</p>	✓ COMPLETED	June 2024
Commence Statewide Cardiac Action Plan	<p>During Year 2, a Statewide Cardiac Strategy was developed in partnership with the Tasmanian Cardiac Network to inform the future delivery and reform of Tasmanian cardiac services.</p> <p>The strategy outlines priority action areas for reform and will address identified gaps in service delivery and enhance services across the care continuum. Following public consultation, the strategy will be implemented through annual action plans.</p>	✓ COMPLETED	June 2024
Implement Ear, Nose and Throat Service Improvements	<p>An Ear, Nose Throat (ENT) Special Working Group has provided specialist advice for ENT services in Tasmania. In Year 3, recommendations of the ENT Special Working Group will continue to be progressed through the Statewide Surgical and Perioperative Services Steering Committee, as outlined in the <i>Statewide Elective Surgery Four-Year Plan 2021–2025</i>.</p>	✓ COMMENCED	June 2025
Infrastructure Development	Detailed masterplans that outline the planned infrastructure developments at each of Tasmania's major hospitals have been developed. Investments in health infrastructure will increase the capacity of outpatient services across the state and facilitate the introduction of innovative models of care.	✓ COMMENCED	Ongoing

5. Connecting Care

ACTION	ACTION DETAILS	STATUS	MILESTONE
Communications Plan	The Outpatient Transformation Communication Plan was endorsed by the Steering Committee in March 2024. It ensures that key stakeholders are kept informed of key messages and critical milestones relating to the Outpatient Transformation Program. As part of the communications plan, a successful public communications campaign to reduce appointment non-attendance ran from January – March 2023.	✓ COMPLETED	March 2024
Communications Plan	To build on the success of the initial public communications campaign to reduce appointment non-attendance, a second campaign will run from May – October 2024.	✓ COMMENCED	October 2024
Communications Plan	Launch a redesigned Outpatient Services website to improve public access to vital information. This will include improvements to accessibility and navigation. The Outpatient Services website was integrated with the Department of Health's website in June 2024.	✓ COMPLETED	June 2024
Stakeholder Engagement	The Outpatient Transformation Program maintains a program of continuous stakeholder engagement with internal and external stakeholders. During Year 2, this included a well-received presentation at the Tasmanian Rural General Practitioners Conference in May 2024, and successful presentations at Primary Health Tasmania Digital Health Roadshows. Ongoing stakeholder engagement activities will promote Outpatient Transformation Program initiatives with clinical and nursing directors, and with the Primary care sector, including Primary Health Tasmania and GPs.	✓ COMMENCED	Ongoing

6. Monitoring and Reporting

ACTION	ACTION DETAILS	STATUS	MILESTONE
Outpatient Model of Care Projects Reporting Framework	Develop and implement a Performance and Accountability Framework for the General Practitioners with Special Interests (GPSIs) and Advanced Practice Nursing projects to enable regular reporting on progress against model of care objectives. During Year 2, a process for providing regular updates to the Outpatient Transformation Project team was established.	✓ COMMENCED	June 2025
Performance and Accountability Framework	Reviewing and improving public performance reporting for Outpatient Services is an ongoing activity to ensure the community and other stakeholders can access relevant information. This includes information released on the Department of Health website and in other reports published by the Department.	✓ COMMENCED	Ongoing
Evaluation Plan	During Year 3 options for a multi-faceted and comprehensive evaluation or 'gateway review' of the Outpatient Transformation Program will be considered. It is envisaged this evaluative work will be undertaken during Year 4 and will measure progress against the seven improvement streams.	✓ COMMENCED	Ongoing

7. Funding and Performance

ACTION	ACTION DETAILS	STATUS	MILESTONE
Local Outpatient Service Accountability Mode	A local Outpatient Service Accountability Model is being developed that will include monthly reports on waitlist and referral management, did not attend rates, clinic cancellations, and vacant appointments.	✓ COMMENCED	Ongoing
Point of Care Operational Model	Develop a Point of Care (POC) Operational Model for Tertiary led statewide services. In Year 2, a POC model for Neurosurgery was designed and is in the process of being implemented.	✓ COMMENCED	October 2024
Point of Care Operational Model	A proposed POC model for statewide Vascular services is currently being designed and will progress towards implementation during Year 3.	✓ COMMENCED	December 2024
Capacity Planning Tool	The high-level activity and funding model that was developed and improved during Year 1 and 2 will continue to be enhanced during Year 3.	✓ COMMENCED	Ongoing

