

## Welcome

Since the publication of the last newsletter each clinical network has continued to work in partnership with health services, consumers and others to progress priorities identified in their work plans.

To date over 3,850 health care professionals and consumers have contributed to this progress through participation in a diverse range of activities including:

- education sessions
- network meetings
- clinical audit
- consultation and improvement forums
- surveys
- site visits and feedback on various strategies and frameworks
- organisationally based improvement.

You will find some of these activities described in more detail in the ensuing pages.

We continue to be encouraged by the level of engagement from clinicians', consumers and others and we are already seeing gains from this. Peninsula Health was recognised for their efforts in stroke care, winning a National Stroke Foundation, Stroke Safe Award (equal first with Bankstown, NSW) for metro hospital teams. Linda Francis, the stroke network facilitator at Northern Health, received the best presenter award at the Loddon Mallee allied health conference for her presentation on the Dysphagia Screening Project which is being supported through the stroke clinical network.

We thank you for your continued support and look forward to seeing the networks continue to mature and grow in their role of encouraging evidence based practice, building sustainable models of care, providing opportunities for leadership and measuring performance.

**Lesley Thornton**  
Manager Clinical Networks

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## Cancer update

The Premier of Victoria launched *Victoria's Cancer Action Plan 2008-2011* (VCAP) in December 2008. The direction of the Victorian Cancer Clinical Network, actioned through the Integrated Cancer Services (ICS), will be driven by VCAP in the next three years. Widespread consultation with the Cancer Clinical Network occurred as part of the development of VCAP. The goal of VCAP is to increase the five-year survival from cancer from 67 per cent to 74 percent by 2015. New government funding of \$150 million over four years has been allocated across the four action areas of VCAP. These action areas build on the cancer reform work that has been undertaken by the Cancer Clinical Network in Victoria in the past five years.

The action areas of VCAP are:

- Reducing major cancer risk factors in the population and maximising effective screening.
- Ensuring rapid translation of research into effective treatments and clinical care.
- Investing in innovative treatments and technologies and sustainable integrated care systems.
- Supporting and empowering patients and their carers throughout their cancer journey.

There are targets and milestones associated with each of the action areas and the ICS will be closely involved in the delivery of a number of these. Work is currently being undertaken with the ICS to identify their roles in specific activities.

VCAP is available at <http://www.health.vic.gov.au/cancer/vcap.htm>

For further information contact Patricia McGarrity ph: 9096 2185 or by email at [patricia.mcgarritty@dhs.vic.gov.au](mailto:patricia.mcgarritty@dhs.vic.gov.au)

## Maternity and Newborn update

Diary date: July 30, Royal College of Surgeons, Melbourne

The Maternity and Newborn Clinical Network (MNCN) clinical projects are now well underway, following the perinatal audit forum held on 12th February.

Over 80 people attended the forum from health services involved in the three projects:

- induction of labour (IOL)
- admission to special care nursery (SCN)
- vaginal birth after caesarean (VBAC).

There are 35 hospitals participating in one or more of the projects, demonstrating a commitment to improvement. At the forum, clinicians' trialled audit tools developed by the Expert Clinical Advisory Groups. The tools were then further revised to incorporate this feedback prior to being distributed to participating health services in late February. It was great to see so many clinicians enthusiastically involved in activities of the forum. Evaluations from the participants were very positive.

March was perinatal audit month. **MARCH = Maternity Audit Reduces Clinical Harm.**

Health Services involved in the projects have completed and returned their Surveys of Practice which were due for return on March 25. These surveys provide information about current clinical practice within a hospital. We have also asked for existing local documentation that supports practice (e.g. policies, protocols, guidelines, memos etc) to be returned with completed surveys. The MNCN management team will analyse responses for the clinical expert advisory groups and the MNCN leadership group. **MARCH** activities are expected to lead to the development of statewide standards for IOL and admission to SCN. Implementation of the standards will be measured by re-auditing over time. The MNCN also expects to see reduced outcome variation in the Victorian Maternity Performance Indicator Report.

A forum is planned for July 30, for discussion and agreement about statewide standards of practice.

## Vaginal Birth After Caesarian (VBAC) project

Individual work plans to address VBAC will be developed with health services which will ensure hospital capability and the needs of the community are incorporated into the plan.

The Statewide Maternity & Newborn Capability Framework summary is now complete. Thank you to all who have provided feedback. A background document about the framework and its application is being written with the support of the framework advisory group. The anticipated launch of the document is the end of June 2009.

For further information contact Debbie Rogers ph: 0421 684 984 or Sue Sinni ph: 9096 2151/0147 391 239 or by email at [debbie.rogers@dhs.vic.gov.au](mailto:debbie.rogers@dhs.vic.gov.au) or [sue.sinni@dhs.vic.gov.au](mailto:sue.sinni@dhs.vic.gov.au)

## Stroke update

2009 marks the commencement of the second year for the Victorian Stroke Clinical Network (VSCN). The VSCN looks forward to the challenges and opportunities of the coming year as we seek to consolidate our achievements and build upon these foundations.



*Catherine Chibnall, Andrew Tobin and Lauren Poyner, Stroke scholarship recipients at Ballarat Health Services*

## State-wide initiatives

There are a number of projects and initiatives being progressed, including:

- local (and regional) facilitation of stroke care service improvements
- Dysphagia Screening Project
- Stroke care workforce development.

[www.health.vic.gov.au/clinicalnetworks](http://www.health.vic.gov.au/clinicalnetworks)  
Department of Human Services

## Stroke Clinical Facilitators

One of the major achievements to date is the appointment of Stroke Clinical Facilitators across the state.

The Facilitators have been reviewing stroke care services within their areas as a first step to identifying what needs to be done to improve services and support implementation of the Stroke Care Strategy. Following a gap analysis the facilitators have worked with their host health services to develop a work plan and strategies to address identified issues.

Unsurprisingly many services have identified the same gaps and priority areas for improvement.

Below is a summary of some of these typical areas of priority:

- Acute stroke intervention – Thrombolysis and Transient Ischaemic Attack (TIA) Management
- Acute Stroke Unit structure & function
- Sub Acute Care – Inpatient Rehabilitation & Community Based Rehabilitation
- Models of care, clinical pathways and protocols
- Education & Research.

**There are a number of initiatives being progressed by the VSCN relating to implementation of the Stroke Strategy.**

## Dysphagia Screening Project

Dysphagia (difficulty in swallowing) is common after stroke and is frequently associated with increased risk of complications such as aspiration pneumonia, airway obstruction, dehydration and malnutrition. Early identification is important and clinical guidelines recommend patients should be screened for dysphagia within 24 hours of admission with stroke using a validated screening tool.

The aim of the VSCN Dysphagia Screening Project is to review current practices, benchmark against national practices and collaboratively develop a model for a consistent approach to dysphagia screening across Victoria that is in line with best evidence care.

Please feel free to ask any questions by mailing Linda Francis at [Linda.Francis@dhs.vic.gov.au](mailto:Linda.Francis@dhs.vic.gov.au).

## Stroke Care Workforce Development

The VSCN is very keen to support clinicians working in stroke care, to ensure that they have access to training and education opportunities.

In 2008 the VSCN awarded 20 scholarships to support Victorian clinicians to attend the 2008 Smart Stroke Conference in Sydney. Recipients of the scholarships were surveyed post Conference. As well as gaining clinical and research knowledge, participants felt the conference stimulated ideas and enthusiasm and provided excellent opportunities for professional networking.

In February this year the VSCN awarded 14 Scholarships to Nurses and Allied Health Professionals working in stroke care - to support their post graduate studies. Scholarships ranged in value from \$2,000 to \$5,000 and all recipients were strongly supported by their employers.



*Stroke scholarship recipients Gabrielle Veliz (OT) & Sarah Kenny (Physio) at Sunshine Rehab*

For further information regarding the VSCN, contact Kathryn Whitfield ph: 9096 1297 or by email at [kathryn.whitfield@dhs.vic.gov.au](mailto:kathryn.whitfield@dhs.vic.gov.au)

## Emergency Care update

Since the last clinical network news the Emergency Care Improvement and Innovation Clinical Network (ECIICN) has undertaken a survey on 'Ambulatory Emergency Care' and 'Managing Difficult Behaviour' in order to scope further work in these areas. For more information on survey results go to our website [www.health.vic.gov.au/clinicalnetworks/emergency](http://www.health.vic.gov.au/clinicalnetworks/emergency)

### Webpage launch January 09

The ECIICN webpage was launched in January 2009 and sits within the Victorian Clinical Network website. It contains the latest news, activities and relevant publications and resources of the network. It will also be used as an active place for emergency departments to participate in network activities. To visit the emergency care webpage please go to [www.health.vic.gov.au/clinicalnetworks/emergency](http://www.health.vic.gov.au/clinicalnetworks/emergency)

### Sharing the use of evidence in emergency medicine

In March our senior medical advisor for the Emergency Care Clinical Network Professor Anne-Maree Kelly visited Bairnsdale Regional Hospital and Sale campus of the Central Gippsland Health Service to highlight evidence based care in emergency medicine in a range of clinical conditions. Anne-Maree's presentation was well received by the medical, nursing staff and GP's in attendance and they have already requested a return visit!

### Enhance the use of evidence - based care

A key area of focus for the network is using evidence based care to reduce variation in clinical practice. At the inaugural network forum in 2008, assessment of chest pain was identified as a high volume presentation to emergency department (ED) with variation in assessment processes for which ED wanted a better approach. In March the network launched a project aimed at improving management and patient experience for patients presenting to ED with chest pain.

The speakers included Associate Professor David Brieger from Sydney who is Chair of the Heart Foundation Acute Coronary Syndrome Implementation committee, Professor Richard Harper co-clinical lead of the Cardiac Clinical Network and Sue Huckson Director of Effective Practice at National Institute of Clinical Studies.

There are 25 ED's participating using a quality improvement/action research methodology. Results should be available late in 2009.



*Professor Anne-Maree Kelly and Associate Professor David Brieger at the recent Emergency Care Clinical Network forum*

For further information contact Jan Pannifex on ph: 9096 0578 or by email at [EmergencyCare.ClinicalNetwork@dhs.vic.gov.au](mailto:EmergencyCare.ClinicalNetwork@dhs.vic.gov.au)

## Renal Health update

2009 promises to be a busy year for the Renal Health Clinical Network (RHCN). The major piece of work will be the development of a Renal Health Strategic Plan (RHSP) for Victoria. Currently a background paper is being drafted and this will be used as a consultation paper when developing the RHSP.

In addition to advising on the development of the RHSP for Victoria the subcommittees have agreed to undertake the following activities.

## The dialysis subcommittee has agreed to:

- Identify gaps in state-wide data, both from a metropolitan and regional perspective.
- Develop strategies to address gaps, including identifying, or developing, a questionnaire to assess consumer needs and preferences.
- Commence a project to define clinical standards, by dialysis modality.

## The transplant subcommittee has agreed to:

- Advise on a renal transplant System review to identify barriers to live renal Tx.
- Support activities undertaken by the Australian Organ Tissue Donation and Transplantation Authority with a focus on increasing organ donation.

## The Chronic Kidney Disease (CKD) subcommittee has agreed to:

- Develop strategies to increase early identification and intervention in CKD.
- Develop a renal conservative care pathway for end stage renal disease.

We aim to provide updates on key milestones and developments on these projects in subsequent editions.

For further information contact Alice Gleeson ph: 9096 0510 or by email at [alice.gleeson@dhs.vic.gov.au](mailto:alice.gleeson@dhs.vic.gov.au)

## Clinical Service Development

In addition to establishing the networks, Clinical Service Development has continued to progress in the areas of Paediatrics and Cardiac Services.

## Paediatric update

In January this year the [Strategic Framework for Paediatric Health Services in Victoria](#) was published on the clinical networks website. The framework was distributed to all Victoria health services and an extensive list of consumer groups. The framework aims to provide a vision and guide for the development of an integrated paediatric health service in Victoria. Feedback on the framework was captured both online and in writing. Overall the response was extremely positive with around 90 percent of respondents agreeing with the framework's ten service planning principles and five service priorities.

Following on from this, Clinical Networks hosted two stakeholder forums at 50 Lonsdale Street Melbourne, on 6 and 20 February 2009. These forums provided all stakeholders with an opportunity to join in discussion on the framework and make further comments. Both forums were well attended and resulted in a further refinement of the key issues for Victoria's paediatric health services and identification of the top priorities that need to be addressed as we move forward. Key issues included equitable access to high quality care, education and training, funding, service development and expansion, transition for adolescents and developing links between all levels of service – primary, secondary and tertiary.

The Paediatric Clinical Network's next steps will be to recruit a Clinical Lead and then to set up the Paediatric Leadership Group.

For further information contact Sue Morgan ph: 9096 5227 or by email at [sue.c.morgan@dhs.vic.gov.au](mailto:sue.c.morgan@dhs.vic.gov.au)

## Vulnerable Children in Acute Health project

The role of health practitioners in the care and protection of children at risk of abuse and neglect is often not clearly understood. Health practitioners are frequently the first point of contact for vulnerable families and it is vital that practitioners have the confidence to respond appropriately and work together with child protection and family support services to meet the needs of these children.

A new interactive on line education resource will be available in the next few weeks which has been developed to assist health practitioners in understanding their role and responsibility to vulnerable children. This resource includes topics such as:

- identifying vulnerable children
- diminished parental capacity
- recording information in the patient file
- mandatory reporting requirements
- sharing information
- role of child protection and Child FIRST.

The resource "*Health Professionals Working Together to Keep Children Safe*" is an excellent, accessible education tool that should form part of the ongoing education and training for all health practitioners who care for vulnerable children or their parents. The resource will be available at [www.vfpms.org.au](http://www.vfpms.org.au) later in April 2009.

**Health Professionals Working Together To Keep Children Safe**

- ASK** Always suspect that harm may be non accidental
- LISTEN** Always respect our different roles and responsibilities
- RECORD** Always consult and seek advice
- SHARE** Protecting children is everybody's business

A web based interactive education resource is available to assist health professionals in understanding the important role they play in protecting children's health, wellbeing and safety.

[www.vfpms.org.au/childrenatrisk](http://www.vfpms.org.au/childrenatrisk)

A Victorian Government initiative

For more information about the Vulnerable Children in Acute Health Project please contact Vicki Horrigan on 9096 1333 or by email at [vicki.horrigan@dhs.vic.gov.au](mailto:vicki.horrigan@dhs.vic.gov.au)

## Cardiac update

Work on developing the Cardiac Clinical Network (CCN) is well under way.

The first phase in setting up the CCN was to invite expressions of interest (EOI) for the Cardiac Clinical Lead position.

The primary purpose of the position is to provide clinical leadership, commitment to strategic planning, advice and assist in facilitating links between health professionals and organisations from primary, secondary and tertiary care in the delivery of collaborative coordinated high quality, clinically effective, evidenced based cardiac services statewide.

There was a very good response to the EOI's. Interviews were held in December and appointments were made just before Christmas. The model that has been adopted for the Cardiac Clinical Lead is to have a dual appointment and the successful applicants are Professor Richard Harper and Dr Jeffery Lefkovits.

### Professor Richard Harper

Professor Harper current roles include:



Emeritus Director of Cardiology at Monash Medical Centre, Southern Health

Honorary position as the Professor of Medicine in the Department of Medicine, Monash University

A member of the Specialist Training Committee in Cardiology which is a committee of the RACP responsible for

accrediting the training of cardiologists in Australia.



### Dr Jeffery Lefkovits

Dr Lefkovits current roles include:

Interventional Cardiologist with the Department of Cardiology at the Royal Melbourne Hospital.

Chairman of Cardiac Services and Director of the Cardiac catheterisation Laboratory at Cabrini Hospital.

Maintaining a significant involvement with clinical research, health planning, quality assurance and clinical auditioning at Cabrini Health.

The CCN also sought EOI's for the CCN Leadership Group. Application closed 27 March 2009 and the committee will be appointed by the end of April 2009.

For further information contact Hella Parker ph: 9096 2009 or by email at [hella.parker@dhs.vic.gov.au](mailto:hella.parker@dhs.vic.gov.au)

## Future updates

This is the second in a series of information updates which we intend to produce on a quarterly basis.

The department is currently establishing an e-mailing list of clinicians and other stakeholders interested in receiving information on Clinical Networks activities. If you wish to be included on this e-mailing list please forward your details to [clinicalnetworks@dhs.vic.gov.au](mailto:clinicalnetworks@dhs.vic.gov.au) or advise your clinical network program manager.

## Accessibility

If you would like to receive this publication in an accessible format, please phone (03) 9096 1327 using the National Relay Service 13 36 77 if required, or email [clinicalnetworks@dhs.vic.gov.au](mailto:clinicalnetworks@dhs.vic.gov.au)

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