

Minutes of the Victorian Quality Council Meeting of 23 April 2007



| Agenda Item | Discussion points | Actions/ Outcomes | Person/ Group | Due Date |
|----------------------|--|---|---------------|----------|
| Present | Associate Professor Christine Kilpatrick (Chair) Dr Alan Wolff Ms Alison McMillan Dr Annie Moulden Dr Brendan Flanagan Dr Caroline Brand Ms Clare McGinness Professor Graham Burrows Mr Ian Patrick Ms Jennifer Williams Mrs Kerry Bradley Associate Professor Les Reti | Ms Liza Newby Associate Professor Marcus Kennedy Professor Mari Botti Dr Mary O'Reilly Dr Peter McDougall Mr Phong Nguyen Professor Rinaldo Bellomo Dr Sherene Devenesen Dr Simon Fraser Ms Sue Kirsra Dr Tony Weaver Ms Wendy Hubbard | | |
| In Attendance | <i>Management Group:</i> Ms Maureen Willson Mr Eddie Gibbons Ms Patricia McGarrity Mr Oliver Furness Ms Diana Quin Ms Katherine Simons Ms Mary De Gori Ms Anna Spain Mr Nikolous Armstrong | <i>Presenters:</i> Mr Stephen Owen – Manager Public Health Program, VMIA Ms Liz Cox – Risk Management Advisor, VMIA | | |
| 1 | Welcome and Apologies | | | |
| 1.1 | Apologies were received from the following members: Professor Anne-Maree Kelly Ms Maree Cuddihy Dr Christine Walker | Dr Doug Travis Ms Kathy Byrne | | |

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| 1.2 | <p>Conflict of Interest Declaration:</p> <p>Associate Professor Kilpatrick reminded members of the VQC Conflict of Interest policy and called for any declarations.</p> | No declarations were received. | | |
| 2 | <p>Minutes from previous VQC Full Council and VQC Executive Meetings</p> | | | |
| 2.1 | <p>Minutes from 19 February 2007 VQC Full Council meeting</p> <ul style="list-style-type: none"> ▪ Dr Fraser queried the use of the term "medical" on pg 11 (agenda item 9.1) and was advised that the term "medical" was used with the intention to encourage medical staff to apply for the VQC Conference Sponsorship program. | No action required. | | |
| 2.2 | <p>Minutes from 11 April 2007 VQC Executive meeting</p> <ul style="list-style-type: none"> ▪ Associate Professor Kilpatrick acknowledged the resignation of Ms Linda Sorrell, Chair of Working Group 1, from the VQC. ▪ Associate Professor Kilpatrick advised Council of discussions at the Executive meeting regarding the important role of Chief Executive Officers as members of the VQC; and that Dr Tracey Batten, CEO of Eastern Health, had been approached to join the VQC as an associate member. ▪ Dr Batten has accepted the invitation. | Update Council on the appointment of Tracey Batten. | Maureen Willson | 18 June 07 |
| 3 | <p>Matters Arising</p> | | | |
| 3.1 | <p>Accreditation Standards Discussion Papers</p> <p>Associate Professor Kilpatrick noted that the VQC response to the Australian Commission on Safety and Quality Health Care's (ACSQHC) Accreditation Standards discussion paper had been sent to the ACSQHC with CEO comments included as an addendum.</p> | No action required. | | |

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| 3.2 | <p>VQC appointment extension</p> <p>Associate Professor Kilpatrick noted that members are being invited to re-appoint until 30 June 2008 and that members wishing to be re-appointed are required to complete the papers distributed at the Full Council meeting. This is a result of the VQC Evaluation.</p> <p>The Management Group advised VQC members that any police checks conducted by the DHS within the last twelve months may be used for the re-appointment process.</p> | Ensure appointment packs are completed by next scheduled VQC Full Council meeting. | Members | 18 June 07 |
| 4 4.1 | <p>Other Business</p> <p>VMIA Presentation – Mr Stephen Owen, Manager Public Health Program and Ms Liz Cox, Risk Management Advisor, VMIA</p> <p>Associate Professor Kilpatrick informed the members that Mr Owen and Ms Cox were invited to attend a VQC Full Council meeting to discuss the work of VMIA, in particular, health-related projects.</p> <p>Following the presentation, discussion was held around possible opportunities for collaborative work between the VQC and VMIA, with Associate Professor Kilpatrick noting comments from members relating to issues of access to VMIA data and the ability for the two organisations to work together on projects rather than replicating work.</p> | Consider future collaboration with VMIA at Planning Day. | Maureen Willson | 18 June 07 |
| 5 | <p>VQC Budget Update</p> <ul style="list-style-type: none"> ▪ Associate Professor Kilpatrick advised members to note the budget report update. | Confirm roll-over of \$200,000 specifically | Maureen Willson | 18 June 07 |

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| | <ul style="list-style-type: none"> ▪ Ms Willson advised that the VQC would have unspent funds at the end of the 2006-07 financial year. ▪ Ms McMillan noted that the Quality and Safety Branch will also have unspent funds which Chris Brook, Executive Director, RRHACS, has advised will be allocated to rural health services to assist with their sustainability. ▪ Associate Professor Kilpatrick advised members that it was hoped that the funds for the Evaluation and Consumer Leadership Project will be rolled over into the 2007-08 financial year. ▪ Ms Willson noted that the budget for the VQC will remain the same for the 2007-08 financial year and there were no penalties as a result of the underspend. | for consumer leadership project. | | |
| | | | | |
| <p>6</p> <p>6.1</p> | <p>Strategic Plan 2005 – 2008 Progress Report</p> <p>Governance and Leadership Working Group (Goal 1) – Associate Professor Christine Kilpatrick</p> <p>Associate Professor Kilpatrick provided members with an update of the working group activities.</p> <p><u>Consumer Leadership:</u></p> <ul style="list-style-type: none"> ▪ The Consumer Leadership literature review and consultation reports are currently with an editor and will then be handed to a graphic designer. <p><u>Safety and Quality Education Program:</u></p> <ul style="list-style-type: none"> ▪ That the program is currently underway in two of the three sites. ▪ Western Health will commence the program on 23 April 2007 and is expected to meet current timelines. <p><u>Board Governance – Safety and Quality Responsibilities:</u></p> <ul style="list-style-type: none"> ▪ A presentation for the Board Governance Project Brief will be provided by Associate Professor Reti later in the meeting (refer agenda item 7.2). | No action required. | | |

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| 6.2 | <p>Workplace Culture Working Group (Goal 2) – Dr Annie Moulden</p> <p>Dr Moulden provided Council with an update of working group activities.</p> <p><i>Clinical Handover:</i></p> <ul style="list-style-type: none"> ▪ Dr Moulden advised that the Clinical Handover project conducted an Expression of Interest (EoI) session on Wednesday 4 April 2007. The closing date for EoI submissions is 2 May 2007. Council was advised that after feedback received at the November 2006 Clinical Handover Workshop, the project brief had been modified. ▪ Dr Moulden advised that the current Clinical Handover project brief does not meet the needs of rural health services. Council was advised that the working group will collaborate with rural health services to develop a specific needs project. ▪ Information from the 2006-08 Victorian Travelling Fellow, Karen McLean, will be considered in the development of the final Clinical Handover documents. <p><i>Introduction to Safety and Quality Principles:</i></p> <ul style="list-style-type: none"> ▪ Dr Moulden advised that the CD version of the Package will be updated and reviewed with the final changes to be sent to web designers. Copies of the CD will then be sent out to Chief Executive Officers and also uploaded onto the VQC website. It will be recommended for use by clinicians rather than non clinical staff as a result of the pilot project outcomes. <p><i>Work/Life Balance:</i></p> <ul style="list-style-type: none"> ▪ Dr Moulden advised that a literature review for the Work/Life Balance project is being undertaken and may focus on the development of two educational programs: one for employers and one for individuals. <p>Associate Professor Kilpatrick sought clarification around the future steps for the Work/Life Balance project and Dr Moulden advised that the content of the</p> | No action required. | | |

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| 6.3 | <p>education programs is yet to be determined.</p> <p>Evaluation Working Group (Goal 3) – Ms Wendy Hubbard</p> <p>Ms Hubbard provided members with an update of working group activities.</p> <p><i>Falls:</i></p> <ul style="list-style-type: none"> ▪ The National Ageing Research Institute is developing an introduction to the Falls Online Education Package and Ms McGarrity has arranged a meeting with various falls coordinators to develop case scenarios. Ms Hubbard advised that more emphasis on sub-acute scenarios is required. ▪ Ms Hubbard advised that once the scenarios and introductions are developed, a Request For Quotation, through the DHS procurement team is required to continue the development of the project. <p><i>Improvement Papers:</i></p> <ul style="list-style-type: none"> • Further work is being undertaken to complete the initial improvement paper and once this is finalised, it will be placed on the VQC website. | No action required. | | |
| 6.4 | <p>Use of Information Working Group (Goal 4) – Dr Caroline Brand</p> <p>Dr Brand provided Council with an update of working group activities.</p> <p><i>Measurement for Improvement Toolkit:</i></p> <ul style="list-style-type: none"> ▪ The Australian Commission on Safety and Quality in Healthcare has edited the Improvement Toolkit and they are now waiting for resource availability. <p>Dr Brand also advised Council that the VQC was approached by the Cancer Services Agency to undertake a session about data at a two-day workshop they were arranging. Dr Brand noted the following:</p> <ul style="list-style-type: none"> ▪ The general feedback was positive and there is consideration for further follow | No action required. | | |

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| | <p>up.</p> <ul style="list-style-type: none"> ▪ Dr Brand observed that the issue doesn't lie with the data itself, but knowing where to start. ▪ Dr Brand concluded that the running of workshops in the future requires some development (1-3 days worth of preparation). <p>Dr Brand advised that there was a large gap identified in understanding the areas of implementation and development for workshop courses.</p> <p>Ms McMillan noted that there is large demand for data and information on what to measure and how to measure it.</p> | | | |
| 6.5 | <p>Application of Evidence Working Group (Goal 5) – Professor Rinaldo Bellomo</p> <p>Professor Bellomo provided Council with an update of working group activities.</p> <p><u>Acute Pain Management Measurement Toolkit:</u></p> <ul style="list-style-type: none"> ▪ The Acute Pain Management Measurement Toolkit evaluation methodology has been finalised and a series of education sessions are scheduled throughout May, Victoria. Professor Bellomo advised members that there has been considerable discussion about the involvement of private hospitals. <p><u>Mental Health – Creating Safety Project:</u></p> <ul style="list-style-type: none"> ▪ Professor Bellomo advised that the Creating Safety project Steering Group and Reference Group have met, and that the website is in the process of being developed. Professor Bellomo also advised that the literature review and methodology have been finalised. Workshops have been held to assist with the training and development section to draft an appropriate curriculum. Professor Bellomo advised Council that the EoI has gone out to the sector with a closing date of 11 May 2007. | <p><i>Creating Safety – amend Terms of Reference, so that "restraint" is removed as appropriate.</i></p> | <p>Working Group 5</p> | <p>18 June 07</p> |

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| 6.6 | <p>Ms Newby enquired about the use of the term 'restraint' used in the Creating Safety minutes. Ms Williams responded, stating that the project is focussed on seclusion not restraint. The project had adjusted its focus since the project was originally approved.</p> <p><u>NICS VTE Project:</u></p> <ul style="list-style-type: none"> ▪ Professor Bellomo informed Council that additional funding for the VTE project had been confirmed until June 2007 on the condition that the VQC performs site visits and that health services participate in a NICS workshop in May. <p>Dr Weaver enquired as to who will be doing the site visits and was informed that Mr Gibbons would be undertaking them. Professor Bellomo stated that data regarding site progress and possible future steps will be collected and presented at the NICS workshop in May. This data will then be used as a basis for a new project brief.</p> <p>Associate Professor Kilpatrick noted that the VTE project is a high-risk area that has highly technical solutions and that a lot of hospitals are waiting for the rollout of the project.</p> <p>Ms McMillan noted that the commencement of HealthSmart will ultimately link laboratory systems with internal clinical systems, leading to a rollout across the state. This is projected to occur in 2010.</p> <p>Reducing Harm Working Group (Goal 6) – Dr Mary O'Reilly</p> <p>Dr O'Reilly provided members with an update of working group activities.</p> <p><u>Pressure Ulcer Basics:</u></p> <ul style="list-style-type: none"> ▪ Dr O'Reilly advised that Pressure Ulcer Basics will be discussed in agenda item 7.3. | <p>NICS VTE – site visits to be booked and completed.</p> | <p>Working Group 5</p> | <p>11 May 07</p> |

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| | <p><u>Improve Equipment Safety:</u></p> <ul style="list-style-type: none"> ▪ Dr O'Reilly advised members that a project involving needle-risk would not be investigated by Working Group 6, due to limitations in time and budget. <p>Dr Flanagan enquired whether there is scope for looking at equipment in general as a broader issue. Associate Professor Kilpatrick noted that this project could be discussed on the Planning Day held on 18 June 2007.</p> | | | 18 June 07 |
| 6.6.1 | <p>Hand Hygiene Project – Dr Mary O'Reilly</p> <ul style="list-style-type: none"> ▪ Dr O'Reilly informed members that the Hand Hygiene Project is close to completion with the stage 1 data collection completed in March 2007. The stage 2 data collection will conclude in April/May 2007. ▪ A Hand Hygiene Forum was held on 2 March 2007 looking at how to sustain hand hygiene practices within health services and a report with the forum's outcomes has been included in the agenda papers. ▪ Dr O'Reilly advised that the working group would now develop an organisational sustainability readiness checklist, as well as other tools for the sector. | | | |
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| 7 7.1 | <p>Strategic Plan 2005 – 2008 Project Presentation for Approval</p> <p>Consumer Leadership Project</p> <p>Ms Newby presented a project proposal for the Consumer Leadership Project.</p> <p>Ms Newby advised members that there are two phases:</p> <p>Phase 1: Literature Review (<i>completed</i>)</p> <p>Phase 2: Develop, pilot and evaluate a Leadership Development Programme</p> <ul style="list-style-type: none"> ▪ This phase will be for twenty emergent consumer leaders who are currently | <p>Project Approved.</p> <p>Working Group to develop the evaluation further and ensure the project brief has a</p> | Working Group 1 | 18 June 07 |

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| | <p>involved in quality improvement within health services.</p> <ul style="list-style-type: none"> ▪ Participants will need to meet key selection criteria outlined in the project brief. ▪ The Governance Steering Group will oversee the development of educational content and evaluation however an independent panel will assess applications. <p>Associate Professor Kilpatrick noted comments regarding the key selection criteria, particularly in relation to “well developed communication skills” and what this implied.</p> <p>Dr Devenesen commented that the programme could be coupled with education for health services; therefore validating what success may be achieved. Ms Newby advised that initial discussions would involve co-development with senior and middle management, however the project is primarily looking at improvements of the individuals. Ms Newby advised that given the constraints in time before June 2008 it was necessary to remove the health service component.</p> <p>Dr Brand commented that the brief may not contain sufficient detail to outline an appropriate budget. Ms Newby reiterated the constraints of time and noted a comment from Ms Simons, that more time would make a significant difference to the development of the project.</p> <p>Ms Kirsa enquired about requests for project submissions from DHS regarding consumer participation and whether this could be aligned with the Consumer Leadership project. Ms McMillan stated that the DHS funding would be used to develop evidence awareness, separate to this project.</p> <p>Dr Moulden noted that in paediatrics, especially in the US, there is a large amount of evidence to support this kind of approach. Dr Moulden also noted that it was important to be mindful of people nominating themselves and their ability to speak with a broad voice. Dr Burrows agreed with Dr Moulden’s comments.</p> | <p>clear purpose. i.e. consumer leadership or support or participation.</p> | | |

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| 7.2 | <p>Board Governance Project</p> <p>Associate Professor Reti presented a project proposal for the Board Governance – Safety and Quality Responsibilities Project.</p> <p>Associate Professor Reti discussed the practical strategies and resources to support Boards in implementing effective clinical governance. The project reference group is multi-disciplinary and has developed the project brief. There are three parts:</p> <ul style="list-style-type: none"> ▪ Part A: a statewide consultation surveying all health services and an in-depth consultation with a sample of services. ▪ Part B: a literature review of effective clinical governance implementation strategies. ▪ Part C: the Clinical Governance Improvement Kit, which will be a practical case-based tool. <p>Professor Burrows commented on whether Part A and Part B may be more effective, if reversed. Associate Professor Kilpatrick noted that Part A and Part B would proceed simultaneously.</p> <p>Ms Williams noted that the project brief was not clear in its references to 'the Board' or the health service 'executive'. The Terms of Reference do not clearly outline that the project is looking at the functioning of health service boards. Associate Professor Reti stated that the project is explicitly about Board activities, as they have sought guidance from the VQC on this matter, with particular emphasis on the VQC Safety and Quality Framework.</p> | <p>Project Approved.</p> <p>Working Groups are to ensure the project brief clearly states that Parts 1 & 2 will run simultaneously.</p> <p>Project brief is to be clear about working with health service 'Boards' and not health service executives.</p> | Working Groups 1 & 4 | 18 June 07 |
| 7.3 | <p>Pressure Ulcer Basics Project</p> <p>Dr O'Reilly presented a project proposal for the Pressure Ulcer Basics project.</p> <p>Dr O'Reilly advised members that the project sought to identify gaps in pressure</p> | Project Approved. | | |

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| | <p>ulcer risk assessment and management within Victorian public sector residential aged care services. The project aims to develop an online pressure ulcer education program aimed at health care workers who do not have clinical qualifications, but spend a majority of time with residents. Dr O'Reilly advised that the expected outcomes are:</p> <ul style="list-style-type: none"> ▪ Identification of gaps ▪ Determination of education priorities ▪ Development and implementation <p>Dr Brand enquired about possible timeline restrictions. Dr O'Reilly informed members that with the involvement of the aged care sector and from past experience it is expected that the timeline was achievable.</p> <p>Ms Newby referred to page seven of the project brief, which related to risk management. It was noted that staff with English as a second language are considered a high risk. It was discussed whether it would be viable to use some VQC funds towards non-English based materials. Dr O'Reilly advised that while the Working Group had considered this, it decided to pilot the project in English initially.</p> <p>Ms McGinness expressed concern that there wasn't any form of reporting or registration. Dr O'Reilly noted that the package could be used in a local credentialing perspective; however this was not included within the scope of the project.</p> <p>Dr O'Reilly advised that the project needed to be pitched at the right level, in terms of audience and Associate Professor Kilpatrick acknowledged that simple language and pictures could be beneficial.</p> <p>Mrs Bradley noted that the project has omitted registered nurses who would not have taken part in the original Pressure Ulcer Basics package. Dr O'Reilly informed</p> | | | |

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| | members that the Working Group had taken this into consideration, with the possibility of re-launching the current Pressure Ulcer Basics package alongside the new package for the other care residential aged care staff. | | | |
| 7.4 | <p>Project Approval Process</p> <p><u>Working Group 1</u>: Consumer Leadership Project</p> <ul style="list-style-type: none"> ▪ VQC Full Council approved funding of \$280,000 (refer to agenda item 7.1 for actions). <p><u>Working Group 1 & 4</u>: Board Governance – Safety and Quality Responsibilities Project</p> <ul style="list-style-type: none"> ▪ VQC Full Council approved funding of \$121,900 (refer to agenda item 7.2 for actions). <p><u>Working Group 6</u>: Pressure Ulcer Basics Project</p> <ul style="list-style-type: none"> ▪ VQC Full Council approved funding of \$97,750. | | | |
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| 8 | <p>Report from DHS: Ms Alison McMillan</p> <p>Ms McMillan provided the members with an update on the current activities of the Quality and Safety Branch. In particular, the following is currently occurring:</p> <ul style="list-style-type: none"> ▪ IIMS - functional work is being completed and the full data set should be completed by the end of June 2007. ▪ Credentialing and Scope of practice - is currently working state-wide. ▪ BEST – is currently implementing the Serious Transfusion Incidents Reporting System (STIRP) for serious adverse events with the transfusion of blood or blood components. ▪ The Healthcare Awards – the 2007 awards opened on 23 April 2007. | | | |

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| 8.1 | <p>Safer Systems Saving Lives presentation – Ms Alison McMillan</p> <p>Ms McMillan presented the members with learnings from the Safer Systems Saving Lives (SSSL) project, which was based on the work of the Institute of Healthcare Improvements' 100K Lives Program in the United States. Lessons learned included:</p> <ul style="list-style-type: none"> ▪ Due to major contracting difficulties, South Australia and the ACT had to pull out of the project. ▪ Ms McMillan noted the amount of significant effort required to undertake a nation-wide project. ▪ It is not possible to directly adopt American material into Australian health care systems due to differences in care delivery and the client base. ▪ It is not possible to take "short-cuts" with collaborative methodology since it is important to bring shared learnings together which is difficult over national geographical areas. ▪ The outcome measures of care are useful tools. ▪ There is greater drive to reduce the variation in care. | | | |
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| 9 | <p>VQC Manager's Report: Ms Maureen Willson</p> | | | |
| 9.1 | <p>VQC Evaluation update</p> <p>Ms Willson informed members that there was a preferred provider for the VQC Evaluation and that their references have been checked. It is anticipated that the Evaluation will commence in May 2007 as expected.</p> | Advise members of preferred provider once confirmed. | Maureen Willson | 21 May 07 |
| 9.2 | <p>VQC Full Council Planning Session 18 June 2007</p> <p>Associate Professor Kilpatrick noted that there will be some normal VQC Council activities, but the rest of the day will be concerned with planning for the 2007-2008 financial year.</p> | | | |

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| 10 | New Business | | | |
| 10.1 | <p>Medical Consultative Council Proposal</p> <p>Ms McMillan sought comments from members regarding the creation of a Medical Consultative Council. Ms McMillan noted that the name of the Consultative Council was still being considered in the efforts to fully reflect the aims of the council.</p> <p>Dr Weaver suggested the term “physician” in the place of “medical” since it is independent from surgical, anaesthetic and similar terms especially as there is a college of physicians.</p> <p>Ms McMillan advised members who had suggestions about the title of the council could contact her.</p> <p>Associate Professor Kilpatrick noted that supported the proposal for the ‘Medical’ Consultative Council.</p> | <p>Council supported the proposal for a ‘Medical’ Consultative Council.</p> | | |
| 10.2 | <p>Private Hospitals: Should VQC include them in its work?</p> <p>Associate Professor Kilpatrick advised members that the VQC Executive had recommended that private hospitals be invited to take part in VQC activities and projects but that funding would not be included.</p> <p>Members discussed costs relating to the creation and distribution of VQC toolkits and publications, and considered situations where charges to recover certain costs may apply.</p> <p>Associate Professor Reti noted that the VQC could benefit from the presence of a private healthcare representative. Associate Professor Kilpatrick stated that this</p> | <p>Council supported the proposal to invite private hospitals to contribute to future VQC projects.</p> | | |

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| <p>10.3</p> | <p>could be considered as part of the VQC Evaluation.</p> <p>Sustainability Working Group Report – Dr Mary O’Reilly</p> <p>Associate Professor Kilpatrick advised Council that the VQC Executive had approved the undertaking of a sustainability workshop in October 2007.</p> <p>Dr O’Reilly stated that the Sustainability Working Group was short-term in nature and consisted of herself as Chair, Ms Kirsa, Ms McMillan, Dr Brand and Ms Willson.</p> <p>The purpose of the Working Group is to look at sustainability across VQC projects currently and its application in the future. This will involve contracting a literature review by an external expert and the VQC Executive has recommended that generic guidelines for sustainability be developed for the health sector as well as the VQC. This will then be presented at the Sustainability Forum in October 2007.</p> | | | |
| <p>10.4</p> | <p>NICS/VQC Fellowship</p> <p>Associate Professor Kilpatrick noted that the VQC has been associated with NICS in a Fellowship program since the VQC’s first term. The objective was for one person to undertake a quality project, demonstrating sustainability for now and in the future.</p> <p>Associate Professor Kilpatrick noted that NICS is now part of the National Health and Medical Research Council and that identifying appropriate people and getting feedback relating to common projects had been problematic. Associate Professor Kilpatrick also acknowledged that there had been inadequate recognition of VQC’s involvement in the fellowship.</p> <p>Associate Professor Kilpatrick stated that the VQC Executive had recommended that the VQC did not renew the contract with NICS at the end of the current fellowship. Members discussed whether the research directly aligned with VQC</p> | <p>NICS to be advised that the contract would not be renewed beyond the current fellowship period.</p> | <p>Maureen Willson</p> | <p>18 June 07</p> |

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| 10.5 | <p>projects. Although consideration was given to the possibility of VQC developing its own fellowship program, Associate Professor Kilpatrick acknowledged that the current VQC could not commit to long term programs beyond 30 June 2008.</p> <p>The VQC approved the decision not to extend the NICS/VQC Fellowship beyond the current contract.</p> <p>Changes to VQC Management Group</p> <p>Ms Willson advised members that due to the resignation of Mr Gibbons from the VQC Management Group, Mr Furness will be undertaking the projects within the <i>Use of Information Working Group</i> and the <i>Application of Evidence Working Group</i>.</p> <p>Ms Simons will continue working with the <i>Leadership and Governance Working Group</i></p> <p>Ms Willson stated that at the VQC Planning Day on 18 June 2007, the capacity of the Management Group would be discussed.</p> | Discuss Management Group capacity. | Management Group | 18 June 07 |
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| 11 | Articles of Interest | No action required. | | |
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| 12 | <p>Next Meeting</p> <p><i>VQC Planning Day</i> Date: Monday 18 June 2007 Time: 1:00-5:00pm Venue: 1.01 & 1.02, Level 1/50 Lonsdale Street, Melbourne</p> | | | |