

Sowing and reaping responsive change in hospital processes:

Making the patient journey easier for farming families

Panel Presenters:

Ms Dorothy McLaren, PhD candidate, RMIT Hamilton

Ms Rebecca Morton, Co-ordinator, Community Transport, WDHS

Ms Gillian Jenkins, Quality Manager, WDHS

Ms Bronwyn Roberts, Deputy Director of Nursing, WDHS

Ms Katherine Boyd, Clinical Nurse Specialist, WDHS

Dr James Muir, Director of Anaesthetics, WDHS

Hamilton Charter for Farmer Health

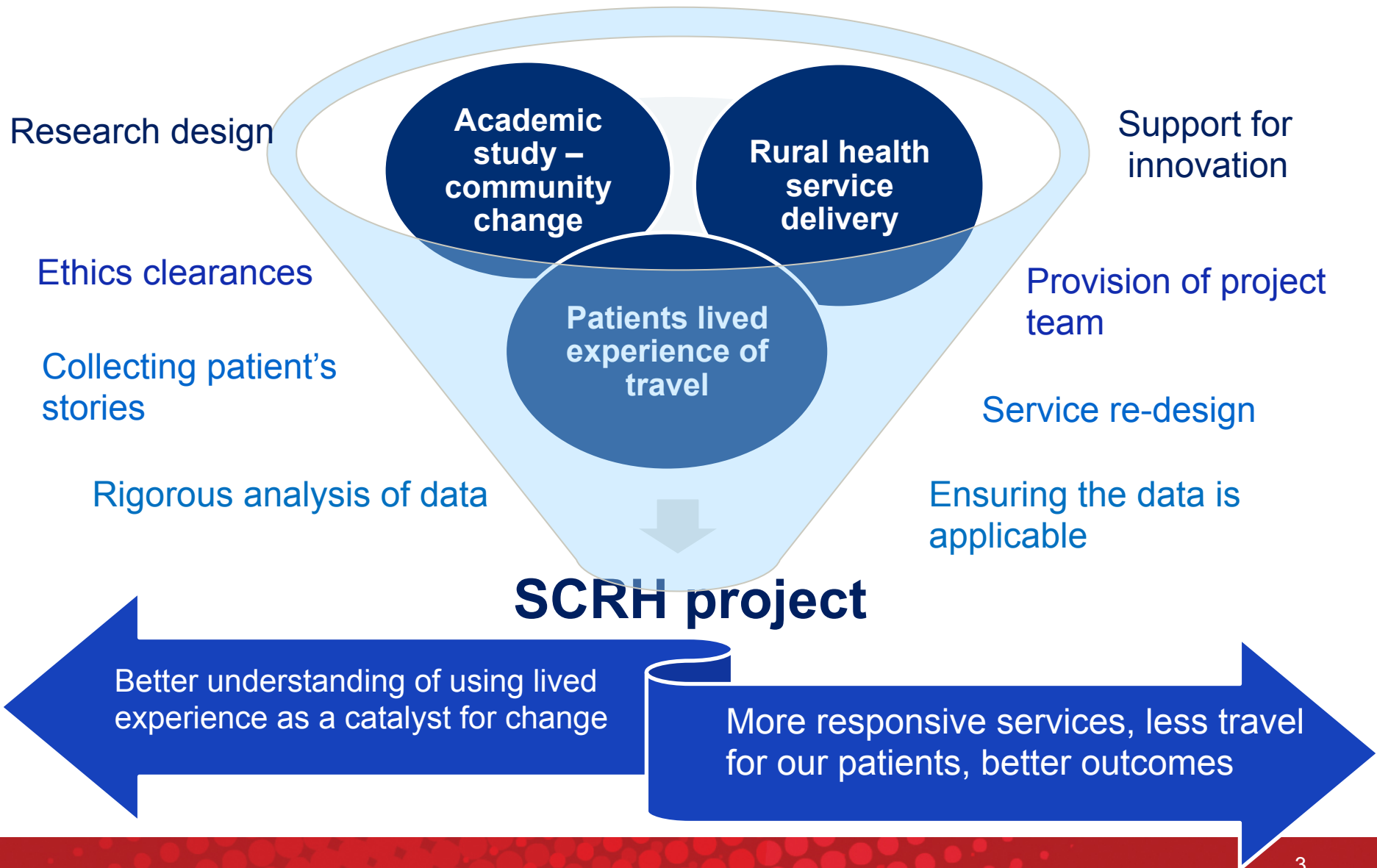
Two years ago, the Hamilton Charter for Farmer Health 2010 encouraged attendees to:

Recognise that improving farmer health involves new relationships and the strengthening of old **relationships across sectors and within sectors.**

(Hamilton Charter for Farmer Health 2010, p 6)

The SCRH project is founded on these principles.

The Socio-economic Cost of Rural Health Project



Community

Transport – more than petrol and buses

Counting the costs.... Too hard?

For this project:

- **Strong support** from every level
- Potential to **make a difference**
- **New insights** from shared views

Community & academic context, con't

Academic

Applied social science & the RMIT University Regional and Rural Futures Research Group

Unique opportunity– geography, demography, partnerships and timing

`Extension' services for social science

My interest in the SCRH project is:

Getting my degree while supporting effective change

Taking rural transport out of the `too hard' basket.

(see also paper from previous concurrent session - *On the road again: Identifying and reducing the socio-economic cost of travelling for health care*)

Transport

Becky Morton

Coordinator, South West Community Transport Program

My role includes:

Not direct transport provision but assisting people to access existing services

Looks transport in a strategic way to try to connect communities to services

Operates across south west Victoria

Advocacy for transport needs of the region

My interest in the SCRH project is:

Regular contact with people having to travel for healthcare but often have no idea how to get there and are overwhelmed by the prospect

Have seen cases where people will chose to cancel their appointment because too hard to get there or do not have financial resources

Have recently produced the Medical Travel Guide to help people travelling for healthcare

Would like to get a better understanding of costs beyond transport that affect decision making

Transport, con't

I think this research is necessary because:

To document and understand all the issues that impact on people when they have to travel long distances for healthcare

Builds evidence of the barriers/difficulties rural people have to overcome to maintain their health

I think the SCRH project will affect my practice/role in the following ways:

Understanding the barriers will help me present information in a way that addresses issues.

I am involved in this project because:

Transport is an enabler, poor access to transport impacts on many aspects of our lives.

My role includes:

- Accreditation requirements & reporting
- Strategic level planning, focussing on person-centred care & consumer engagement
- Quality and risk management
- Management of consumer feedback

My interest in the SCRH project is:

- Progressive action in person-centred planning
- WDHS supports research where it can...
- QM deals with patients' complaints and compliments, so have an interest in making our services as responsive as possible

Person-centred planning and policy, con't

I think this research is necessary because:

- A large proportion of our surgical patients travel significant distances to be here
- This could provide a template for person-centred planning and change

I think the SCRH project will affect my practice/role in the following ways:

- It will provide background data to help us plan for services that address the needs of rural patients
- It will be a significant new initiative that we can report against and learn from with regard to consumer involvement in health services and person-centred planning

I am involved in this project because:

- Being responsive to consumer feedback is a significant component of the work of a Quality and Risk Manager, and this will be enhanced by the effect of the new National Standards

My role includes:

- Review of service delivery to meet community needs
- Quality improvement and risk management
- Best practice person centred-care provision

My interest in the SCRH project is:

- To improve service delivery by awareness of travel constraints
- To include an understanding of travelling constraints for consumers in planning for discharge times
- To be mindful of the potential for service redesign
- Utilisation of new technologies or practices (such as tele-health)

Policy into practice, con't

I think this research is necessary because:

- To understand issues that impact on service delivery when consumers have to travel long distances for healthcare
- Builds evidence of how the health service may overcome barriers/difficulties rural people have to overcome to maintain their health

I think the SCRH project will affect my practice/role in the following ways:

- Understanding the barriers will help me address service provision

I am involved in this project because:

- Transport is a significant cause of service disruption for the organisation and the lives of consumers.
- It will be part of my role to encompass the balance of what can and can't be changed following the project.

Making it work...

Kas Boyd
Clinical Nurse Specialist

My role includes:

Preparing our patients for elective surgery. This includes diagnostic procedures, physical assessment, acquiring medical history, etc. First point of contact with the hospital

Helping patients to understand how to prepare for their surgery, their hospitalisation and their discharge planning – giving them some insight into how it will be.

Being the first substantial contact with the hospital - we answer questions about what to expect and provide reassurance where necessary, all in a relaxed setting.

All of this ensures an efficient, and safe, admission process and patients who are well prepared, physically and emotionally, for their surgical experience

My interest in the SCRH project is:

Peri-operative assessment is a crucial part of the surgical process. If we can reduce travel while still providing a safe and efficient service, but tailored to the needs of our rural patients, this will be a good outcome.

Making it work... con't

I think this research is necessary because:

It will help to develop, and action, a process that is acceptable and sustainable so that those remotely located will have other options for being prepared safely and appropriately for their surgery. It may also identify more, or different, information that can be provided to them.

I think the SCRH project will affect my practice/role in the following ways:

It will build the clinicians' confidence in the effectiveness of remote consultations.

It will identify both the limitations of possible changes to services and those patients that would still need to be excluded from the expanded options that we hope will be offered.

It will identify where there are gaps in the practical advice we can provide.

I am involved in this project because:

I am presently fulfilling the role on a face-to-face or phone basis and will be the natural provider for the practical changes that we envisage for the future.

Why do this here and now?

James Muir

Director of Anaesthetics

My role includes:

As a provider at the end of the system, I get a subjective impression of the difficulties (including travel) that people face as they move through the system

My interest in the SCRH project is:

As an instigator

- recognising the issue and pushing for objective evidence to drive systemic change in this organisation and potentially in other centres
- recognising that there was an opportunity to link WDHS with RMIT in a co-operative research project

As a practitioner:

- Questioning the accessibility and convenience of the current service for users
- Want quantitative and qualitative evidence to categorise the issues that will promote change while continuing to provide a safe, high-quality, effective and accessible peri-operative service

Why do this here and now? con't

I think this research is necessary because:

WDHS 'encourages' research but in reality there is insufficient research experience and resources in-house in a rural public hospital. There is no dedicated funding or direct capacity available for research in this organisation.

We have a university system right next door that can provide expertise in applied social science and a link between academic and practitioner understanding in a rural setting. We can, and do, partner in funding applications to progress and support this relationship.

I think the SCRH project will affect my practice/role in the following ways:

I think we will change the way we meet and interact with a significant number of people in the peri-operative process – whether that is telephone, video or face to face. We will be able to offer more options and effective information.

I am involved in this project because:

I think it will improve the quality and convenience of the care delivered to my patients.

open for business... the WDHS perspective



Key messages

Lived experience matters.

Consumer feedback is vital

Services should be aware of the potential for change

Research can support effective service change

Addressing **rural health inequity** is a motivating force for the project.

**Don't be afraid to speak up...
stoicism will make it worse!**

For more information...

Please feel free to contact the panel members:

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