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# Quality Action Plan

## Asian Health Support Services 2011/2013

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### Asian Health Support Services

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**Purpose** This document outlines the Quality priorities and objectives for Asian Health Support Services for the period 2011-2013.

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**Scope** The Service Manager of [Asian Health Support Services] is responsible for developing or reviewing the service-specific Quality Action Plan annually. Progress against this will be monitored by the Group Manager through a quarterly progress report at Hospital Operations Management meetings.

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**Contents** This document contains the following topics

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**Associated documents** The table below identifies associated documents.

Type	Title/Description
WDHB	WDHB Quality Strategy Plan Asian Health Support Services Access
Local	Hospital Operations Quality Action Plan

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# Quality Action Plan – Asian Health Support Services 2011/2013

## Quality Action Plan

Objective	Action	Responsibility	Timeline
<b>1. Consumer Focus</b>			
Complaints are managed in a timely and customer focused manner.  Complaints will be used to identify risks and quality improvement strategies.	Complaints to be investigated and responded to within 30 Calendar days of their receipt. <ul style="list-style-type: none"> <li>Forward each complaint to Complaints Coordinator who enters complaints into Feedback Monitor system and copy's to Quality Management Lead (QML)</li> <li>Review each complaint received to determine whether they are process or staff issues</li> <li>Process complaints as per steps outlined in the Complaints Investigation Process</li> <li>Review results on a quarterly basis to determine common trends and service improvement</li> <li>Formulate Corrective Action Plan, if applicable and forward plan to QML.</li> </ul>	Team Leaders (all)	Ongoing  Ongoing  Ongoing  Quarterly
Compliments	<ul style="list-style-type: none"> <li>Record compliments received in compliment register</li> <li>Forward to QML by 25<sup>th</sup> of each month.</li> </ul>	Team Leaders (all)	Monthly
<b>WATIS Interpreting Service</b> Feedback to be obtained for all client-related services.  Feedback to be used to monitor the performance of contractors as well as service improvement.	<ul style="list-style-type: none"> <li>Collate feedback provided on contractors invoice sheets and enter feedback into WATIS system</li> <li>Send patient feedback forms randomly to at least 10% of actual bookings on a weekly basis. Collate and enter responses into WATIS system</li> <li>Review feedback on contractors and patient responses on a quarterly basis to determine common trends and identify service improvement opportunities.</li> <li>Formulate Corrective Action Plan if applicable and forward copy of plan to QML</li> </ul>	Team Leader WATIS   Team Leader WATIS	Ongoing  Ongoing  Quarterly

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Objective	Action	Responsibility	Timeline
<p><b>Asian Mental Health Service</b> Feedback to be obtained for all client support services.</p> <p>Feedback to be used to monitor the performance of services and for service improvement.</p>	<ul style="list-style-type: none"> <li>Give feedback forms to clients before discharged. Collate responses into a spreadsheet.</li> <li>Review feedback on a quarterly basis to determine common trends and identify service improvement opportunities.</li> <li>Formulate Corrective Action Plan if applicable and forward copy of plan to QML.</li> </ul>	Team Leader Asian Mental Health	Ongoing  Quarterly
<p><b>Asian Patient Support Service</b> Feedback to be obtained for all client support services.</p> <p>Feedback to be used to monitor the performance of services and for service improvement.</p>	<ul style="list-style-type: none"> <li>Give feedback forms to clients before discharged. Collate and enter responses into a spreadsheet.</li> <li>Review feedback on a quarterly basis to determine common trends and service improvement opportunities.</li> <li>Formulate Corrective Action Plan if applicable and forward copy of plan to QML.</li> </ul>	Team Leader Asian Health	Ongoing  Quarterly
<p><b>CALD Cultural Competency Courses</b></p>	<ul style="list-style-type: none"> <li>Provide "Immediate Impressions of Learning Experience" forms to face to face and online learners</li> <li>Enter responses into database</li> <li>Review feedback on a quarterly basis to determine common trends and course improvement opportunities</li> <li>Formulate Corrective Action Plan if applicable and forward copy of plan to QML</li> </ul>	Service Manager Asian Health	Ongoing  Quarterly
<p>Ensure that all information intended for the public is kept up-to-date</p>	<ul style="list-style-type: none"> <li>Review information developed and translated by Asian Health on an annual basis and update as required</li> <li>Update information sourced from other services or agencies when new information is received</li> </ul>	Team Leaders (all)	Annually

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Ensure that contractors (interpreters/ bureau social support staff) understand and comply with the Privacy Act 1993 and Health Information Privacy Code 1994.	<ul style="list-style-type: none"> <li>• Provide copies of the Privacy Act and Health Information Privacy Code to all contractors</li> <li>• Ensure contractors signed the form to confirm they have received and read the document</li> <li>• Ensure all contractors can access the Privacy Act workshop from WDHB L&amp; D</li> <li>• Ensure all contractors signed the confidential agreement</li> <li>• Copy of sign off list to the QML to file as evidence.</li> </ul>	Team Leaders WATIS Asian Mental health	Ongoing
<b>2. Compliance with Industry Standards</b>			
N/A	•		
<b>3. Safety &amp; Risk Management</b>			
<p>Ensure that staff and contractors (interpreters, social support staff) obtain appropriate Health &amp; Safety training.</p> <ul style="list-style-type: none"> <li>• Fire Safety training for staff and other contractors</li> <li>• H&amp; S representative training</li> <li>• Managers trained in Risky Business</li> <li>• E Learning H&amp;S update training</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure staff and contractors receive Fire Safety training on an annual basis</li> <li>• Ensure all staff understand the Complaint Investigation Process</li> <li>• Ensure all staff received Incident Reporting System training</li> <li>• Review all incidents on monthly basis and set up Corrective Action Plan</li> </ul> <p>Ensure Hazard register and management plan are kept current Ensure H&amp;S Representatives have current H&amp;S rep training</p> <p>Ensure managers attend Risky Business Training 2 yearly</p> <p>Ensure all staff receive annual e-learning H&amp;S update training</p>	<p>Team Leaders (all)</p> <p>Team Leaders (all)</p> <p>H&amp;S Rep &amp; Manager</p> <p>Managers</p> <p>All staff</p>	<p>Ongoing &amp; Annually</p> <p>Monthly</p> <p>Ongoing /6 monthly reporting</p> <p>2 yearly As required</p> <p>Annually</p>
Comply with the HOPS H&S Divisional Plan	<p>Communicate the HOPS H&amp;S Divisional Plan to all departments to ensure compliance Ensure the plan is reviewed annually</p> <p>Ensure sign off sheets are saved in the G drive Hopsital Ops Quality folder or forwarded to the QML.</p>	HOPS H&S Manager	Annually

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Objective	Action	Responsibility	Timeline
<b>4. Best Practice</b>			
Continually improve service procedures to ensure best practice	<ul style="list-style-type: none"> <li>Review service procedures on an annual basis to ensure best practice</li> </ul>	Team Leaders (all)	Annually
Ensure that documentation for all policies and procedures are relevant and kept up-to-date	<ul style="list-style-type: none"> <li>Update documentation within 2 months of a major procedural change</li> <li>Review documentation for all policies and documentation on an annual basis and update as required</li> </ul>	Team Leaders (all) Team Leaders (a))	Ongoing  Annually

## Quality Action Plan – Asian Health Support Services 2011/2013

### Quality Indicators

Indicator (KPI)	Rationale	Goal/Target	Data Source	Reporting Frequency	Responsibility
<b>WATIS Interpreting Service</b>					
% of DNAs for WDHB bookings (patient management)	Measuring DNA rate to understand service efficiency	7-9% DNA rate for WDHB bookings	AHSS Database	Monthly	Team Leader WATIS/Admin
% of bookings unfulfilled (workforce)	Measuring unavailability of interpreters and fulfilling WDHB service needs	<3% of bookings to be unfulfilled	AHSS Database	Monthly	Team Leader WATIS/Admin
# of interpreting bookings determined “Not Required” (policy)	Measures the efficiency of Appointment Confirmation process	2-3% of bookings	AHSS Database	Monthly	Team Leader WATIS/Admin
% savings for interpreting bookings (average) (financial)	Measures the efficiency of rostering system to reduce call out costs	5% compared to standard WDHB average costs	AHSS Database	Monthly	Team Leader WATIS/Admin
# Complaints <ul style="list-style-type: none"> <li>WATIS service</li> <li>Contractors (interpreters)</li> </ul>	A low number of complaints will indicate good performances from our service and contractors.	<5 per month	<ul style="list-style-type: none"> <li>Verbal or written complaints received</li> <li>Feedback from staff, services or patients</li> </ul>	Quarterly	Team Leader WATIS/Admin

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Issued by: Asian Health

Authorised by: GM

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<b>Asian Patient Support Service</b>					
# complaints <ul style="list-style-type: none"> <li>• Asian support service</li> <li>• Staff</li> </ul>	A low number of complaints will indicate good performances from our service and contractors.	<5 per month	<ul style="list-style-type: none"> <li>• Verbal or written complaints received</li> <li>• Feedback from staff, services or patients</li> </ul>	Quarterly	Team Leader Asian Patient Support Service
<b>Asian Mental Health Service</b>					
# complaints <ul style="list-style-type: none"> <li>• Asian mental health service</li> <li>• Staff</li> <li>• Bureau staff</li> </ul>	A low number of complaints will indicate good performances from our service and contractors.	<5 per month	<ul style="list-style-type: none"> <li>• Verbal or written complaints received</li> <li>• Feedback from staff, services or patients</li> </ul>	Quarterly	Team Leader Asian Mental Health