

# Health Consumers Queensland Submission

Queensland Parliament  
Health, Communities, Disability Services and Family Violence Prevention  
Committee

## Health Transparency Bill 2019

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## About us

Health Consumers Queensland is the peak organisation representing the interests of health consumers and carers in the state. Health Consumers Queensland is a not-for-profit organisation and a registered health promotion charity and we believe in improving health outcomes for people in Queensland.

*Consumers are people who use, or are potential users, of health services including their family and carers. Consumers may participate as individuals, groups, organizations of consumers, consumer representatives or communities.*

Our priority focus is on consumer engagement that influences and leads improvements and delivers better health outcomes for all Queenslanders. We achieve this through our Queensland-wide health consumer network, tailored training and skills development programs, and maximising opportunities for consumer representation at all levels of the health system.

*Consumer engagement is when health consumers actively participate in their own healthcare and in health policy, planning, service delivery and evaluation at service and agency levels.*



### Our Six Strategic Objectives

- 1. Enabling health consumers and healthcare staff statewide**  
We build consumer, staff and system capacity to design a health system together through collaborative, integrated and consumer-centred approaches by providing support, strategic advice, training and advocacy.
- 2. Acting as an agent of change for consumer-centred health care**  
In partnership with consumers and healthcare staff, we act as a strong voice on system wide issues to influence key decision makers, policies and models of care to deliver a high quality consumer-centred health care system for all Queenslanders.
- 3. Enhancing effective partnerships**  
We develop and grow effective organisational partnerships locally, nationally and internationally to achieve consumer-centred health care for all Queenslanders.
- 4. Building and using evidence**  
We support consumers and staff to be involved in co-creating the evidence base for health system development and transformation. We act on the evidence of the human lived experience of the health system to build capacity of consumers and to leverage system change.
- 5. Being transparent and enduring**  
We demonstrate transparency and responsiveness on behalf of consumers, community and our funders. We maintain strong leadership and governance to assure organisational sustainability and longevity. We support the passion, energy and courage of our staff and members of our Network.
- 6. Addressing the social determinants of health**  
We acknowledge that systemic reform of the health system requires recognising the social determinants of health and co-designing models of care that address them.

### Areas of Focus

- Our areas of focus in implementing our strategic objectives**
- In partnership with consumers (including vulnerable groups) and staff, we act as a strong voice on system wide issues such as:
- **Healthcare Rights:** Breaches of healthcare rights which prevent fair, just and affordable access to healthcare;
  - **Quality & Safety:** Where quality and safety and/or consumer experiences are of concern;
  - **Healthcare Standards:** Embedding healthcare standards around consumer engagement, comprehensive care and health literacy; or
  - **Systemic Issues:** Complex, difficult or contentious systemic issues.

## Introduction

As an organisation, we are committed to Queenslanders receiving quality, safe, affordable, timely and accessible services, that deliver the right care, at the right time and the right place.

Health Consumers Queensland supports the introduction of the Health Transparency Bill 2019.

### **1. Establish a legislative framework for collecting and publishing information about public and private hospitals and residential aged cared facilities (RACFs);**

Health Consumers Queensland has been advocating for improved public reporting of quality and safety data since 2017 when our organisation submitted to Queensland Health a **Discussion Paper: Expanding healthcare quality and patient safety reporting**.

Our organisation continues to support improved public reporting and each year we survey our Queensland wide network of consumers and carers. In our 2018 survey, we asked consumers to identify the issues they most want us to advocate on their behalf. **Public reporting of safety and quality data** was identified as the second most important area of concern (out of a possible list of twenty). Consumer and carer engagement was number one.

### **Transparent reporting by Queensland public and private health facilities**

Since September 2018, we have welcomed the opportunity to support the Queensland Health **Patient Safety and Quality Improvement Service (PSQIS)** by organising and facilitating consultation with health consumers and carers to determine how transparent reporting can help consumers better navigate the healthcare system.

In October 2018, we appointed nine consumers and carers to undertake consultation with their own community members via Kitchen Table Discussions to learn what their priorities would be. A total of 69 consumers and carers were consulted through that process.

In November 2018, we organised, supported and co-facilitated with the PSQIS, 12 focus groups with consumer representatives within Queensland Hospital and Health Services. A total of 80 consumers and carers participated in these sessions.

The key themes that arose from the consultation were:

- What to expect: Where to go; how to get there; waiting times; expected length of stay
- Services: Clinical services offered; models of care; guidelines and protocols
- Care providers: Staff to patient ratios
- Quality: Accreditation status, complications arising from clinical care
- Achievements: Good news stories, research

In June 2019, PSQIS invited the Kitchen Table Hosts to a co-design session in regard to what transparent reporting would look like. Following this, the hosts again consulted with their

community members providing further feedback to Queensland Health. A total of 66 consumers were consulted.

Health Consumers Queensland acknowledges the way in which the PSQIS has involved consumers in this project to date and welcomes continued engagement and co-design with consumers throughout the life of this project.

We look forward to continuing to support the move to transparent reporting of both public and private hospitals that will enable consumer choice, knowledge and their navigation of the Queensland health system.

## **2. Amends the Hospital and Health Boards Act 2011 to introduce a minimum nurse and support worker skill mix ratio and minimum average daily resident care hours in public RACFs**

### **Recommendation 1**

Health Consumers Queensland strongly supports the Queensland Government decision to introduce a minimum nurse and support worker skill mix ratio and minimum average daily resident care hours in public RACFs.

Since March 2019, we have been undertaking comprehensive consultation on behalf of Queensland Health with consumers and carers throughout Queensland on “What matters to you in relation to Ageing, End-of-Life Care and Dying.” We have recently completed 16 focus groups with 185 consumer and carers participating in the conversation and 20 consumer and carer led kitchen table discussions who consulted with another 186 community members. In all some 400 Queenslanders were consulted.

In feedback received, **residential aged care facilities** were a major focus of conversation with many participants commenting that they would not go into an aged care home, preferring to stay at home or go into a smaller, community based facility. Our report to Queensland Health from the 16 focus groups outlined the following:

*Many commented that residential aged care facilities are severely understaffed. Some commented that the staff on the floor are doing their best and the staffing and care issues are with the management. Others felt that there is no quality of care in the homes.*

*Better and more qualified nursing and care staff is wanted. Family members commented that staffing ratios are not adequate with a comment that in one home an enrolled nurse is the lead nurse. They want improved staff ratios and improved education and training for staff.*

Many commented that RACFs are, in their words, severely understaffed and this was repeated in urban, rural, remote and regional locations. Community members say they are constantly advocating for more services and staff to support their family members.

**Recommendation 2**

As part of improving staff to patient ratios that ongoing professional development for staff working in RACFs be seen as an important aspect of better and safer care delivery.

**3. Amends the Health Ombudsman Act 2013 to implement recommendations of the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee's Inquiry into the performance of the Health Ombudsman's functions pursuant to section 179 of the Health Ombudsman Act 2013.**

Health Consumers Queensland supports the amends to the Health Ombudsman Act 2013. Our recommendations are:

**Recommendation 1**

Establishing a joint consideration process of matters between the Health Ombudsman and AHPRA - We would be interested to see comparison data of time to resolve complaints, and satisfaction data of clinicians and consumers involved in the complaints, compared to usual processes (current separate consideration of processes by AHPRA and the Health Ombudsman

**Recommendation 2**

Reducing the splitting of matters between the Health Ombudsman and AHPRA – we support the amendments aimed at maximising joint consideration of serious professional misconduct matters to be able to be dealt with as a whole (conduct, performance and health/impairment), rather than being split between the Health Ombudsman (conduct) and AHPRA (impairment).

**Recommendation 3**

Deciding how to deal with a complaint – we would encourage a cautious approach to altering the current legislation which requires the OHO to deal with complaints where the complainant has not first attempted to resolve the complaint with the health service or practitioner, or where the complaint is better handled by another body. There may be good reasons why a complainant does not feel like it is safe for them, or will be effective, to attempt to resolve a complaint at a local level. In remote and rural areas there is often a single provider, therefore raising a complaint results in a perceived or real barrier to not receiving treatment.

While we recognise that it is proposed that the Health Ombudsman may still accept complaints where direct resolution may not be appropriate, Health Consumers Queensland would want to assist the OHO and consumers to co-design the OHO's decision making pathways for this and oversee monitoring of the same, in order to avoid unintended consequences. This must also define what is regarded as a "low-risk" complaint by regulators (eg. classified as a "communication issue"), but in fact have had a high impact on a consumer's ability to make informed decisions/receive the most appropriate care and continue to impact on other consumers, if remedial action is not taken to rectify clinician behaviour.

We would also be pleased to assist the OHO in support consumers to co-design and to distribute/publicise the complaints resources for consumers described by the Health Ombudsman in his evidence to the Parliamentary Committee on 10 June 2019.

**Recommendation 4**

Practitioner monitoring – we support the proposal for the Act to be amended to clarify that authorised persons' powers include monitoring compliance with conditions, orders and other requirements as imposed by the Health Ombudsman.

### **Recommendation 5**

Powers for the Health Ombudsman to make final prohibition orders for unregistered health practitioners, subject to reviews by QCAT – we support these proposed amendments.

### **Conclusion**

Subject to the above recommendations, Health Consumers Queensland supports the proposed Transparent Reporting Bill 2019. We look forward to continuing to support the implementation of transparent reporting.