



Victorian
Agency for
**Health
Information**

YEAR IN REVIEW 2017–18

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Foreword from the Minister



Two years ago, this Government accepted in principle all the recommendations of the *Targeting zero* review that found that, while Victoria offers some of the best health care in the world, there were gaps and failings in quality and safety.

In the past year, we have made good on our commitment to implement solutions to eliminate avoidable harm and strengthen quality of care, establishing in particular Safer Care Victoria (SCV) and the Victorian Agency for Health Information (VAHI).

Dedicated to monitoring and improving quality and safety, VAHI has taken up its work with a clear vision to build an accurate picture of public and private health service performance, ensuring public information and data are accessible across government agencies, organisations and individuals.

In this establishing year, there have been significant achievements towards our promise to put patient care front and centre of everything we do.

These improvements include the successful transitioning from the Department of Health and Human Services the *Monitor* and *PRISM* reports as well as responsibility for the Victorian Health Experience Survey program and the Health Data Integrity program.

VAHI has also developed the quarterly *Inspire* report to support clinical governance across health services and hospitals, and launched the *Board safety and quality report*.

This year it made available its first patient experience report and the new *Better safer care* website was launched as a joint home for VAHI and SCV.

This first year provides a strong foundation to deliver a better, safer health system for all Victorians.

I thank Dr Diane Watson, CEO of VAHI from January 2017 to January 2018, for setting up the agency and enabling these achievements. And I also want to thank and welcome Dr Lance Emerson, appointed in February, who will take VAHI's important work forward.

The Hon Jill Hennessy
Minister for Health



Report from the CEO

The Victorian Agency for Health Information (VAHI) has come a long way in its first 18 months.

VAHI commenced operations in January 2017 and was formally established as an Administrative Office of the Victorian Government in June 2017. Creation of a new health information agency was a key recommendation in *Targeting zero*, the final report of the review into safety and quality in Victorian hospitals.

We developed six strategic objectives, guided by a Statement of Expectations provided by the Minister for Health. These objectives were outlined in our first corporate plan, and we have made significant progress in 2017–18.

VAHI's vision is for a community that is better informed about health services, where health services receive the information they need to serve their communities and provide better, safer care. Our focus in 2017–18 was on building the necessary foundations required to commence delivery on this vision.

VAHI immediately took on responsibility for a range of reports and functions that had previously been coordinated by the Department of Health and Human Services (the Department). We also developed and delivered a range of new reports recommended by *Targeting zero*. *Inspire* and the *Board safety and quality report* were produced for clinicians and boards respectively, to bridge gaps identified in the provision of quality and safety data.

We established a strong governance structure along with a number of advisory committees with highly experienced members to assist VAHI's work.

We created a robust Information Management Framework and strengthened processes and oversight to ensure the quality and integrity of data and datasets.

We released our first patient experience report in February 2018, focused on the experiences of over 30,000 Victorians after their stay in public hospitals.

We commenced development on the Victorian Clinical Registry Strategy that will guide the Victorian Government's investment in these registries.

We carried out education workshops to support clinical coders and held seminars to share information with health professionals.

We progressed our role in leading health information reforms, not only in Victoria but also nationally. This has been demonstrated through our leadership of the Australian Health Ministers Advisory Council (AHMAC) National Data Linkage Demonstration Project (NDLDP) focused on improving cardiac outcomes, as well as VAHI representation on many national health information and data committees.

We launched *Better safer care*, a joint website with Safer Care Victoria (SCV), to provide news, information, reports and resources about the quality and safety of healthcare in Victoria.

We completed a review of the Victorian Health Incident Management System (VHIMS) and strategies are in place to improve the system so that statewide incident data will be available for the first time. With the foundations established, 2018–19 will be a year of significant progress for incident management and reporting in Victoria.

These are just some of the important steps VAHI has taken so far. But our job has only just begun.

VAHI is on a shared quality improvement journey with consumers, clinicians and health services. Having trusted, accurate, timely and actionable data is essential to helping Victorians achieve the best possible health and wellbeing.

It is critical that the information we provide meets the needs of the people who use it. From the outset, we have sought feedback from stakeholders on our reports. In April 2018 we started a formal consultation process with our stakeholders to assess how useful our data and reports are, and ways they can be improved. We are also seeking to understand what information the public require about the health services in their area.

We have ambitious plans for 2018–19 and beyond. We will begin a shift from provision of regular static reports by email, to an online portal that will provide our users with customisable, interactive data and reports. We will further develop the patient experience datasets and increase our reporting on quality and safety to the public.

We will be building on our progress in 2017–18 to become the main health data and information source for Victorian health services, clinicians and the public. We have also commenced exploring the inclusion of community health and aged care services in our reporting. Together with our partners at SCV and the Department, we can help to progress improvements in quality and safety across Victoria.

We are grateful to our colleagues across the sector for supporting our work in this first year.

I would like to acknowledge the work of our peak advisory group, the Agency Advisory Committee. Chaired by Adjunct Professor David Plunkett, the Committee has provided VAHI with invaluable guidance on our work. I would like to thank the members of all of our advisory committees, who share their valuable time to help progress VAHI's vision.

I'd like to thank Dr Diane Watson, who led VAHI as its inaugural CEO until January 2018. Diane is responsible for establishing a strong governance and management structure, building the workforce and leading the creation of our first corporate plan.

I acknowledge the Minister for Health, The Hon. Jill Hennessy MP, for the leadership she demonstrates in seeking reforms to the Victorian health system.

I also thank Department Secretary Kym Peake for her vision, support and guidance, as well as the various Deputy Secretaries and Executive Directors within the Department for their support and collaboration.

Finally, I extend my thanks to all of the hardworking and highly competent VAHI staff. Thank you for your passion and commitment to progressing VAHI's role and helping those working to deliver better, safer care for all Victorians.

Dr Lance Emerson

CEO, Victorian Agency for Health Information

About the Victorian Agency for Health Information



Our vision

The community is better informed about health services, and health services receive better information to serve their communities and provide better, safer care. Across our system everyone has an accurate picture of where the concerns are and where we're getting it right.



Our mission

We monitor and report on public and private services that support health and wellbeing to stimulate quality and safety improvements, increase transparency and accountability, and inform the community.



Our values

We have integrity
.....
We are accountable
.....
We are innovative
.....
We collaborate
.....
We are respectful
.....
We care for people, families and communities
.....



Our strategic objectives

Contribute to strengthening oversight of the Victorian health system
.....

Inform, stimulate and drive improvements in safety, quality and outcomes
.....

Provide Victorians with an accurate picture about health services in their local area
.....

Produce meaningful and useful information
.....

Support improvement in the quality of information, its production and broad use
.....

Develop a trusted, respected and influential agency
.....

Our enablers



Engagement
.....

Processes and systems
.....

People and culture
.....



Achievements in numbers

REPORTS

427 individual issues of the *Board safety and quality report* distributed to health service boards



193 individual issues of *Inspire* distributed to clinicians

PERFORMANCE

Health service CEOs and boards provided with performance information for



188 MEASURES FROM 24 DATASETS,

covering quality and safety, governance and leadership, timely access to care and financial management



VAHI RESPONDED TO

636



data requests from researchers, government and others

SURVEYS AND USER TESTING

30,606



patients completed a survey that informed VAHI's first public patient experience report

150



VHIMS users signed up as 'Critical Friends' to test the new system for incident management reporting

WORKSHOPS AND CONFERENCES

435 clinical coders attended **11** VAHI education workshops



OVER 500 people attended VAHI events, including seminars and the Better, smarter care conference

Milestones

**2016****October**

Targeting zero and *Better, safer care* published

2017**January**

VAHI created, led by Dr Diane Watson

May

'Better, Smarter Care: Reducing Unwarranted Variation' conference co-hosted with SCV

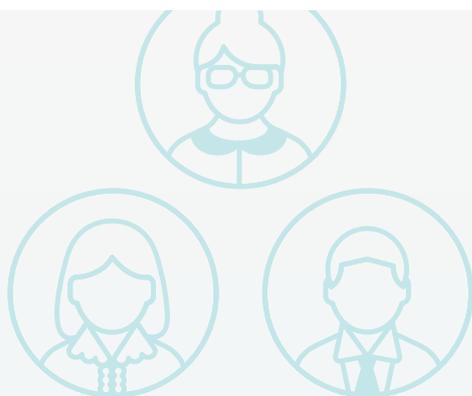
March

First meeting of the Clinical Measurement and Reporting Committee

First *Board Safety and Quality Report* published

VAHI takes over *Monitor* and *PRISM* and releases first monthly and quarterly editions





2018



December

First meeting of the Agency Advisory Committee

October

Minister for Health provides VAHI with a Statement of Expectations

March

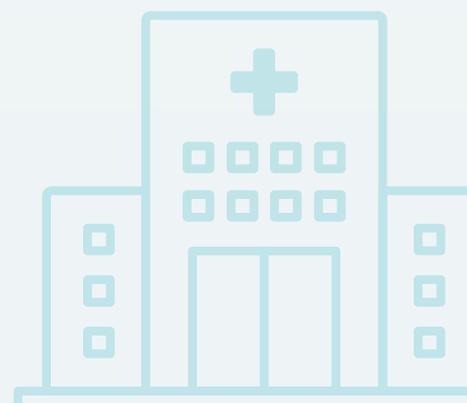
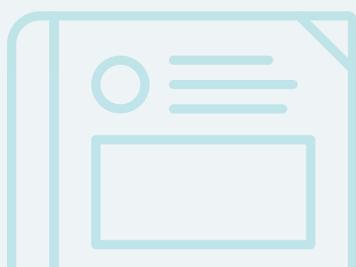
Better safer care website launched
First meeting of Board Reports Advisory Committee

July

First *Inspire* report published
VAHI established as an Administrative Office
First data integrity report published – *Elective surgery waiting lists: a rapid review to ensure full transparency*

February

First public patient experience report published – *Adult experiences of care in public hospitals – 2016*
Dr Lance Emerson appointed as CEO





Progress against objectives

VAHI's six strategic objectives guide our work so that all of our initiatives align with our vision and mission. During 2017–18, many of our activities were focused on building the foundations for VAHI's future.

The objectives were first set out in the Corporate plan 2017–18. They are:

- 1 Contribute to strengthening oversight of the Victorian health system
- 2 Inform, stimulate and drive improvements in safety, quality and outcomes
- 3 Provide Victorians with an accurate picture about health services in their local area
- 4 Produce meaningful and useful information
- 5 Support improvement in the quality of information, its production and broad use
- 6 Develop a trusted, respected and influential agency



Contribute to strengthening oversight of the Victorian health system

Improving safety and quality in health services requires strong oversight across the health system. VAHI provides health service CEOs and boards with trusted, timely and accurate information to better enable them to fulfil their governance and oversight roles and responsibilities. Our aim is that CEOs and boards find the information meaningful, and can use it to improve the effectiveness, efficiency and sustainability of health services.

Supporting CEOs to run their health services effectively

When VAHI was established, responsibility for some existing reporting functions moved across from the Department of Health and Human Services (the Department).

VAHI's *Monitor* reports on the performance of public health services against targets agreed in their Statements of Priorities. It includes key measures related to quality and safe care, governance and leadership, timely access to care and financial management.

Monitor is produced for health service CEOs, boards and the Department. Each health service receives a tailored edition of the report, with their results shown against their targets.



The format of *Monitor* aims to clearly and simply show whether or not the health service has met the target for each measure. VAHI has made improvements to the report layout, including making information about data sources more concise and accurate, and adding further explanations for key performance measures. We will continue to improve *Monitor* and seek feedback from health services on how they use the report.

The *Program report for integrated service monitoring (PRISM)* is designed to provide a broad view of performance across a range of services provided to the Victorian community by health services.

The report contains health services' results across a wide range of additional performance measures not contained in *Monitor*, including access, safety, quality, operational and financial measures. *PRISM* is distributed to health service CEOs and board chairs to assist with benchmarking.

PRISM is the result of collaborative work undertaken by the Department and the sector. VAHI will continue to consult with stakeholders about the information they need from *PRISM*. VAHI will also make improvements to the report, such as developing a library of measures reported and improving the tracking of data submissions.

VAHI released the first monthly and quarterly editions of *Monitor* and *PRISM* in March 2017. In addition, VAHI released the annual issues of *Monitor* and *PRISM* in October 2017.

Supporting boards in their oversight role

VAHI produced the first *Board safety and quality report* in March 2017. VAHI designed this new report series specifically to help health service board members in their oversight role. It was created to improve the flow of information in the health system, which the *Targeting zero* report identified as a need.

The *Board safety and quality report* contains results for a selection of quality and safety measures. It is distributed to health service CEOs and board members to support their governance role, particularly relating to quality and safety.

Each health service receives an individual report, tailored based on their peer grouping and whether they are located in metropolitan, regional or rural areas. This allows CEOs and board members to compare their results with similar health services.

Performance targets are intentionally omitted from the *Board safety and quality report* series, as the information is intended to drive continuous quality improvement, even when a public health service's performance may already be better than the target.

VAHI improved the *Board safety and quality report* series during the year in response to feedback, and by gaining a better understanding of what CEOs and boards want from the report. This will continue as we work closely with our stakeholders in the newly formed Board Reports Advisory Committee.



Inform, stimulate and drive improvements in safety, quality and outcomes

Trusted, timely and accurate information on health service quality and safety performance can be used to stimulate and drive improvements in care. VAHI aims to help clinicians to be better prepared to use their data. They should be able to easily interpret information about where they are getting it right and where they can improve.

Providing clinicians with the information they need

The *Inspire* report is specifically targeted to lead clinicians such as chief medical and nursing officers. It was developed by VAHI in response to recommendations in *Targeting zero* for clinicians to get better access to clinical data. The inaugural issue of *Inspire* was published in July 2017, and a further four issues were published during the year.

Inspire contains results for a selection of relevant quality and safety measures from *Monitor* (such as quality and safety measures included in health services' Statements of Priorities) and additional measures deemed a priority by our Clinical Measurement and Reporting Committee (the committee established to advise VAHI on clinical improvement). During the year, VAHI introduced reporting of routine sentinel events to *Inspire*, as well as information about hospital-acquired complications and new measures of patient experiences with care.

VAHI produces a statewide edition of *Inspire* each quarter. In addition, health services receive individualised editions for specific measures.

To promote detailed clinical review at the health-service level, *Inspire* includes more detail for some measures than is provided to board members in the *Board safety and quality report*. Similar to the *Board safety and quality report*, performance targets are intentionally omitted in order to drive continuous quality improvement.

Within each issue of *Inspire*, Safer Care Victoria (SCV) contributes insights and advice for clinicians. These insights help clinicians interpret the results and translate them into opportunities for improvement.

In addition to the quarterly issues of *Inspire*, VAHI published two special issues during the year to report on measures not contained in the quarterly report. The topics were deemed to be priorities for clinicians, and were chosen with input from SCV and VAHI's Clinical Measurement and Reporting Committee.

VAHI published the 'Sentinel events and mortality' issue in September 2017. This issue reported on sentinel events, which are unexpected events that cause death or serious harm to a patient while in the care of a health service. The issue also included deaths in low-mortality diagnosis-related groups. These groups represent conditions where the risk of death while in hospital is extremely low.

In June 2018, VAHI published the *Inspire* 'Mental health' issue. This special issue provided accurate, accessible and meaningful performance information to clinicians across the Victorian clinical mental health system. Measures were reported across child and adolescent, adult, aged, secure extended care unit and forensic settings.

Reporting on alcohol and drug treatment

The Department's national reporting obligations for alcohol and drug treatment moved to VAHI in January 2017.

VAHI's alcohol and other drug treatment reporting includes reports to the Department comparing funding activities to agreed targets. In addition, VAHI produces a quarterly and annual profile of alcohol and other drug treatment categories, client demographics, service provision and drug statistics. This profile is used for service planners both within the Department and in other organisations. Data is also reported to the Commonwealth Government through annual collections and VAHI's contribution to the National Illicit Drug Strategy report.

Alcohol and drug treatment data is currently collected according to Alcohol and other Drug Information System (ADIS) specifications, which have been in use since 1999. VAHI and the Department have been working to develop a replacement to ADIS that will be more fit for purpose. From late 2018, ADIS will be replaced by the Victorian Alcohol and Drug Collection specification (VADC). The new dataset will be collected monthly and will enable VAHI to provide more valuable reports in this area.

Responding to data requests

In January 2017, VAHI took on responsibility for the ad hoc data request service known as HOSdata. The service provides data to researchers, funded agencies, the Department, other government departments and agencies, local government, health services and other organisations. The data comes from a number of hospital data collections, such as the admitted, emergency and non-admitted datasets.

HOSdata assists the person making a request to identify the information that will enable them to meet the objectives of their project. The data are used for research to improve quality and safety in health care, to evaluate the efficiency and efficacy of the Victorian health services, and to keep the Minister for Health informed about the state of the system.

VAHI ensures that the information provided complies with all relevant legislation and policy, particularly in relation to the privacy of patients and the need for confidentiality.

VAHI has processed over 350 HOSdata requests since January 2017.

Scoping the expansion of health related data in VAHI's reporting program

VAHI's focus during our first year of operation has been reporting health quality and safety data and information.

In late 2017–18, we commenced scoping the inclusion of community health and aged care data within our reporting program. During 2018–19, we will be further scoping the measures and reports that could potentially be included in our reporting program, including examining where we can align measures and reporting tools.

Developing an interactive portal

VAHI seeks to develop an innovative and interactive online data portal in response to recommendations in the *Targeting zero* report. The portal will create a fundamental shift for VAHI's reporting products. They will move from being static, PDF-based reports containing selected measures, to fully customisable products that CEOs, board members and clinicians can tailor to their own needs.

The portal will give users access to a broader range of quality and safety measures than can be included in a regular quarterly report. Users will be able to search for the measures they want, including historical data to help identify trends, monitor the impact of local and statewide quality and safety improvement initiatives, and make comparisons with similar health services.

The portal will also include an area for the public to use. This area will share quality and safety information about Victoria's 84 public health services with the community, in a way that is easy to understand. The portal will deliver on its aim to provide better, more meaningful information to all of VAHI's audiences.

3

Provide Victorians with an accurate picture about health services in their local area

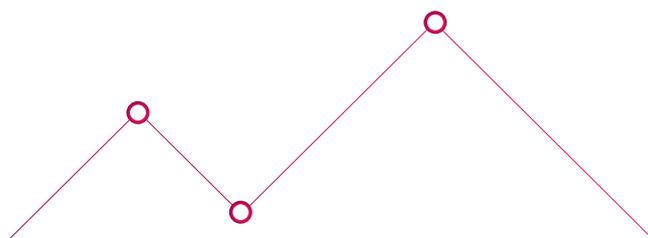
Victoria's health service providers should be transparent and accountable to the general public. VAHI wants all Victorians to have easy access to trusted, accurate and meaningful information about health services in their area.

Presenting patient experience results

In February 2018, VAHI published a public report detailing the experiences of more than 30,000 Victorians after their stay in public hospitals. The report, *Adult experiences of care in public hospitals – 2016*, included statewide results as well as results for the 84 health services in Victoria.

The results are based on the adult inpatient Victorian Healthcare Experience Survey (VHES), a survey completed by a random sample of eligible adults aged 16 or over who were same-day or one or more night admitted patients.

The results covered key factors that contribute to a patient's experience with a health service, such as waiting time, how clean the bathrooms were and the information they were given when discharged.



Across all respondents to the survey, 91% rated their overall care as either ‘good’ or ‘very good’ in 2016, and 75% of patients reported positive experiences of discharge from their health service. These results act as a benchmark for health services. While the results were very positive, there is still room for improvement.

VAHI plans to publish further reports looking at different aspects of patient experience in 2018–19.

Reporting performance publicly

Each quarter, VAHI updates the information on the Victorian Health Services Performance website. The update provides statewide and health service-level information on performance in areas including hospital admissions, emergency care, ambulance services, elective surgery, patient experience, dental care and mental health.

VAHI took on oversight of the performance website from the Department.

The purpose of the website is to provide Victorians with an accurate picture about the performance of health services in their local area.

VAHI is working towards enhancing public reporting in 2018–19. We have begun consulting with the Victorian community on their information needs and our reporting products will be based on their input. We plan to co-design these products with consumers over the coming year.

Meeting government reporting requirements

All states and territories must report data to national entities to inform the amount that the Commonwealth Government will pay to each jurisdiction each financial year. The required data includes activities in all public health service streams: admissions, emergency, non-admitted episodes, elective surgery, mental health and financial performance.

Government reporting is not limited to the Commonwealth. The Victorian Department of Treasury and Finance also requires regular health system performance statistics. To guarantee continued funding, the Department of Health and Human Services is accountable to the Victorian people. These performance statistics ensure service delivery continues to be delivered to agreed targets.

VAHI met all reporting obligations for 2017–18. Building on the experience from our first year, the process will be streamlined for the next reporting cycle.

4

Produce meaningful and useful information

For quality and safety information to be useful, it needs to fit the needs of the audience. VAHI's reporting highlights clinical variation and benchmarks performance so that our audiences can easily identify where health services are getting it right, and where they need to improve.

Reviewing our reporting program

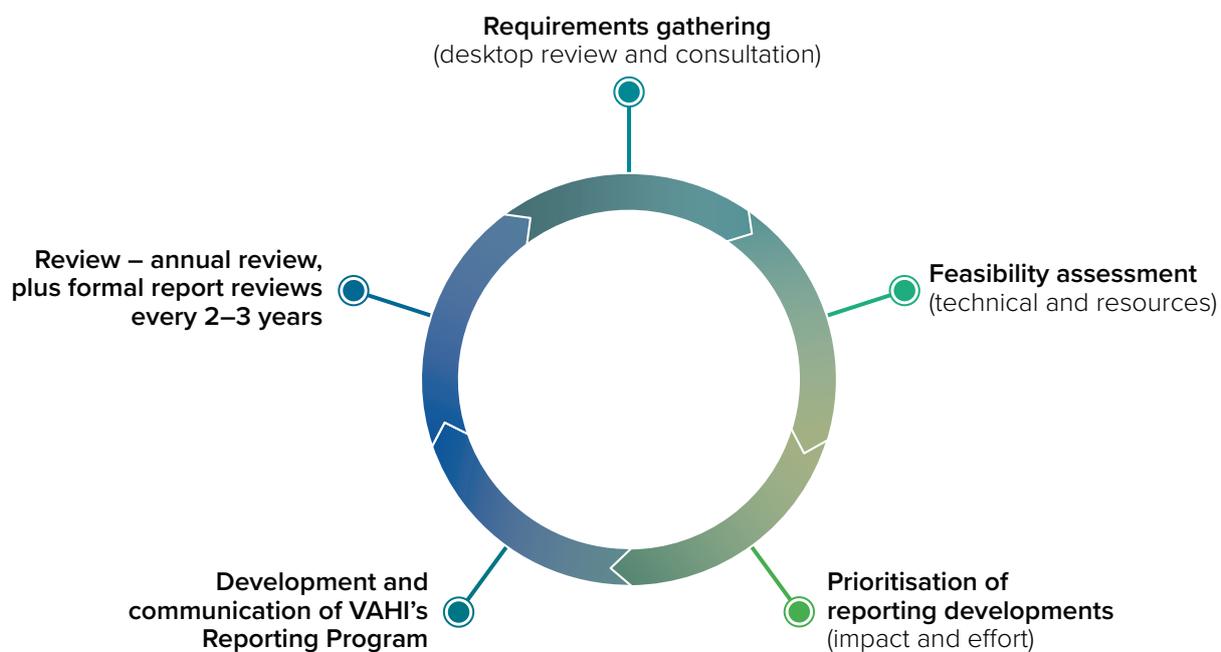
VAHI's reporting program sets out all of the reports planned for the year ahead and identifies the measures that will be included. The aim of the reporting program in 2017–18 was to address, where feasible, the immediate quality and safety reporting priorities identified in *Targeting zero*. VAHI has now created a formal process for developing the reporting program each year, to include wider consultation and collaboration.

Development of the 2018–19 reporting program began in April 2018. Users of VAHI reports – including health services CEOs, boards, senior clinicians and safety and quality managers, SCV, the Department and consumers – were invited to participate in a consultation process. A summary of the results will be published on the *Better safer care* website in August–September 2018.

VAHI will also carry out a more in-depth consultation process with key stakeholders. We will seek feedback on the usefulness of specific quality and safety measures according to a variety of criteria such as how relevant, valid and actionable they are, and under what circumstances they have been used to drive improvement in health care in Victoria.

Proposed reporting developments will be assessed for feasibility and then prioritised by VAHI, with support from SCV and the Department. The reporting program will then be distributed to key stakeholders and published on the website.

The reporting program will be reviewed every year to ensure that VAHI is reporting the most useful measures, in the right format, to drive improvements in quality and safety. Each individual reporting product will be reviewed every three years.



Collecting and reporting patient experiences

The Victorian Healthcare Experience Survey (VHES) program surveys recent users of Victorian public health services to collect patient experience information. The purpose is to measure, monitor and report patient experience to support a patient-centred approach to healthcare delivery.

Surveys are sent to patients one month after attending a Victorian public health service or using a service provided by Ambulance Victoria. Surveys are conducted throughout the year for adult and paediatric inpatients and emergency department patients, and maternity patients. In addition, surveys of specialist clinics, ambulance services and community health services are conducted over a specified period once a year. The results are presented to Victorian public health services through a secure online portal.

Since the VHES program's inception in 2014, its requirements have evolved. VAHI took on the responsibility for the program in 2017 and commissioned an independent review to identify opportunities for improvement and inform the future direction of the program. The review recognised the achievements of the program and made recommendations for VAHI to explore.

Over the next year, VAHI will review the current surveys, giving particular consideration to their length. VAHI will also examine ways to better obtain patient feedback for local and small rural health services.

In February 2018, VAHI presented information from the adult inpatient survey in the *Adult experiences of care in public hospitals – 2016* report. The report presented statewide and service-level results across the key measures that contribute to an adult patient's experience with Victorian health services in an inpatient setting.

Improving investment in clinical registries

A clinical quality registry collects data on a specific clinical condition or episode of care to monitor the quality of care and identify variations in clinical outcomes. The data is then used to develop benchmarks that are fed back to clinicians contributing data to the registry to inform their clinical practice and decision making. This clinical outcome feedback loop helps drive improvements in healthcare quality and value.

Clinical quality registries also provide an important mechanism for collecting patient-reported outcomes that are specific to a condition or treatment.

Together these measures provide useful insights into the overall quality and safety of care, and are used to support improvements.

In November 2017, VAHI completed work on the development of a Victorian Clinical Registry Strategy. This included developing a tool to evaluate the potential of a registry to affect clinical quality and safety, and then to assess the impact. The tool will be used to guide the Victorian Government's future investment in clinical registries. Meanwhile, VAHI will focus on working with clinical quality registries to address registry-specific recommendations in *Targeting zero* to continue to improve their impact on quality and safety.

The Victorian Government provides direct or indirect funding to 20 clinical registries, ranging from registries covering acute stroke care to intensive care and surgical care. Of these 20 registries, 11 are considered clinical quality registries.

VAHI is also working closely with the Commonwealth Government and other states and territories to develop a national strategy for clinical quality registries.

5

Support improvement in the quality of information, its production and broad use

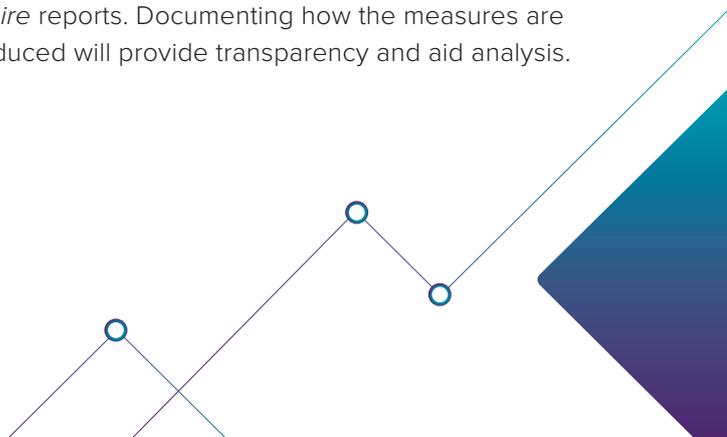
Data is at the heart of VAHI's work. We transform data into trusted, accurate and useful information that can be used to drive improvements. VAHI ensures the data we collect and use is complete and accurate, protected from unauthorised access, and available when needed. We want data on safety and surveillance to be easy to collect and share across the healthcare system.

Establishing information management and standards

VAHI has many functions related to the use of data. Our information management practices ensure that we handle and govern the data we use in compliance with all relevant legislation and policies. We seek to share data and information as much as possible to support system improvements, while protecting the privacy of patients and organisations.

VAHI has developed an Information Management Framework and other information and data management policies to describe the way that we collect, store, use, analyse, share and govern information. VAHI follows best practice principles for all data management.

During the year, VAHI began a project to document the specifications and calculations for all measures we report, for example those in the *Monitor* and *Inspire* reports. Documenting how the measures are produced will provide transparency and aid analysis.



Supporting classification and coding

The aim of clinical coding is to classify clinical concepts into code. Clinical codes are assigned for each admitted patient, once the patient is discharged from hospital. Coders use the diagnoses and clinical interventions (surgeries and investigative procedures) that clinicians have documented in the patient's medical record.

The clinical codes form part of the Victorian Admitted Episodes Dataset (VAED), which is one of the key health datasets in Victoria. It holds both public and private hospital data. Coded data are used extensively to support quality and safety monitoring in health services, clinical research, health service planning and funding.

In July 2017, VAHI created a new Victorian addition (known as Vic 0002) to an Australian standard code, after recognising that health information managers and clinical coders needed direction to interpret clinical significance when applying additional diagnosis codes.

In December 2017 and January 2018, VAHI held 11 face-to-face education workshops to assist health information managers and clinical coders in application of the new coding standard. In total, 435 clinical coders attended the workshops from metropolitan and rural public health services as well as private hospitals. VAHI also produced educational resources to support the information provided at the workshops. Feedback on the workshops and resources has been overwhelmingly positive, with coders feeling much more confident in using the code.

As a result of the introduction of Vic 0002, VAHI will now contribute to the revision of the Australian classification to promote national consistency in reporting of additional diagnosis codes.

VAHI will also continue to engage with health information managers and clinical coders to better understand variations in reporting of coded data.

Ensuring integrity of data

VAHI is responsible for ensuring the integrity of performance and activity data reported to the Department by health services. This means ensuring that health datasets accurately reflect the care provided to patients. Accurate data are essential for all uses, including funding purposes, performance monitoring, policy development and planning, and clinical research. When stakeholders trust that data is accurate, they can trust the information derived from that data.

VAHI has developed a Health Data Integrity Program to monitor and support improvement in health data integrity. The program has benefits for health services and those responsible for oversight, transparency and accountability of health services, and for stimulating improvements in patient quality and safety and outcomes.

The Health Data Integrity Program monitors and strengthens the internal data integrity controls in health services. It also detects and reports on inaccurate health data, and recommends opportunities to improve both controls and data.

During 2017–18, VAHI conducted 47 data integrity audits of admitted patient data reported by Victorian public health services to the Victorian Admitted Episodes Dataset (VAED).

Following a review, VAHI has moved its data integrity approach from an emphasis on random reviews and statewide estimates of overall accuracy of data, to a more targeted approach based on data analytics and risk assessment.

In June 2018 VAHI revised and distributed the *Data integrity guidelines for health services*. These guidelines will assist health services in understanding and meeting health data integrity requirements.

Responding to arising issues

In December 2016, the Department became aware of more than 900 patients who had not been placed on the publicly reported elective surgery waiting list due to an administrative error. Between January and May 2017, VAHI commissioned an independent review of all health services reporting elective surgery waiting list data to the Department.

In July 2017, VAHI released the results of the review in the report *Elective surgery waiting lists: a rapid*

review to ensure full transparency. The review found that 11 health services had assigned 949 patients to an obsolete procedure code. The review made a series of recommendations for the Department, VAHI and health services to fix the issue. The Department continued to monitor health service activity to ensure that the appropriate actions had been taken.

Informing health policy and service design

VAHI, in collaboration with the New South Wales Government, is undertaking the Delivering Better Cardiac Outcomes: Primary, Specialist and Hospital Care project. This project is an initiative under the National Data Linkage Demonstration Project (NDLDP).

The NDLDP was established in response to a request by the Australian Health Ministers Advisory Council (AHMAC) for advice on the feasibility and benefits of arrangements that could be adopted to bring together data from across jurisdictions, including access to and use of this data.

Linked data increases the useability of existing data to answer more complex questions about how to drive improvement in patient care. It allows clinical networks to gain a more robust understanding about the impact of different models of care on the patient journey and outcomes.

The Victorian-led Delivering Better Cardiac Outcomes project aims to demonstrate to AHMAC the value of authorising ongoing use of linked data. VAHI has partnered with clinicians, academics, government and experts in using big data to create tangible information to inform policy and service design related to quality cardiac care. Initial analysis of the data was completed in early 2018.

This initiative is one of many collaborative projects that VAHI intends to contribute to over the coming years to add value and inform policy in different areas.

Managing incident data

All Victorian public health services are responsible for investigating incidents, near misses and hazards that occur in their service. Each incident is assigned a severity rating guiding the level of investigation needed. Investigations are important as they can identify ways to reduce or eliminate the risk of the incident happening again.

The Victorian Health Incident Management System (VHIMS) is the repository for data on incidents and near misses and provides a statewide picture. It also includes data on clinical and occupational health and safety incidents, as well as patient feedback (such as complaints, compliments and suggestions).

Oversight of VHIMS was transferred from the Department to VAHI when it was established in 2017.

Through feedback from stakeholders and others it quickly became apparent that the system needed to be reformed. VAHI set up an advisory group to inform this work. The group includes health service chief executives, directors of medical services and nursing, quality directors, interstate experts and representatives from SCV and the Department.

The group identified short- and long-term strategies to improve Victoria's approach to collection and reporting of incident and feedback information.

In the short term, VAHI implemented a simpler approach to data collection across Victoria. These short-term collection arrangements will enable statewide reporting on incidents for the very first time since VHIMS was first introduced in 2010.

For the longer term, VAHI is developing a new incident and feedback reporting and management system for small services including bush nursing, community health and small hospitals. VAHI has sought input from a wide range of VHIMS users to ensure the new system will support improvements to staff and patient safety. The VHIMS 'Critical Friends' group tested a pre-release version of the new system and provided vital feedback. The system will be implemented later in 2018.

VAHI is also conducting a tender in partnership with Health Purchasing Victoria to identify a panel of appropriate suppliers for other Victorian public health services to use.

In April 2018 VAHI began working with representatives from across the sector to co-design a new statewide minimum dataset for incident reporting. This will make incident reporting easier for Victorian public health services as they will only be required to collect the incident data that is essential to support statewide oversight of quality and safety.





Develop a trusted, respected and influential agency

For VAHI to work effectively, we need to be an organisation that our partners trust and respect. VAHI is building the key infrastructure, positive workforce culture and strong stakeholder relationships that will allow us to deliver on our vision and others' expectations.

Launching the *Better safer care* website

In March 2018 VAHI and SCV launched the *Better safer care* website.

The dynamic new site contains information about the two agencies, reports on the quality and safety of healthcare in Victoria, and the latest news and events. It will also provide publications from VAHI detailing how health services are performing, and from SCV on how they are working directly with providers and consumers to improve health outcomes for all Victorians.

The website has been designed to be user friendly and accessible. Information related to VAHI's work that was previously housed on the Department's website has been reviewed and moved to *Better safer care*. New content is being added to the site regularly.

The shared website, and its ongoing development, is an example of the complementary way in which VAHI and SCV work. The shared ambition to improve quality and safety across Victoria's public health system underlies all of our work.

Communicating with stakeholders

Communicating effectively with our stakeholders is an essential part of our quality and safety improvement journey. In March 2018, we launched *VAHI news* – our monthly e-newsletter – as a key channel for reaching our broad audience.

The aim of the newsletter is to keep people up-to-date with information on current VAHI reports and developments, details about what VAHI is currently working on, our plans for the future, and other issues related to health and human services data and information.

VAHI used the first newsletter to launch a *Guide to VAHI reports*. This short publication, developed in response to feedback, provides readers with a simple overview of VAHI's main reporting products. Other issues have profiled VAHI's committees, given project updates and invited readers to get involved in our reporting program consultation.

We will aim to grow the readership of *VAHI news* in 2018–19 so that more people across the sector receive important updates that can assist their quality improvement work. The newsletter also provides a regular opportunity to invite feedback on VAHI's work and we will continue to encourage subscribers to get in touch with their thoughts.

Sharing information through events

VAHI was established to enhance the effective flow of information, not only to health services but through the whole health system and wider sector. Throughout the year, VAHI held a series of seminars where local, interstate and international experts shared their experiences with a wide range of professionals from VAHI, SCV, the Department and health services.

The seminars bring people together for valuable information-sharing opportunities, promoting collaboration, innovation and best practice.

The highlight of the information-sharing events was the two-day 'Better, smarter care: reducing unwarranted variation' conference held in May 2017. Jointly hosted by SCV and VAHI, this event included more than 200 delegates from Australia and overseas. Speakers from Canada, New Zealand, South Korea, Germany, and the UK

delivered presentations and provided information on promising policy and practice responses to deliver better, smarter health care in response to data on unwarranted variation. It also featured best practice approaches to measuring and reporting on clinical variation to stimulate better, smarter care.

During the year, other seminars included:

- 'Development of the survey of healthcare and the linked data project' by Kerrin Bleicher from the Australian Institute of Health and Welfare
- 'System performance' by Dan O'Halloran, Senior Director of System Performance in Queensland Health
- 'Pricing for safety and quality' by James Downie, CEO of the Independent Hospital Pricing Authority (IHPA)
- 'Measuring and reporting on performance in healthcare' by Kim Sutherland, the Acting Chief Executive of New South Wales Bureau of Health Information
- 'Increasing transparency of the health data' by Richard Hamblin and Carl Shuker from New Zealand Health Quality and Safety Commission New Zealand
- 'Big data and healthcare: a case study – North Health Wangaratta' by Margaret Bennett, CEO, Northeast Health Wangaratta and Julia Cooper, Principal, Finity Consulting
- 'Towards person-centred actionable health information' by Professor Fabrizio Carinci, an international expert on health information for policy
- 'Health analytics and public hospital theatre efficiency' by consulting firms Escient and Aginic.

The information-sharing seminar series will continue in 2018–19.

Workforce at a glance

As with any new organisation, attracting the right people and building a strong workforce culture was critical for VAHI in our first year.

When VAHI was officially established in June 2017, there were 31 members of staff. Most of these people came from the Department, as the roles they were performing moved into VAHI's remit. There has been intensive recruitment throughout the year, and the workforce has doubled as a result.

VAHI has been able to attract new staff who share our vision for helping clinicians, practitioners, health services and the public to be better informed, better use information, and ultimately improve the health of all Victorians. We are all committed to building a culture of inclusivity, one that highly values innovation, teamwork, collaboration and continual learning.

CURRENT WORKFORCE



63 employees



57% female



43% male



13% part time



46% of managers are female



54% of managers are male

TOTAL EMPLOYEES OVER TIME



31



41



52



52



63



Committees

VAHI has established committees to provide expert strategic and operational advice to the agency. These committees enhance our stakeholder engagement approaches, and help align our activities to broader Victorian health system priorities.

Agency Advisory Committee

The Agency Advisory Committee provides advice to ensure successful establishment and high performance of VAHI in relation to the Victorian Government's commitment to health reform as described in Better, Safer Care, the Minister's Statement of Expectations, Targeting zero and the Department's current and future strategic plans.

The committee, which has met quarterly since December 2017, provides guidance on VAHI's strategic direction.

The committee's membership includes health service executives, a consumer representative, a clinical lead and a performance management expert.



The Agency Advisory Committee: Belinda Macleod-Smith, Professor Terry Nolan, Maxine Brockfield, Adjunct Professor David Plunkett (Chair), Sue Shilbury, Professor David Pilcher and Dr Sue Mathews (Chris Trotman absent).

Clinical Measurement and Reporting Committee

The Clinical Measurement and Reporting Committee assists VAHI in its work supporting others to drive improvements in the quality and safety of clinical services.

The committee ensures the measurement and reporting of VAHI's clinical quality and safety and patient outcomes performance information is useful, valid, reliable and easy to interpret. This committee was established specifically to assist VAHI with the measurement and presentation of clinical quality and safety and patient outcome information.

The committee met for the first time in March 2017. Membership includes public and private sector clinicians and public health service CEOs, who were invited to join as professional representatives or individual experts.

Patient Experience and Outcomes Measurement and Reporting Committee

The Patient Experience and Outcomes Measurement and Reporting Committee assists VAHI in its work to stimulate, inform and monitor improvements in the quality and safety of clinical services.

The committee ensures there is a strategic approach to investment, and a meaningful use of data collected through Patient Reported Experience Measures (PREMs), Patient Reported Outcome Measures (PROMs) and clinical quality registries.

The Committee met for the first time in December 2017. Membership includes health service CEOs and patient experience leads, health researchers, and consumer representatives.

Board Reports Advisory Committee

The Board Reports Advisory Committee assists VAHI in its work to give board members of health services useful and easy to interpret reporting of quality and safety and patient outcomes performance information. This in turn helps ensure board members use VAHI's performance information to better fulfil their oversight and governance roles and responsibilities.

The committee met for the first time in March 2018. Membership is made up of health service board members.

Other committees

VAHI is also represented on the following external committees and groups:

- National Integrated Health Services Information (NIHSI) Advisory Committee
- Department of Health and Human Services Statewide Performance and System Oversight Committee
- Department of Premier and Cabinet Data Reform Working Group
- National Health Reform Steering Committee
- Australian Institute of Health and Welfare (AIHW) Strategic Committee for National Health Information
- Australian Institute of Health and Welfare (AIHW) National Health Information Standards and Statistics Committee
- National Data Linkage Demonstration Project (NDLDP) Steering Committee
- Performance and Enhanced Health Data Working Group (PHDWG) for the National Healthcare Agreement

Financial statements

The Victorian Agency for Health Information is an administrative office to the Department of Health and Human Services. Therefore, VAHI's financial information is presented in the financial statements of the Department's Annual report 2017–18. The annual report will be available at www.dhhs.vic.gov.au in late 2018.



Victorian
Agency for
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