

SMHS **Board to Ward** program overview 2024

Purpose

The governance and leadership role of the South Metropolitan Health Service (SMHS) Board includes overseeing continuous improvement in safety, quality and service provision. Through the **SMHS Board to Ward program**, Board members meet with and gather feedback directly from patients, carers and staff about the patient experience, patient safety and how they feel about the care provided.

Board to Ward visits demonstrate to the Board members how SMHS staff constantly strive to exemplify the SMHS values of **care, integrity, respect, excellence and teamwork**.

The SMHS Board to Ward program promotes a psychologically safe space for feedback to be provided, and reporting is used as a tool for service improvement. The SMHS Board believes it is important to listen to feedback and is committed to following up when issues are identified. Board members discuss their feedback with the relevant executive director and provide a written report of findings, with responses and actions monitored by the SMHS Board Safety and Quality Committee.



Deputy Chair Kim Gibson and Board member Colin Murphy visited Rockingham Group Hospital on Allied Health day to undertake a Board to Ward visit.



Deputy Chair Kim Gibson (second from right) and Board member Karen Brown (far left) visited ward 5A at Fiona Stanley Hospital as part of the Board to Ward program and spoke with staff and patients.

Visits

During 2024, Board members participated in a total of nine Board to Ward visits:

- Rockingham General Hospital (RGH)'s emergency department including the musculoskeletal diversion pathway and the intensive care unit (ICU)
- The oncology ward, acute medical unit and the mental health Mother and Baby Unit at Fiona Stanley Hospital (FSH)
- Fremantle Hospital (FH)'s geriatric wards and mental health service
- The Hospital in the Home community service
- The dialysis and oncology services at Peel Health Campus (PHC).

Hearing first-hand examples of successes, concerns and issues enables Board members to demonstrate their appreciation of the care and excellent service being provided at the various SMHS sites. While feedback was predominantly positive in 2024, there were some concerns raised at site visits that have since been considered and managed.

The SMHS Board appreciates the importance of directly engaging with the community and staff to identify opportunities for improving access to, and delivery of, health services. These are highlighted in the following excerpts.

Mother and Baby Mental Health Unit, Fiona Stanley Hospital

Board member comments and findings

Board members met with a range of medical and nursing staff and two patients during their visit. Staff members were friendly, approachable and willing to recommend the service to family and friends. Morale was high, with positive comments regarding teamwork and mutual respect for fellow colleagues.

There was a general acknowledgement that staffing levels were adequate, however, unplanned absences are still proving difficult to manage.

The feedback from patients was generally positive with minor suggestions for improvement. The two young mothers who spoke with Board members indicated they were initially apprehensive of being admitted to the MBU but were both pleasantly surprised with the friendly environment and settled in quickly once they arrived.

Some issues were raised around a lack of privacy at times with staff knocking and immediately entering their rooms rather than waiting, as well as feeling there was not as much support provided on weekends. Both patients believed, however, their stay was helpful and would return to the MBU should they require further support.

Emergency Department, Rockingham General Hospital

Board member comments and findings

This Board to Ward visit was unusual in that rather than speak to as many staff as possible, Board members enjoyed longer conversations with three staff members. Staff members were welcoming and eager to share feedback and all responded positively to the friends and family test regarding being comfortable with the safety and quality of care provided in the department. Staff members are longstanding, proud of their service and are clearly committed to identifying and implementing improvement opportunities. They commented on a clear escalation pathway and feeling listened to and supported by the Executive team. They were concerned about policies outside of RGH that impact their ability to transfer patients in a timely way for diagnostic tests or admission, and were keen to be consulted when policies were developed.

The limited physical capacity of the department was highlighted as the greatest risk to patient safety, which has been exacerbated by considerably more emergency presentations in recent times.

Wards 7 and 9 South (Geriatrics), Fremantle Hospital

Board member comments and findings

All staff who spoke with Board members were keen to engage and very committed to delivering the best care for their patients, which was evident in the use of "What matters to me" for each patient.

Many staff spoke of the facility and care disparity between FSH and FH. Some patients and carers were reported to have commented on the comparatively poorer facility at FH. This has been exacerbated by many patients entering the ward via FSH.

Oncology, Fiona Stanley Hospital

Board member comments and findings

Board members enjoyed a very positive visit to the FSH Cancer Centre, specifically the waiting area, chemotherapy and day treatment areas. All staff expressed their pride in working in the centre and job satisfaction. All agreed they would be comfortable for family members or friends to receive treatment in the centre. Patients were equally positive about the care they receive, stating they felt both safe and informed about their care. They were impressed by the excellence of the staff and complimentary of their overall positive experience as a patient.

Staff members who had worked elsewhere compared FSH Cancer Centre favourably and commented on a strong safety culture. Pharmacists commented on their strong integration and support within the FSH team compared to elsewhere.

Staff and patients in the chemotherapy day centre raised concerns about staff not taking their regular breaks due to the centre's busyness. Staff indicated the centre was operating at full capacity every day and was constantly under pressure. They felt this issue was one of workflow rather than of staffing shortages. Patients said that at times their treatment can be delayed because of how busy the staff are and whilst understanding of this, said it can sometimes cause an issue with their transport arrangements.

It was noted at the time of the visit that CHARM[®] implementation was imminent and much anticipated by staff, and whilst it was acknowledged will take some time to put in place it is expected to reduce duplication of effort and improve workflow, specifically reducing doublechecking of medication charts currently undertaken and the use of manual notes.

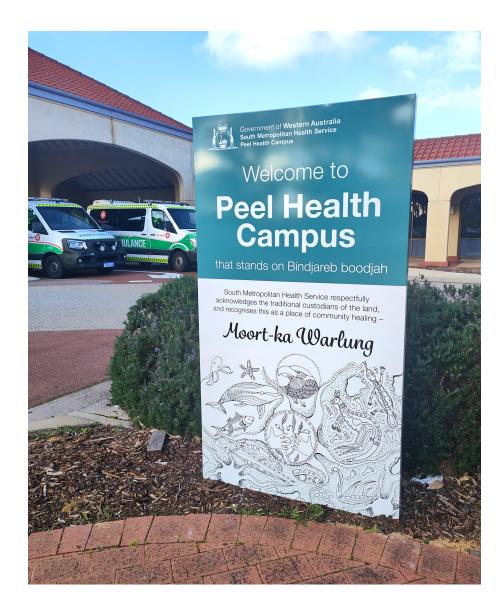
Peel Health Campus

Board member comments and findings

Board members interacted with members of the PHC Executive, Finance and the Community Advisory Group. Staff were very positive about the transition process and, while there are still areas of learning, there is also an appetite to understand how other hospitals in the public health system approach similar challenges. For example, some of the finance processes are manual and time consuming in contrast to previous systems employed at Ramsay Health Care, however the staff are keen to learn from other hospitals dealing with these challenges.

After a busy morning, the atmosphere in the emergency department (ED) was calm and professional.

The staff morale was positive, they were engaged and a there was collaborative spirit evident in staff interactions. A senior staff member confirmed the smooth transition process and



welcomed the transparency the staff now enjoy in relation to transfers within the system. The main challenges identified were easy access to simple medication resources, the physical size of the ED and lack of IT access due to the age of the infrastructure. Two patients and one family member also provide feedback to Board members. One praised the tolerant and calm behaviour of ED staff in dealing with a difficult and vocal patient earlier in the day. All were very satisfied with the care provided.

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