



Corporate Plan

2004/05 financial year

Version 3

The year 2003/04 was a year of tumult for the Commission.
Following criticism over the handling of investigations into the

Macarthur Area Health Service, there was a complete restructure of the Commission's executive. A new Commissioner was appointed at the end of March 2004.

This corporate business plan refocuses the Commission on its core business of complaint handling, investigations and prosecutions. It aims to set up sound core business processes that have been neglected in the past, processes which are essential in improving the Commission's efficiency and fairness in complaint handling.

In addition, it sets out to implement internal governance processes and establish a performance management system in order to develop the Commission as a learning and accountable organisation.

This plan is for the 2004/05 year. The Commission is undergoing major change and will produce a longer term strategic plan commencing in the 2005/06 year.

The Plan promotes our values of consistency, transparency and efficiency and focuses on our corporate goals:

- ♦ Comprehensive & responsive complaints resolution
- ♦ Quality improvement in the health system and promotion of effective complaint resolution
- ♦ Accountability for performance
- ♦ Developing a learning organisation culture that embraces continuous improvement, sharing knowledge and promotes a safe, productive and satisfying workplace
- ♦ Be a lead agency in governance and corporate infrastructure

The managers responsible for the activities listed in this Plan will be required to provide progress reports as part of the development of the Commission's Annual Report to Parliament.

I am confident we are positioned to meet the coming year's challenges and commend the commitment of staff toward these goals.

Commissioner

Vision

HCCC acts in the public interest by resolving, reviewing, investigating and prosecuting complaints about health care to maintain, promote and improve the standard of health services in New South Wales.

Values

HCCC is committed to certain fundamental values in all our interactions with health organizations, individuals and our staff. Our values are to:

- *Advance the public interest*
- *Act ethically and with integrity*
- *Be fair, impartial and accountable*
- *Strive for excellence*
- *Be tenacious and professional in pursuing our goals*
- *Respect each other and work collaboratively*
- *Provide clear, consistent and timely communication with complaints and respondents*

Environmental Factors and Challenges for 2004-05

Following the criticism levelled at HCCC's operations in 2003-04, the challenges facing the HCCC primarily relate to the implementation of reform processes commenced in 2003-04 to re-establish the Commission as a credible and trusted investigator of health care complaints and a positive change agent for improving the standard of health care. The reform program includes the following initiatives and/or outcomes:

- *Finalise the Macarthur Taskforce investigations in line with the requirements and to the standards expected by the Special Commission of Inquiry into Camden and Campbelltown hospitals*
- *Eliminate the backlog of health care complaints (312 at 30 June 2004) and establish investigations policies, procedures and performance standards and benchmarks aimed at ensuring the completion of most investigations within 12 months as well as providing transparency in the handling of complaints*
- *Contribute to legislative changes that will provide the Commission with appropriate powers to undertake the investigation and resolution of complaints in a fair, transparent and expeditious manner*
- *Realign the management and governance structures of the organisation to ensure priority attention is directed towards managing and resolving complaints, rigorously pursuing investigations and prosecuting serious cases.*
- *Re-building positive and constructive relationships with health practitioners and organisations to promote quality assurance practices in the assessment of health care complaints*

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

- *Implement a case management system that supports effective performance management and provides readily accessible case information, effective workflow planning and promotes better case management practices*
- *Gain the support of staff and the union during the reform program*
- *Implement sound financial management procedures and practices that will deliver sustainable performance results within agreed budget estimates*

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

Business Goals

Goal 1: *Comprehensive & responsive complaint resolution*

- 1.1 Comprehensive complaints resolution to ensure complaints are resolved according to the nature of the complaint and the needs of the parties; promoting fairness, timeliness, compliance and satisfactory resolution

Measure

- 1.1.1 Increase the number/percentage of complaints resolved during assessment.

Responsibility: Deputy Commissioner

- 1.2 Promote greater use of formal and informal alternate dispute resolution

Measures

- 1.2.1 Number of complaints resolved after assessment

Responsibility: Patient Support Services

- 1.3 To promote complaint resolution services provided to people in rural and regional NSW by the Patient Support Service.

Measure

- 1.3.1 Number of complaints resolved by regional Patient Support Officers

Responsibility: Patient Support Services

- 1.4 Ensure a best practice approach for all investigations

Measures

- 1.4.1 80% of investigations finalised in less than 12 months
1.4.2 Review investigation processes to ensure they are fair and transparent to all parties
1.4.3 Review recruitment and training of peers with emphasis on ensuring adherence to procedural fairness

Responsibility: Director Investigations

- 1.5 Ensure the conduct of prosecutions is fair and timely

Measures

- 1.5.1 Review prosecution guidelines to ensure procedural fairness and process transparency
1.5.2 Directions by disciplinary and appellant bodies are complied with by HCCC with deadlines

Responsibility: Director Legal

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

1.6 Development and implementation of efficient and effective complaint case management database.

Measure

1.6.1 Casemate system fully implemented by February 2005

Responsibility: Director Investigations / Manager Corporate Services

1.7 Establish records management policies and procedures to comply with State Records Act 1998.

Measure

1.7.1 Records Management Policy developed by March 2005.

Responsibility: Manager Corporate Services

1.8 Develop and implement Ethnic Affairs Priority Statement.

Measure

1.8.1 Implemented in compliance with Government policy.

Responsibility: Manager Corporate Services

1.9 Develop and implement Disability Action Plan.

Measure

1.9.1 Implemented in compliance with Government policy.

Responsibility: Manager Corporate Services

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

Goal 2: *Quality improvement in the health system and promotion of effective complaint resolution practices*

- 2.1 Promote improvement in both the provision of health care and public awareness of the resolution of complaints about health care

Measure

- 2.1.1 Establish an effective liaison with the Clinical Excellence Commission and NSW Department of Health to contribute to improved quality assurance systems.
- 2.1.2 Develop a handbook and guidelines to improve the management of complaints by health care services in cooperation with and sponsored by the Australian Council for Safety and Quality in Health Care.
- 2.1.3 Commence development of a Code of Practice under section 80(1)(i) of the *Health Care Complaints Act 1993*.

Responsibility: Deputy Commissioner/Executive Officer to the Commissioner

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

Goal 3: HCCC accountable to its stakeholders for performance

3.1 Providing timely, accurate and relevant reporting to the Minister and NSW Joint Parliamentary Committee

Measures

- 3.1.1 Develop regular management reports to the Minister on operations and performance commencing from January 2005
- 3.1.2 Develop open and meaningful communication with the JPC
- 3.1.3 No major deficiencies identified during JPC hearing into 2003-04 Annual Report

Responsibility: Executive Officer to the Commissioner

3.2 Reporting publicly about the work of the Commission

Measures

- 3.2.1 Annual Report prepared and submitted to the Minister by 31 October 2004
- 3.2.2 Annual Report reflects the key business and operational results and fully complies with legislative requirements
- 3.2.3 Promotion of HCCC messages through various communication channels:
 - Commence website redevelopment
 - Key publications revised
 - Consumer liaison strategy developed

Responsibility: Executive Officer to the Commissioner / Manager Corporate Services

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

Goal 4: *Develop as a learning organisation that embraces a culture of continuous improvement, sharing of knowledge and promotes a safe, productive and satisfying workplace*

- 4.1 Develop and implement a staff performance management system linked to business objectives/goals that includes individual learning and development plans.

Measures

- 4.1.1 Develop performance management policies & procedures by January 2005.
4.1.2 Review training and competency requirements of all positions by June 2005 as a basis for the provision of staff training and learning opportunities
4.1.3 Pilot performance agreements and performance reviews for the six months ending June 2005

Responsibility: HCCC Executive

- 4.2 Undertake an organization realignment to establish an organisation and governance structures that support the delivery of quality performance results

Measures

- 4.2.1 Establish new Divisional Structure by December 2004
4.2.2 Establish senior management positions by December 2004
4.2.3 Develop a change management program by February 2005 to implement the new organization structure including involvement of Workplace Consultative Committee in the implementation program
4.2.4 Staff consultation and recruitment action commenced by February 2005

Responsibility: HCCC Executive

- 4.3 Improve the safety of premises and provide a productive environment for staff

Measures

- 4.4.1 Review accommodation needs at the completion of the backlog of cases.
4.4.2 Develop OH&S Policy and implement OH&S Plan by June 2005
4.4.3 Undertake regular risk assessments and implement identified improvements to the workplace

Responsibility: Manager Corporate Services

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

Goal 5: Be a lead agency in our governance and corporate infrastructure

- 5.1 Develop and implement strategic planning processes that integrate all planning activities, budget preparation and regular performance reporting

Measures

- 5.1.1 Develop a Business Framework that links business plans and budgets with individual staff performance agreements
5.1.1 Prepare divisional plans in line with the goals of the Corporate Plan
5.1.2 Implement quarterly business performance reporting from March 2005
5.1.3 Review and update key corporate performance measures/indicators for implementation in 2005-06.

Responsibility: HCCC Executive

- 5.2 Establish internal management groups to plan, review and monitor performance

Measures

- 5.2.1 Develop terms of reference for key management groups (Investigations Review Panel, Executive Group, etc)
5.2.2 Implement a regular program of meetings from December 2004

Responsibility: HCCC Executive

- 5.3 Review HCCC's long term information management and technology requirements in line with the Commission's business priorities

Measures

- 5.3.1 Review and update IM&T Strategic Plan by February 2005

Responsibility: HCCC Executive/ Manager IT

- 5.4 Develop internal audit program focusing on high risk areas within the Commission

Measures

- 5.4.1 Engage qualified internal audit services provider by December 2004
5.4.2 Develop a three year audit program based on business risk assessment

Responsibility: Manager Corporate Services

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

- 5.5 Establish effective workplace relationship management practices involving consultation between management, staff and the union.

Measures

- 5.5.1 Review and negotiate new HCCC Workplace Agreement
5.5.2 Implement regular meetings of the Workplace Consultative Committee to discuss staff issues including consultation on the Commission's change management program

Responsibility: HCCC Executive

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.

Stakeholder Expectations/Accountability

The corporate plan has been developed recognizing the needs and expectations of our clients and stakeholders.

Stakeholders	Expectations of HCCC
Minister	<ul style="list-style-type: none"> ▪ effective management of its resources to deliver on agreed performance targets. ▪ Regularly report on operations and performance results
Joint Parliamentary Committee	<ul style="list-style-type: none"> ▪ Responsive and open communication on activities ▪ Reporting trends and practices in managing complaints and conducting investigations and prosecutions
Complainants	<ul style="list-style-type: none"> ▪ Adopt a rigorous approach to assessing, investigating and resolving complaints ▪ Provide clear and timely advice on the results of investigations ▪ Transparency in the way complaints are handled and investigated
Respondents	<ul style="list-style-type: none"> ▪ Procedural fairness in the conduct of investigations
Health Organisations & Practitioners	<ul style="list-style-type: none"> ▪ Opportunity to respond to criticisms raised ▪ Practical recommendations for health care service improvements
Central Agencies (e.g. NSW Treasury, Premiers Dept, etc)	<ul style="list-style-type: none"> ▪ Performance reporting that is comprehensive, meaningful, timely and an intrinsic aspect of day to day functioning of the HCCC ▪ A strong record of compliance with all regulatory and central agency reporting requirements

Business Risks

Achievement of this Plan will also depend on the management of the key sources of risk for the Commission.

The Commission has identified the following key sources of risk to the day-to-day operations undertaken by the organisation:

- organisational credibility (e.g. poor public profile, poorly handled prosecutions and Ministerial advice, unacceptable delays in handling complaints and investigations)
- interruption to service capacity (e.g. failure of IT systems);
- inadequate information or evidence collected during investigations (e.g. information leaked or improperly released, inadequate use or management of information, missed evidential opportunities);
- financial systems and advice (e.g. poor financial planning, inadequate contracts management); and
- human resources (e.g. retention and attraction of skilled staff, effective utilisation of staff resources, inadequate OH&S, industrial climate conducive to reform).

Specific controls and treatments to address these risks are identified in Divisional Business Plans.

Note: all performance indicators to be measured at 30 June 2005 unless otherwise indicated.