

HEALTH CARE COMPLAINTS COMMISSION

CORPORATE PLAN

2005-2006



CONTENTS

1.	Purpose of the Corporate Business Plan	3
2.	Key Challenges	4
3.	Planning Assumptions	5
4.	Risks	6
5.	Stakeholder Expectations	6
6.	Plan for delivery	7
7.	Outcomes	14
8.	Resourcing the Plan - 2005-06 Budget	15
9.	Conclusion	17

Appendix A – HCCC Corporate Business Risks

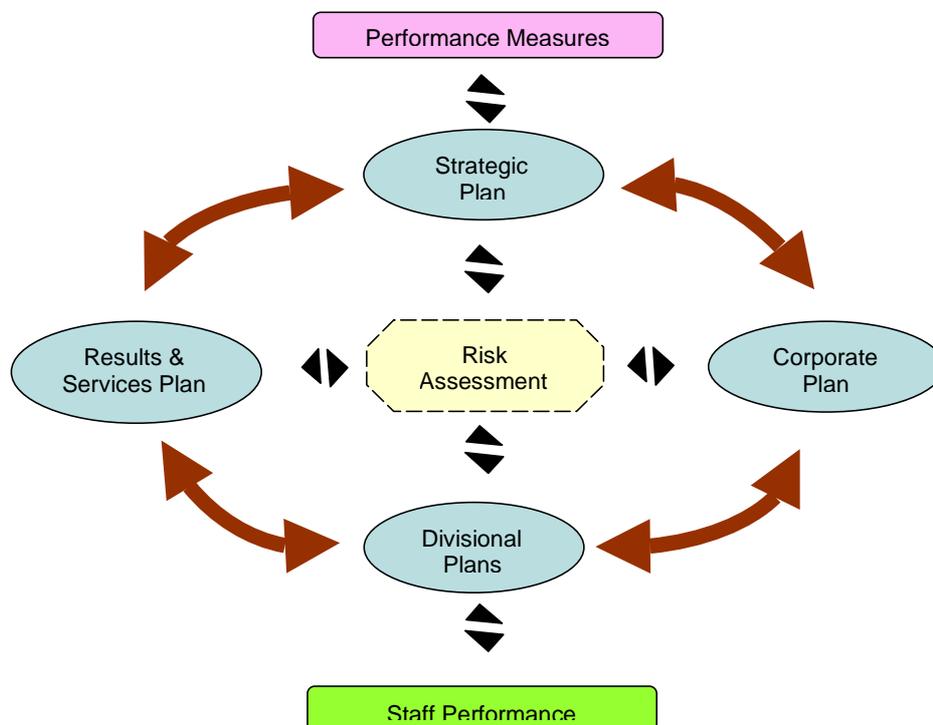
1. PURPOSE OF THE CORPORATE BUSINESS PLAN

The HCCC has been established to resolve, investigate and prosecute complaints about health care to protect the health and safety of the public.

Our mission as defined in the HCCC Strategic Plan is to:

act in the public interest by resolving, investigating and prosecuting complaints about health care to protect the health and safety of the public.

The HCCC strategic planning framework endeavours to align HCCC's Corporate Strategic Objectives and targets with both the Corporate Plan and the individual Divisional Business Plans. This framework is presented in the diagram below.



The Corporate Plan is derived from the HCCC Strategic Plan 2005-2008 and reflects the progressive implementation of the Commission's corporate strategies and directions in delivering our business targets and achieving agreed business outcomes.

The HCCC Strategic Plan comprises the following four key result areas that cover the outcomes and performance of all work undertaken by HCCC.

- Comprehensive & responsive complaint handling,
- Investigate and prosecute serious complaints,
- Accountability, and
- Our organisation.

Within each divisional business plan key result areas are linked to corporate objectives, performance measures and performance targets.

The Commission's values represent the foundation for how we will work as an organisation and with other agencies to achieve our performance targets. These values also describe the type of organisation we aspire to be:

- **Promote public health and safety:** We will seek to resolve complaints and thoroughly investigate serious complaints of poor health care
- **Be fair, impartial and accountable:** We will always deal with matters before the Commission with objectivity and impartiality and report willingly on our performance and outcomes
- **Strive for excellence:** We will constantly strive to improve, grow and work more productively;
- **Be professional in pursuing our aims:** we will pursue our objectives to their conclusion and not be diverted;
- **Respect each other and work collaboratively:** We will treat each other with respect and all those with whom we have contact; and
- **act ethically and with integrity:** We will always act with honesty, integrity and impartiality.
- **Provide clear, consistent and timely information:** We will communicate with complainants and health care providers in a clear and open manner

Annual Planning Cycle & Business Management Framework

The annual strategic planning cycle involves the following steps:

1. Review of corporate strategic direction and business risks;
2. Corporate business planning parameters for the ensuing year are determined;
3. Divisional Business Plans prepared;
4. Review and approval of all Divisional Plans;
5. Corporate Business Plan and Annual Budget prepared;
6. Review of current year's Performance Agreements; and
7. New Performance Agreements developed and agreed.

At quarterly intervals the HCCC's reviews its business performance and assesses its trends and KPI results.

The business management framework is intended to be flexible and allow the organisation to respond to changing circumstances and take advantage of favourable trends.

2. KEY CHALLENGES

The Commission's operating environment, internal and external, raises a number of challenges for the future performance and outcomes of the organisation. These challenges include:

- (a) the need for greater accountability reflected through regular performance measurement and reporting on our activities and results that meet the expectations of our key stakeholders (Parliamentary Joint Committee and the Minister for Health);
- (b) more responsive complaint handling and dispute resolution processes;
- (c) more flexible operational structures and work practices;
- (d) The need to continually develop our employees' skills and knowledge commensurate with best practice complaint resolution, investigations and prosecutions;
- (e) risk assessment and project management are fundamental and integral to all operations including a culture of awareness and compliance with privacy standards;
- (f) managing judicial decisions and changes to relevant legislation impacting HCCC legal cases;
- (g) assimilating advances in technology and new investigation techniques into operational and legal plans, procedures and systems; and
- (h) Managing the volume of complaints and ensuring assessments and investigations are completed in a timely manner;

To address the above challenges, considerable attention needs to be given to:

- the delivery of a targeted Learning and Development Program;
- the development of leadership throughout the organisation;
- leveraging our capacity to extract maximum value from our information holdings;
- risk assessment and project management becoming strong reflections of the culture of the organisation;
- the continual improvement in the way we work internally and better shared service arrangements with external agencies; and
- more innovative approaches to the allocation of operational resources supportive of an integrated matrix management approach.

3. PLANNING ASSUMPTIONS

The following key strategic planning assumptions have shaped the Commission's planning process. It is assumed that:

- the Commission's charter will continue in its current form;
- The Commission's key stakeholders will require more detailed performance and outcome information and reporting;

- the Commission will need to continue to invest resources in improving its skills and knowledge to meet the challenges posed by adopting best practice complaint resolution services and investigative and prosecution techniques to achieve successful dispute resolution and disciplinary outcomes;
- changes in information technology will provide increasing opportunities for the Commission to deliver results;
- the community will continue to value the highest standards of accountability and behaviour by health care providers;

4. RISKS

Achievement of this Plan will also depend on the management of the key sources of risk to which the Commission's operations are subject. As part of the corporate planning process strategic and operational areas of risk were reviewed

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

- inability to manage organisation reform and redevelopment (e.g. unacceptable delays in handling matters, poorly handled investigations or prosecutions)
- Interruption to service capacity (e.g. failure of IT systems);
- financial systems and advice (e.g. poor financial planning, inadequate contracts management);
- human resources (e.g. retention and attraction of skilled staff, motivated staff, adequate OH&S, etc.); and
- organisational credibility (e.g. poor public profile, poor advice,).

Specific controls and treatments to address business risks have been identified in Divisional Business Plans.

5. STAKEHOLDER EXPECTATIONS

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 &	<ul style="list-style-type: none"> ▪ Opportunity to respond to criticisms raised ▪ Practical recommendations for health care service improvements

Stakeholders	Expectations of HCCC
Practitioners	
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

6. PLAN FOR DELIVERY

The Corporate Business Plan has been developed to meet what the Commission has assessed as the priorities for the effective delivery of its mission. The challenge for HCCC is to ensure that the strategies and their resourcing are adequate to achieve the Commission's objectives and to deliver the targeted outcomes and results.

The Commission's Business Structure is designed around the delivery of the services and activities that support the corporate objectives and key result areas. This planning approach flows down through divisional business plans to individual staff performance agreements ensuring appropriate levels of accountability and ownership of the Commission's objectives and targets.

For 2005-06 key performance indicators have been developed by divisions for their major activities. The performance of the Commission is reviewed on a quarterly basis with Divisional reports to the Executive Group on the achievement of business targets and initiatives and KPI results.

The following pages set out the plan to deliver the objectives of the HCCC Strategic Plan. For each of these objectives, a range of strategies and performance targets/measures have been developed and are listed.

Objective	Strategies	Performance measures and targets
COMPREHENSIVE AND RESPONSIVE COMPLAINT HANDLING		
<ul style="list-style-type: none"> ➤ Efficient and timely processing and assessment of complaints 	<ul style="list-style-type: none"> ➤ Employ best practice complaint handling processes by: <ul style="list-style-type: none"> - improving assessment briefing format and assessment guidelines - contacting complainant, respondent and clinical advisor to maximise opportunity for less serious complaints to be mutually resolved - timely communication of assessment processes and outcomes ➤ maintain & improve capability of Casemate as a case management and decision support tool 	<ul style="list-style-type: none"> ➤ Number of complaint assessments finalised ➤ % of complaints assessed with 60 days ➤ % of complaint's assessed subject to a request for review ➤ % of complaints where outcome is coded "resolution between parties" ➤ % of matters referred for investigations ➤ improved performance reporting within Casemate system for performance & trend analysis ➤ complete business analysis and design specification for next phase of Casemate development
<ul style="list-style-type: none"> ➤ Promote greater use and increased confidence in formal and informal complaint resolution 	<ul style="list-style-type: none"> ➤ Develop assessment criteria that identify those matters that may benefit most from assisted resolution ➤ Resolution assistance plans (RMP) developed for assisted resolutions 	<ul style="list-style-type: none"> ➤ % of matters resolved or partially resolved by complaint resolution service (CRS)
<ul style="list-style-type: none"> ➤ Promote complaint resolution services provided to people in rural and regional NSW by the CRS and Health Conciliation Registry 	<ul style="list-style-type: none"> ➤ CRS officers meet with local and regional community and support groups to promote Commission activities ➤ HCR registrar monitors conduct of conciliation ensuing professional behaviour, informed decisions and engagement of parties without undue pressure or influence ➤ Develop improved community and public sector information reporting of case performance and information. 	<ul style="list-style-type: none"> ➤ Number (percentage) of complaints resolved by regional CRS officers ➤ Number of conciliation matters referred to Health Conciliation Registry (HCR) ➤ % of HCR matters where agreement/partial agreement reached
<ul style="list-style-type: none"> ➤ promote public awareness of the assessment and resolution of complaints 	<ul style="list-style-type: none"> ➤ Implement an external communications strategy including updated promotional materials. 	<ul style="list-style-type: none"> ➤ Number of new/redesigned publications ➤ Website publications/materials updated

Objective	Strategies	Performance measures and targets
about health care	<ul style="list-style-type: none"> ➤ CRS officers meet with community and support groups to promote Commission activities 	<ul style="list-style-type: none"> ➤ Number of community groups and extent of networking
INVESTIGATE AND PROSECUTE SERIOUS COMPLAINTS		
<ul style="list-style-type: none"> ➤ Ensure a best practice approach for the conduct of investigations 	<ul style="list-style-type: none"> ➤ Apply a comprehensive approach to investigations and inquiries using a range of appropriate investigative techniques including development and approval of investigation plans and implementation of risk management practices for conducting investigations ➤ Develop a consistent approach to the application of expert medical advice (Dec05) ➤ Monitoring investigations to ensure statutory compliance, timeliness, reassessment of issues including status reports to Investigations Report Group ➤ Establish training program for investigators (Dec 05) ➤ upgrade Investigations Manual (Dec 05) - procedures in line with new investigatory techniques, compliance with standards and improved case management ➤ develop procedures/protocol for the hand over of cases for prosecution to Legal Division 	<ul style="list-style-type: none"> ➤ Number of investigations completed ➤ Number of Investigations open ➤ Guidelines implemented ➤ Reduce average number of days taken to complete investigations ➤ Training program implemented ➤ Investigations Manual re-issued ➤ Number of referrals for consideration of disciplinary action
<ul style="list-style-type: none"> ➤ Successful prosecution and exposure of serious cases of unsatisfactory health care in a fair and timely manner 	<ul style="list-style-type: none"> ➤ timely and high quality legal advice provided throughout investigations ➤ Implement a quality review program for the management of investigations ➤ Timely determinations made to prosecute ➤ Compliance with HCCC Act & other legal requirements for determination of prosecution action ➤ Further development of Casemate to cover the conduct of legal proceedings ➤ Ensure compliance with directions given by PSC's, Tribunals, Boards of Inquiry and courts ➤ Timely listing of matters for hearing 	<ul style="list-style-type: none"> ➤ % of legal responses provided within 21 days ➤ Recommendations to improve investigation/ legal processes implemented & Manual updated ➤ % of matters determined within 3 months of referral (80%) ➤ No successful legal challenges ➤ Business analysis completed and system specifications prepared ➤ % of compliance with deadlines (80%)

Objective	Strategies	Performance measures and targets
<ul style="list-style-type: none"> ➤ Improve health care systems through recommendations from investigations. 	<ul style="list-style-type: none"> ➤ Ensure practical recommendations are made to improve health care systems 	<ul style="list-style-type: none"> ➤ % of recommendations implemented
ACCOUNTABILITY		
<ul style="list-style-type: none"> ➤ Provide timely, accurate and relevant reporting to the Minister & NSW Joint Parliamentary Committee. 	<ul style="list-style-type: none"> ➤ Monthly reporting on progress of reform program and major issues to Minister ➤ Develop and maintain open and meaningful communication with the JPC. 	<ul style="list-style-type: none"> ➤ Positive response to reports by Minister ➤ JPC consulted about options to improve Commission responses to JPC enquiries. ➤ Effectiveness and efficiency of response framework monitored.
<ul style="list-style-type: none"> ➤ Ensure all business activity complies with all regulatory requirements and standards requirements. 	<ul style="list-style-type: none"> ➤ Ensure appropriate compliance strategies for all aspects of the Commission's operations. ➤ All regulatory requirements (for HCCC and agencies with which we work) included in business plans 	<ul style="list-style-type: none"> ➤ Policies upgraded and procedures for the management of records in line State Records and privacy requirements completed ➤ No breaches of regulatory requirements and central agency reports completed on time
<ul style="list-style-type: none"> ➤ Report publicly about the work of the Commission 	<ul style="list-style-type: none"> ➤ Annual Report of the HCCC reflects the key business and operational results for the year and fully complies with legislative requirements ➤ Provide various communication channels for promoting and reinforcing HCCC messages <ul style="list-style-type: none"> ▪ Website ▪ Annual Report ▪ Media liaison 	<ul style="list-style-type: none"> ➤ Annual report prepared and tabled in Parliament by 31 October. ➤ Clean audit certificate achieved for annual financial statements ➤ No major deficiencies identified during JPC hearing ➤ Number of new publications ➤ Number of website visitors
OUR ORGANISATION		
<ul style="list-style-type: none"> ➤ Continue to develop as a learning organisation that embraces as a culture of continuous improvement, excellence and sharing of knowledge. 	<ul style="list-style-type: none"> ➤ Implement staff performance management system including staff learning and development plans that address technical and management skills. ➤ Develop the organisation's skills capability to meet expected performance requirements. 	<ul style="list-style-type: none"> ➤ Each performance agreement demonstrates a direct link to Corporate/ Divisional Business Plans and/or position accountabilities. ➤ Comprehensive learning plans implemented that include training in core competencies and management & leadership skills ➤ Management and supervisory training structured to develop leadership potential.

Objective	Strategies	Performance measures and targets
<p>➤ Provide a safe, equitable, productive and satisfying workplace.</p> <p>➤ Be a lead agency in our governance and corporate infrastructure</p>	<p>➤ Foster a culture of supportive leadership across the organisation and regular use of cross-Divisional teams for all types of investigations and corporate projects</p> <p>➤ Develop and maintain an organisational culture which promotes equity, diversity and safety.</p> <p>➤ Provide information and records systems that actively support and improve business processes.</p> <p>➤ Improve levels and timeliness of internal communication throughout the organisation.</p> <p>➤ Establish internal management groups to plan, review and monitor performance</p> <ul style="list-style-type: none"> ▪ Executive Management Group ▪ Investigations Report Group ▪ IM&T Steering Committee ▪ OH&S Committee ▪ Divisional meetings, etc. 	<p>➤ Upgrade induction program to provide greater coverage of business systems and processes</p> <p>➤ Wide cross-section of staff from all Divisions participate in the preparation of annual business planning.</p> <p>➤ Risk assessment plans developed for offsite investigations</p> <p>➤ OH&S plan developed and monitored.</p> <p>➤ EEO and disability plans developed and improvement measures monitored closely.</p> <p>➤ Effective implementation of the IM&T Strategic Plan.</p> <p>➤ Review of records management requirements completed</p> <p>➤ Policies upgraded and procedures for the management of records in line State Records and privacy requirements completed</p> <p>➤ Achieve compliance with information security standards</p> <p>➤ Develop business continuity plans</p> <p>➤ Regular general staff briefings on events, outcomes, activities, changes, significant organisational changes etc.</p> <p>➤ Regular briefings by Directors to direct reports who conduct subsequent team briefings.</p> <p>➤ Copies of key corporate documents distributed to all staff and/or included on the intranet</p> <p>➤ Regular meetings held, performance monitored and recommended business improvements implemented</p>

Objective	Strategies	Performance measures and targets
<ul style="list-style-type: none"> ➤ Monitor our performance to ensure work quality and effective resource management 	<ul style="list-style-type: none"> ➤ Implement a strategic planning process that integrates all planning activities, budget preparation and regular performance reporting. ➤ Review/Develop/monitor key performance measures for efficiency and effectiveness ➤ Implement financial and business management policies and procedures and regular performance review and reporting ➤ staff performance management system 	<ul style="list-style-type: none"> ➤ Annual cycle for strategic planning process completed for corporate and divisional levels. ➤ Quarterly Business reports to the Executive on business performance showing achievement of business plan targets/results. ➤ Monthly financial management and staffing reports showing projects and activities achieved on time and within budget. ➤ Quarterly Business reports to the Executive on business performance showing achievement of business plan targets and performance results ➤ Performance agreements developed for all staff.

7. OUTCOMES

The key outcomes that will result from the implementation of the Corporate Plan 2005-2006 are:

Comprehensive & Responsive Complaint Handling:

- A far stronger complaint assessment capacity that is directed towards resolution of less serious complaints between the parties.
- Data holdings capable of providing sophisticated levels of analysis.
- Best practice complaint handling, resolution and conciliation processes.
- An organisation with strong and respected external working relationships able to influence improvements in the standard of health care.

Investigate and Prosecute Serious Complaints:

- Best practice investigations, case management and prosecution processes
- An organisation with a strong and very credible public profile for pursuing concerns on the standard of health care.

Accountability:

- Responsive and open communication with the Minister and Joint Parliamentary Committee.
- Performance reporting that is comprehensive, meaningful, regular and an intrinsic aspect of the day-to-day functioning of the organisation.
- A strong record of compliance with all regulatory requirements for all operations and functions undertaken by the Commission.

Our organisation:

- A governance structure that supports the planning and achievement of quality operational outcomes.
- An easily understood and accepted system of performance appraisal for all staff.
- Strong involvement of all staff in the preparation of the Commission's annual plans and staff focused on the achievement of quality results.
- A safe and productive work environment with no serious accidents or injuries and supported by a culture of fairness, equity and diversity.

- Improvements to business processes through better application and utilisation of information systems.
- Greater levels of ongoing communication across, and at all levels throughout, the organisation.
- Continuous improvement in teamwork and leadership.
- Greater matching of available skills with those required by the organisation through learning and development.
- High levels of competency in project management and risk assessment across the organisation.

8. RESOURCING THE PLAN - 2005-06 BUDGET

The funding of the operations of the Commission is provided through the NSW Treasury forward estimates process. The internal allocation of these funds to business activities was determined following a thorough strategic corporate planning assessment and the detailed business plans prepared by Divisions of the key initiatives and activities proposed for 2005-06.

The Commission's annual recurrent expenditure budget for 2005-2006 is approximately \$10.5 million of which \$9.42 million is directly funded from the NSW Budget and the balance being met from other income and non-cash items such as depreciation and those items directly contributed by the NSW Government such as long service leave, superannuation, etc.

Corporate Level Recurrent Budget

The Commission's 2005-06 budget is derived from the Treasury Budget and is compared to the Commission's 2004-05 budget as follows:

	Budget 2004-05	Budget 2005-06
	\$	\$
Employee costs	8,390,000	7,084,000
Other Operating Expenses	3,490,000	3,047,000
Depreciation	158,000	339,000
Total Expenses	12,038,000	10,470,000
Projected income	338,000	337,000
Non-cash items & reimbursements	762,000	527,000
Recurrent Allocation	10,569,000	9,423,000

Business Activity Budget

The 2005-06 Budget requirements presented by service area/activity is as follows:

Service Area/Activity	Employee Costs \$'000	Operating Expenses \$'000	Total \$'000	Staff Numbers FTE
Executive Services	420	35	455	3.0
Investigations	2,348	156	2,505	26.6
Legal Services	1,291	765	2,056	15.0
Complaint Assessment	931	27	958	13.0
Complaint Resolution	978	36	1,014	12.0
Conciliation Registry	164	97	261	2.0
Corporate Services	677	397	1,074	9.9
Commission-wide costs#	274	1,505	2,122	
	7,084	3,386	10,470	81.5

Commission-wide costs include workers compensation, long service leave, rental, audit fees, leases, insurance, training, office supplies, communications, etc.

Resource requirements for each area have been identified by taking into account the demands placed on the Commission to deliver this Plan and the intended outputs/outcomes.

For 2005-06 approximately 66% of recurrent expenditure is devoted to salaries and associated on-costs. Of the remaining amount, much is committed expenditure such as property and equipment rental, maintenance, insurance, security, electricity, telephones, etc, leaving approximately \$1.8m (11%) discretionary funding that can be reallocated between priority activities.

The ongoing issues for resource funding are:

- maintaining the Commission's ongoing financial viability within the annual budget allocation process from NSW Treasury;
- salary increase for 2005/06 (4% in budget) and wage increases of 4% for 2006-07 and 2007-08;
- the need to develop information systems, networks and technology to improve access to stored information; and
- funds available to meet the cost of ongoing upgrading of staff skills (technical training, risk assessment, project management, leadership and management training, etc).

Capital Projects

The Capital Budget for 2005-06 is \$118,000 for the replacement of leased IT equipment. However, the recently revised ICT Strategic Plan has identified a number of major projects that need to be undertaken during 2005-06. NSW Treasury will be approach for approval to undertake the priority projects including the upgrade of the Computer room, redevelopment of the internet, etc, drawing upon the cash reserves of the Commission.

8. CONCLUSION

HCCC's 2005-06 Corporate Plan:

- provides the blueprint for the Commission's operations for 2005-06 based on a range of strategic outcomes which will continue to build the organisation's immediate and long term capability to deliver its statutory charter;
- will deliver improved quality of outcomes in terms of timeliness, cost and quality; and
- will result in an organisation focused on improving all levels of performance.