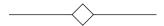
#### REJOINDERS

Australian Health Review sought the following replies to the commentary 'Why a traditional health outcomes approach will fail in health care and a possible solution' by Lesia Gale.



## And the winner is...'system'!

### Тім Ѕмутн

Tim Smyth is Deputy Director-General, Policy, New South Wales Department of Health.

Gale's paper is an interesting one that challenges and frustrates. The assertions made are often right, but for the wrong reasons at times. I have more faith in the potential of approaches focused on improving health outcomes but share the concern that we do not have in place the structures and processes required to achieve them. Quality improvement is not a substitute for improved health outcomes; it is a key tool to achieve them. We need both.

Why things happen in Australian health care is still much of a mystery. Why is it that some developments, technologies or research findings rapidly diffuse into health care delivery policy and practice and yet others take years, if at all? Unfortunately, we do not yet spend enough time on research into changing behaviour in health care. What is it that influences changed behaviour? How can we facilitate positive change and discourage change that does not improve health outcomes? The point is well made that we spend a lot of time on the collection of data and the development of policies but precious little on how to effectively implement the results. More work needs to be done if Australian health care is to become a 'learning organisation'.

There are two key points that Gale's paper highlights: translating knowledge into practice and the importance of systems. The quality improvement pathway, whether ISO, AQA, EQUIP or whatever, is an essential tool to help translate knowledge into practice and to build a sense of system in Australian health care. Process improvement by itself is not enough. You need the right process and this is where a health outcomes approach comes in. Through the use of both you get synergy. While reading the paper a word kept recurring – 'system'. To achieve quality you need to focus on processes and system improvement. To achieve a better health outcome you need to build effective health care systems providing integrated high quality care. This is a key challenge facing Australian health care – how do we build a health care system?

Unfortunately, Australian undergraduate and postgraduate training does not place enough emphasis on system. Our health professionals are still trained in isolation from other professions. Many students get very little exposure to the many parts of the system. They do not have much opportunity to follow the path of chronic illness or the interaction of families, people with mental illness and the frail aged with the wider dimensions of our human services delivery 'systems'. The teaching and practice of the principles of quality improvement are also largely absent.

Another important tool that assists in creating a system is clear sense of direction. A good corporate plan, appropriate to the organisational level involved, provides the framework for the quality improvement and system building processes. Perhaps this is another factor behind the failure of both health outcomes and quality improvement projects?

Many Australians can recall the words of the International Olympic Committee President when announcing the winner of the right to host the 2000 Olympics. Hopefully, we might be able to also announce in due course that in Australian health care, 'the winner is...system'!

# Are we ready for change?

## CATHY O'HARA

Cathy O'Hara is CEO/Director of Nursing, Linacre Private Hospital, Melbourne.

There is no doubt that improved knowledge of health outcomes and their causation will lead to improved care at a lower cost. The question is: How prepared are we to accept the challenge that ultimately demands change in an industry that until recently was steeped in tradition?

Gale's paper clearly identifies that the principles of total quality management still apply in health care, but that they are less easily implemented. The health system is changing at an ever-increasing rate and, to that effect, it is easier to go for the quick fixes, rather than using the more resource-intensive approach that underpins the principles of total quality management.

Although understanding variation will lead to a greater knowledge of key drivers within health care, the mass collection of data will only ever be as good as the systems that are in place to support and encourage the required improvements. The look-good approach is often easier, even if it is ineffective or, in fact, useless.

Changing the mindset of how care is delivered is not something that will happen overnight. In particular, it takes away the burden of examining how processes really work and the role that individuals play. Placing blame is often used as an outcome and this, though human nature, does lead to punitive action replacing process improvement. The development of health outcomes practices demands a collaborative approach that is robust and not merely a paper shuffling exercise. Getting individuals to work together requires commitment, removing barriers and introducing trust. Focusing on the process instead of the individual takes longer, is more complex and certainly more time-consuming. Gale's comments on policies and procedures are accurate and apply to most institutions, but are not ones often discussed.

Stating that staff within the health system are tired and unsupported is not absolute, and many administrators know that it is only through the development and support of their staff that change can be implemented and maintained. What is more difficult is the need to allow staff to be involved in decision-making and, in effect, that demands a shift in the balance of power. There is no doubt that in this they feel frustrated and unsupported. The first step towards a solution is in the hands of administrators, first to provide leadership and embrace change themselves. Regardless of what methodology is used, the basic elements of quality management still apply.

In summary, Gale's paper is thought-provoking and identifies a number of questions that we all struggle to find answers to...What is quality care and does it actually exist?