# Project to establish systems & processes for the introduction, monitoring & reporting of new Technologies/Clinical Practices at Southern Health

| Drivers for change Environmental factors | Inputs/resources | Need/Gap | Evidence of need/gap |
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| Advances in new health technologies | Preliminary work done by Southern Health (NCPC) | Limited explicit criteria for decision-making | Existing application form did not address all DHS criteria |
| Greater consumer expectation & demand | DHS Guidance documentation | Limited transparency in decision-making process | Lack of documentation for how/why decisions were made & record of actual decisions |
| Increased requirements for transparency and accountability in health service processes | Executive level endorsement | Lack of awareness of requirements for applications | TCPs introduced without applications |
| Increased requirements for evidence-based decision-making | Technology/Clinical Practice Committee | Need for accessible application materials | Difficulty accessing materials as expressed by applicants |
| Finite resources | Secretariat Service<br>Executive Officer Administration | Lack of appropriate and representative views in decision-making | Limited availability of Committee members to attend meetings at short notice |
| | | Inadequate preparation time for Committee members to review applications | Applications provided to Committee members 24 – 48 hrs before meeting |
| | | Lack of understanding of Evidence-Based Practice and/or lack of resources | Applications contained inappropriate information to establish evidence of effectiveness |
| | | Lack of electronic communication resulting in inefficiency and inconsistency | All correspondence in hard copy |

| Drivers for change Local factors |
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| Southern Health leadership in management of new TCPs through TCPC |
| Southern Health expertise in EBP through CCE |
| DHS Directive for Health Service TCPCs |

| Components | Activities | Deliverables | | | Short Term Outcomes | | Intermediate Outcomes | | Measures/ indicators | | | |
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| | Map current best practice (national/ international) | Identification of elements of best practice | | | Utilised information in establishment of TCP Program | | Compliance with best practice | | Measures of elements of best practice | | | |
| **Governance** | Establish overall process & documentation | TOR for TCPC | SH Protocol for TCP applications | SH Flowchart for TCP applications | TOR enacted | | Increased transparency of TCPC purpose & boundaries | Ensured sustainability of the SH TCP Program | Attendance at meetings | Compliance with responsibilities | Meeting reporting requirements | Structure, Skills, Resources, SH commitment in place ✦ SH TCP Program utilised |
| **Application for new TCPs** | Establish application process & documentation in accordance with DHS requirements | Meeting schedule and application deadline | New TCP application form | Process of appeal/ conflict reolution | Application process & documentation established in accordance with DHS requirements | | Appropriate representation at TCPC meetings | Comprehensive applications submitted | Appropriate representation at TCPC meetings | Number of applications received | Number of applications completed correctly at first submission | Applicants satisfaction surveys/feedback form |
| **Decision-Making** for introduction of new TCPs & subsequent review | Establish decision-making process & documentation | Decision Summary for initial approval | Conditions of Approval | Certificate of Approval (provisional – subject to monitoring) | Use of explicit criteria in decision-making | Decision-making process and documentation established for new TCP Applications | Increase in transparency of decisions made & applications approved | Increase in transparency of TCPs considered standard practice at SH | Were all criteria addressed | Was the decision summary utilised for all applications | Were all decision summaries published | Was compliance with conditions of approval received by due date |
| | | Decision Summary for review of approved TCPs | Certificate of approval as standard practice | Certificate of Approval | Decision-making process and documentation established for revised TCP Applications | | | | Were all criteria addressed | Was the decision summary utilised for review of applications | Were reviewed decision summaries published | Were certificates of approval for standard practice sent |
| **Monitoring & Reporting** of newly introduced TCPs | Establish monitoring and reporting process & documentation | Reporting instructions for applicant | Outcome spreadsheet template | Progress Report Template | Process & documentation established for monitoring & reporting of approved TCPs | | Receipt of patient outcomes information | | Number of applicants who used our outcome spreadsheet | Number of applicants who sent all reporting information by due date | Number of reporting templates completed correctly | Feedback results from applicants |
| | | Reports to EMT Template | Reports to DHS Template | | | | Reports sent to EMT & DHS | | Evidence of reporting to EMT & DHS | Feedback re: appropriateness of reporting | | |
| **Resources** | Develop support systems & resources documents | Provide support in coding, evidence & business cases | TCPC Website | | Appropriate & relevant resources developed | | Utilisation of all resources by SH Staff | | Feedback from applicants re quality of resources | Consent Forms present in Patient Record | Feedback re accessibility of resources | Patient survey: Did you receive Patient Information |
| | | Patient Information and Consent Templates | 'Finding the Evidence' step-by-step guide | | | | | | Quality of resources: Requests for use | | | |
| **Administration** | Establish administration process & documentation | Checklist of actions & timelines | Template folders for all hardcopy & electronic documentation | Templates for TCPC Agendas & Minutes | Administration documentation developed | | All new applications handled in the same way | | | | | |
| | | Data Management System | Electronic calendar for due date reminders | Register of applications (electronic) | Data management system developed | | Transparency in stages applications are at | | | | | |
| | | Reporting Database | | | | | | | | | | |
| **Evaluation & Quality Improvement** | Establish the process & documentation for Evaluation & Quality | Schedule of evaluation activities | Plan of quality improvement activities | Feedback forms | Process & documentation for evaluation & quality improvement established | | Evaluation of SH TCP Program | Quality improvement of SH TCP Program undertaken | Modification or reinforcement of program based on evaluation | Search to determine if systems were used elsewhere | Number of requests received to use SH TCP Program resources/expertise | Number of new TCPs introduced without application |
| | Identify Barriers & Enablers | | | | | | | | | | | |
| | Pilot | VPACT applications | Review of VPACT process | Feedback forms | | | | | | | | |
| | Dissemination & implementation | Letters to all managers, dept/unit heads, SMS re process & responsibilities | Articles in Southern Health newsletters | Publish Decision Summaries on the website | Profile of TCP Program established at SH | | SH Staff aware of SH TCP Program | | | | | |