Like never before, health services operate in a rapidly changing healthcare environment. This strategic plan is our response to define who we are and where we want to go.
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Across our diverse organisation, we value and respect life from beginning to end.

We provide treatment, care and compassion to the people of Melbourne and Victoria. Our research and education programs advance the science of medicine and health and contribute to innovations in treatment and care. Through partnerships we build our knowledge and share it with the world.
Our purpose

To improve the lives of our patients and their families, our communities and humanity.

Our beliefs

Patients are the reason we are here – they are the focus of what we do.

Respect, support and compassion go hand in hand with knowledge, skills and wisdom. Safety and care of patients and staff are fundamental.

We work together. We all play vital roles in a team that achieves extraordinary results.

How we do things is as important as what we do.

Excellence is the measure we work to everyday. Through research and education we set new standards for tomorrow.

We share ideas and demonstrate behaviours that inspire others to follow.
Our new beliefs are at the heart of our organisation and will unite us through the life of this plan.

Message from the Chairwoman and Chief Executive

Our call today and into the future is constant: to be the safest and most trusted partner in healthcare. Our local communities, vulnerable groups, patients with complex care needs and people suffering major trauma rely on us every day to help improve their lives.

Like never before, health services operate in a rapidly changing healthcare environment. This strategic plan is our response to define who we are and where we want to go.

To help answer these questions, not only were our staff given a voice, they were asked to define the very beliefs that achieve outstanding patient care. These beliefs are at the heart of our organisation and will unite us through the life of this plan.

Once again in 2015, Alfred Health was crowned Premier’s Health Service of the Year (Large health service). This is Victoria’s highest honour for a public healthcare service. We are indebted to staff for their ongoing commitment and know that we commence this new chapter in the very best of hands.

Whether we go back one year or to our very beginning 145 years ago, our founding position remains the same: we are here for our patients. That ethos will guide us through this next incarnation.

We have set an ambitious agenda for transformation that will be planned and assessed annually, and we hope to achieve world leading innovations that bring a national and international spotlight to our work.

We will redefine what a health service can achieve, aspiring to complete three significant flagship projects that will set new standards for tomorrow.

Reflecting our new purpose and beliefs, Alfred Health’s strategic plan 2016–20 has adopted a new style.

Importantly the plan is supported by the Hon. Jill Hennessy MP, Minister for Health; our Board, Executive and staff, the Department of Health and Human Services, partners and funding bodies.

Ms Helen Shardey
Chairwoman, Board of Directors

Professor Andrew Way
Chief Executive

An ambitious agenda for transformation
Strategic goals and objectives

1 Goal: Provide high-quality patient-centred care

Objectives:
› Build on a culture of patient-centred care including effective engagement with patients, carers and our community
› Partner with consumers to develop policies for providing safe, timely and effective practice particularly with vulnerable groups
› Provide high quality and culturally sensitive end-of-life care that supports patients to live and die with dignity
› Provide accessible, high-quality and collaborative community and ambulatory services
› Meet and exceed National Safety and Quality Health Service Standards and maintain our accreditation
› Improve patients’ experience of meals.
Strategic goals and objectives

2 Goal: Lead innovative specialist care nationally and internationally

Objectives:
› Encourage innovation and creativity in the continued development of clinical specialties
› Attract and retain clinical leaders of international standing in partnership with our academic and research partners
› Build clinical team leadership and ward governance
› Invest in and strengthen our statewide and national specialty services
› Benchmark and improve specialist performance against international providers
› Grow activity through clinical networks and partnerships with regional communities and metropolitan health services
› Continue to build partnerships with specialist providers to deliver the best care in our community.

3 Goal: Engage with our diverse community to promote mental and physical health and wellbeing

Objectives:
› Work directly with primary care providers as well as through the Primary Health Network and Primary Care Partnership to improve service coordination and integrated care, particularly for patients with chronic and complex conditions
› Tackle population health priorities with our healthcare partners to focus on overweight and obesity, substance abuse, road trauma, homelessness, end-of-life care and family violence
› Ensure that diverse and vulnerable population groups have equitable access to appropriate healthcare
› Partner with community and non-government organisations to promote mental wellbeing
› Develop and implement the Alfred Health Reconciliation Action Plan
› Provide statewide leadership of prevention programs in health services.

4 Goal: Promote a healthy, respectful and safe workplace and a skilled, engaged and compassionate workforce

Objectives:
› Make all Alfred Health environments physically and psychologically safe and healthy workplaces
› Invest in the professional development of our workforce
› Further develop undergraduate, post-graduate and specialist education and training programs across all disciplines
› Continue to improve staff capacity to collaborate in decision-making with patients and carers to provide patient-centred care
› Work with staff to further build values and respect within and across the workforce and promote staff mental health
› Develop, implement and evaluate new workforce models that support patient care.
5 Goal: Lead excellent, innovative and collaborative health research

Objectives:
› Grow Monash Partners Academic Health Science Centre into a globally recognised leader in translational health research for the benefit of our patients and communities
› Continue to develop the Alfred Medical Research and Education Precinct (AMREP) as a world-leading precinct integrating research, education and clinical services
› Improve health service delivery through greater use and sharing of data
› Build capacity to share Alfred Health’s capabilities nationally and internationally.

6 Goal: Deliver a modern and technologically-enabled work and hospital environment

Objectives:
› Design and create environments that promote the health of patients and their carers
› Implement an Electronic Medical Record to improve safety and quality of care and operational efficiency
› Establish a core set of digital communication platforms for both clinical and non-clinical purposes
› Plan to replace the Caulfield Breezeway wards with new facilities, delivering improved healthcare and operational efficiency
› Plan to build the St Kilda wing, upgrade the Emergency and Trauma Centre and complete the Virtual Library Project at The Alfred
› Build the new Sandringham Day Surgery Centre, financed through community fundraising.

7 Goal: Manage our resources and environment sustainably

Objectives:
› Continue to use redesigning care methodology to significantly improve care streams and program productivity
› Improve environmental sustainability through waste management, recycling and smarter energy use and through sustainable design of facilities
› Continue to improve productivity to provide financial sustainability and capacity to invest
› Invest in revenue optimisation initiatives to maximise revenue from public and private sources
› Work with funding bodies to ensure adequate and appropriate resources are available to deliver agreed activity and standards.
SEVEN GOALS
AND 40 OBJECTIVES
TO ACHIEVE THE NEW STRATEGIC PLAN

Alfred Health’s Strategic Plan for 2016–2020
was endorsed by the Alfred Health Board on
3 February 2016.

Strategic Goal 1:

PROVIDE HIGH-QUALITY PATIENT-CENTRED CARE

Strategic Goal 4:

PROMOTE A HEALTHY, RESPECTFUL AND SAFE WORKPLACE AND A SKILLED, ENGAGED AND COMPASSIONATE WORKFORCE

Strategic Goal 5:

LEAD EXCELLENT, INNOVATIVE AND COLLABORATIVE HEALTH RESEARCH
Strategic Goal 2: LEAD INNOVATIVE SPECIALIST CARE NATIONALLY AND INTERNATIONALLY

Strategic Goal 3: ENGAGE WITH OUR DIVERSE COMMUNITY TO PROMOTE MENTAL AND PHYSICAL HEALTH AND WELLBEING

Strategic Goal 6: DELIVER A MODERN AND TECHNOLOGICALLY ENABLED WORK AND HOSPITAL ENVIRONMENT

Strategic Goal 7: MANAGE OUR RESOURCES AND ENVIRONMENT SUSTAINABLY
Flagship projects

**We will focus our efforts on three flagship projects over the life of the strategic plan that will transform the health service:**

1. eTQC
2. St Kilda wing
3. Respect and quality improvement
Three flagship projects to transform our health service

1. **eTQC**
   
The eTQC (electronic Timely Quality Care) project will see Alfred Health continue and complete the transition from paper-based methods to an Electronic Medical Record (EMR) supported by real-time data capture.

   Converting to a ‘paperless’ enterprise will be the largest technology-related transformational undertaking that our organisation has pursued to date, but the ability to manage clinical activities in real time is highly valued by our staff, both clinical and nonclinical.

   The potential for a comprehensive, enterprise-wide EMR to transform our organisation’s clinical care practices and reduce variation is profound. Implementing a full-scale EMR or Clinical Information System across all areas of Alfred Health is a challenging task that will require robust planning, strong management, clinical leadership, supportive staff and significant capability.

   “Converting to a paperless enterprise will be the largest technology-related transformational undertaking to date.”

2. **St Kilda wing**
   
The new St Kilda wing, and associated Monash Research Building and refurbished Main Ward Block, will be the most important capital development at The Alfred since 1970. The St Kilda wing will provide state-of-the-art operating suite and pathology facilities, and expanded modern wards and intensive care unit. It will support The Alfred’s role as a major trauma centre and transplant centre for Victoria.

   The new Monash Research Building will provide much-needed research and education space for Monash University’s Central Clinical School, continuing to support the world-class Monash Partners Academic Health Science Centre.

   “The new St Kilda wing will be the most important capital development at The Alfred since 1970.”

3. **Respect and quality improvement**
   
   How we do things is as important as what we do – Alfred Health is building a work environment that is respectful and innovative. Every team at Alfred Health will identify behaviours that are respectful and those that are not, creating a set of shared norms. A key is to ‘call’ peer behaviour, creating a culture of shared expectations and mutual accountability in a psychologically safe and healthy workplace.

   We will build on our redesigning care and quality improvement work to achieve a greater level of consistency, common language and allow for a wider range of frontline staff to be involved. We will encourage commitment to sustained change through innovation rather than compliance.

   “How we do things is as important as what we do – Alfred Health is building a work environment that is respectful and innovative.”
Measures of success

Accreditation
Alfred Health is fully accredited by the Australian Council on Healthcare Standards against the National Safety and Quality Health Service Standards (NSQHS Standards). These standards were developed nationally to drive the implementation of safety and quality systems and improve the quality of healthcare in Australia. The 10 NSQHS Standards provide a nationally consistent statement about the level of care consumers can expect from health service organisations.

We achieved full accreditation for three years in June 2013 and have worked to sustain and embed the standards into daily practice. The next survey is scheduled for May 2016.

Safety and quality performance indicators
We maintain and monitor a comprehensive set of safety and quality performance indicators drawing on the NSQHS Standards as well as the Victorian Department of Health and Human Services Performance Measurement Framework.

The indicators and targets for each indicator are reviewed annually. Our objective is to achieve or exceed benchmark performance against all indicators. Performance against the indicators is reported and reviewed monthly and in circumstances where targets are missed for three consecutive months, formal action plans are developed to bring performance back in line with the targets.

Alfred Health is fully accredited by the Australian Council on Healthcare Standards against the National Safety and Quality Health Service Standards.
## Measures of success

### STANDARD 1
**Governance for Safety and Quality in Health Service Organisations**
- Percentage of all deaths screened within five working days
- Hospital Standardised Mortality Rate
- 28-day readmission rate
- Number of serious events
- Percentage of open disclosure for Incident Severity Rating 1 and 2 events
- Number of complaints open > 30 days
- Percentage of staff attending booked orientation session
- Percentage of staff with completed mandatory emergency training in last 12 months
- Percentage of medical records scanned accurately

### STANDARD 2
**Partnering with Consumers**
- Overall satisfaction of patient experience as per Victorian Health Experience Survey
- Percentage of patients who rate overall quality of care as very good or exceptional on Alfred Health Patient Experience Survey
- Number of quality activities with evidence of consumer engagement and participation
- Number of new or revised patient information materials with consumer input

### STANDARD 3
**Preventing and Controlling Healthcare Associated Infections**
- Percentage of hand hygiene compliance: sentinel
- Number of cases of healthcare associated Staphylococcal Bacteraemia
- Number deep SSI - CABGs
- Number deep orthopaedic wound infection total or partial knee arthroplasties
- Number deep orthopaedic wound infection hip arthroplasty
- Number of cases of central line associated bacteraemia (ICU)
<table>
<thead>
<tr>
<th>STANDARD 4</th>
<th>Medication Safety</th>
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<tbody>
<tr>
<td>› Percentage VTE prophylaxis is considered and documented on medication order</td>
<td></td>
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<tr>
<td>› Percentage of medication reconciliation forms (MRF) completed within 24 hours of admission</td>
<td></td>
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<tr>
<td>› Number of medication incidents resulting in Incident Severity Rating 1 or 2 outcome</td>
<td></td>
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<tr>
<td>› Percentage adverse drug reaction documentation completed on the medication chart</td>
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<thead>
<tr>
<th>STANDARD 5</th>
<th>Patient Identification and Procedure Matching</th>
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<tbody>
<tr>
<td>› Percentage of surgical time-out completion</td>
<td></td>
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<tr>
<td>› Percentage of radiotherapy time-out completion</td>
<td></td>
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<tr>
<td>› Percentage of interventional radiology time-out completion</td>
<td></td>
</tr>
<tr>
<td>› Percentage of ECT time-out completion</td>
<td></td>
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<tr>
<td>› Percentage of cath lab time-out completion</td>
<td></td>
</tr>
<tr>
<td>› Number wrong blood in tube incidents</td>
<td></td>
</tr>
<tr>
<td>› Percentage of identified multiple medical record numbers for same patient on same campus</td>
<td></td>
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<tr>
<td>› Percentage of inpatients with correct ID bands insitu</td>
<td></td>
</tr>
<tr>
<td>› Number medication administered to wrong patient</td>
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<tr>
<th>STANDARD 6</th>
<th>Clinical Handover</th>
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<tr>
<td>› Percentage of patients discharged home with discharge summaries completed within 48 hours</td>
<td></td>
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<tr>
<th>STANDARD 7</th>
<th>Blood and Blood Products</th>
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<tbody>
<tr>
<td>› Percentage of red blood cell wastage</td>
<td></td>
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<tr>
<td>› Percentage of patients with appropriate documentation of consent to transfusion</td>
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<tr>
<th>STANDARD 8</th>
<th>Preventing and Managing Pressure Injuries</th>
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<tbody>
<tr>
<td>› Number of individual stage 3/4/SDTI/unstageable pressure injuries – acquired / worsened while in care</td>
<td></td>
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<tr>
<td>Measures of success</td>
<td></td>
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<tr>
<td><strong>STANDARD 9</strong></td>
<td></td>
</tr>
<tr>
<td>Recognising and Responding to Clinical Deterioration in Acute Healthcare</td>
<td></td>
</tr>
<tr>
<td>› Percentage of patients charts with complete sets of observations recorded</td>
<td></td>
</tr>
<tr>
<td>› Percentage of nursing staff trained in basic life support (BLS)</td>
<td></td>
</tr>
<tr>
<td>› Percentage of junior medical staff trained in BLS</td>
<td></td>
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<tr>
<td><strong>STANDARD 10</strong></td>
<td></td>
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<tr>
<td>Preventing Falls and Harm From Falls</td>
<td></td>
</tr>
<tr>
<td>› Number of patient falls with serious injury (Incident Severity Rating 1 or 2)</td>
<td></td>
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<td><strong>STANDARD 11</strong></td>
<td></td>
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<tr>
<td>Nutrition</td>
<td></td>
</tr>
<tr>
<td>› Number of incidents of unplanned weight loss &gt; 5 percent</td>
<td></td>
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<tr>
<td><strong>Mental Health</strong></td>
<td></td>
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<tr>
<td>› 28 day readmission rate</td>
<td></td>
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<tr>
<td>› Percentage of clients seen by a CMHS within 7 days post discharge from inpatient unit</td>
<td></td>
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<tr>
<td>› Seclusion rate per 1000 occupied bed days</td>
<td></td>
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<tr>
<td><strong>Department of Health and Human Services Performance Monitoring Framework</strong></td>
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<tr>
<td>› ICU minimum op capacity (days)</td>
<td></td>
</tr>
<tr>
<td>› Rate of hospital initiated postponements</td>
<td></td>
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<tr>
<td>› Number of patients on elective surgery waiting list</td>
<td></td>
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<tr>
<td>› Number of patients admitted from elective surgery waiting list</td>
<td></td>
</tr>
<tr>
<td>› Percentage of ED Triage 1 seen immediately</td>
<td></td>
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<tr>
<td>› Percentage of ED Triage 1–5 seen in time</td>
<td></td>
</tr>
<tr>
<td>› Number of ED patients with length of stay in ED &gt; 24 hours</td>
<td></td>
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<tr>
<td>› Percentage of ED patients with length of stay in ED &lt;= 4 hours</td>
<td></td>
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<tr>
<td>› Percentage Category 1 admits from elective waiting list &lt;= 30 days</td>
<td></td>
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<tr>
<td>› Percentage of ambulance transfers &lt;= 40 min</td>
<td></td>
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<tr>
<td>› Percentage aged mental health post discharge follow up</td>
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Chief Executive’s Performance Dashboard

Alfred Health was the first health service to openly share its current performance information with the public, showing a high level of transparency and accountability.

The Chief Executive’s Performance Dashboard provides the latest information and statistics on Alfred Health’s performance of treating and responding to patients. The dashboard comprises of two reports. The daily report includes information and statistics on patients accessing Alfred Health and compares our performance against agreed targets. The second report has a focus on the quality of patient care delivered by Alfred Health, and reports quality and safety indicators from the previous month.

The dashboard can be easily accessed by staff, patients and our communities from www.alfred.org.au
Challenges and opportunities

Alfred Health is a high-performing health service within one of the most effective and efficient health systems in the world. The challenges we face are not unique, but by virtue of our place in the Victorian health system we have responsibilities and opportunities to play a leading role in shaping the future of healthcare.

The challenges for the health system have been well documented:

› Growing demand arising from availability of new technologies and treatments and from growing and ageing populations
› Increasing prevalence of chronic diseases, mental illness and cancers
› Inequalities in health outcomes for some communities including Aboriginals, people living in rural Victoria and those on low incomes
› Recruiting and retaining a skilled workforce and ensuring health workplaces are free from violence and bullying
› Providing safer and more effective care in partnership with patients and their carers
› Providing healthcare that is affordable and sustainable to individuals and the community.

Alfred Health also enjoys significant opportunities, in part by virtue of being a major provider in a strong public health system, but also through our research, education and service delivery partnerships.

The opportunities include:

› Creating a more integrated healthcare system in our region and across Victoria to improve access to healthcare
› Improving healthcare and productivity through greater investment in digital technology
› Shifting models of care towards helping consumers become experts in their own health, especially for those with chronic conditions
› Understanding the impact of genomics and bionics and the opportunities to tailor more effective individual treatment
› Leveraging the growing collaboration between research, education and clinical capacity to continue to improve the quality and safety of our healthcare.
Alfred Health’s role and services

Alfred Health is one of Victoria’s major metropolitan health services. We care for people living in southern and bayside Melbourne through our three hospital campuses, numerous clinics and community-based services. We care for all of Victoria through our many statewide specialist services.

We offer the most extensive range of statewide services in Victoria, with 13 services delivering expert care to people throughout Victoria. Every day we work to provide the best possible health outcomes for our patients and community by bringing together clinical practice with research.

We have a strong focus on education, including undergraduate and postgraduate training for medical, nursing, allied health, and support staff through partnerships with Monash, La Trobe and Deakin Universities. We also share important research and development links with the universities, and Baker IDI and the Burnet Institute – our partners in the Alfred Medical Research and Education Precinct.

We strive to deliver tomorrow’s care today by understanding, anticipating and addressing our community’s health needs now and in the future.

Recognised as a national pacesetter, Alfred Health is consistently linked to progressive developments in healthcare and services, medical research and healthcare teaching. This influences healthcare in Australia and overseas.

We have three hospital campuses:

The Alfred, a major tertiary referral hospital, is best known as having one of Australia’s busiest emergency and trauma centres as well as the state’s largest Intensive Care Unit. We are home to statewide services including the Victorian Adult Burns Service and Victoria’s only heart and lung transplant service.

The Alfred site includes the Alfred Centre, a short stay elective surgery services and medical day services centre which provides Alfred Health with a model of care separating elective short stay surgery from emergency surgery.

Caulfield Hospital specialises in community services, rehabilitation, geriatric medicine and aged mental health. Many services are delivered through outpatient and community-based programs. The hospital plays a statewide role in rehabilitation services, which includes the newly opened Acquired Brain Injury Rehabilitation Centre.

Sandringham Hospital is community focused, providing hospital healthcare needs for the local area through emergency, paediatrics, special care nursery, general medicine, and outpatient services. Our partner, The Royal Women’s Hospital, provide obstetric and gynaecological services and the hospital works closely with local community healthcare providers.

Community care
We provide community care through clinics and programs such as the Melbourne Sexual Health Centre, Hospital in the Home and a range of psychiatric care, including community care units, headspace services and homeless outreach.

Clinical services
Alfred Health offers an extensive range of specialist medical and surgical services, and more statewide services than any other Victorian health service. We offer almost every form of medical treatment for adults across our multiple sites and three hospital campuses.
Clinical services include:

- Cancer Services (Bone Marrow Transplantation, Radiotherapy, Oncology, Cancer Surgery, Palliative Care)
- Cardiothoracic Services (Heart and Lung Transplantation, Cardiology, Cardiac Surgery, Cardiac Rehabilitation, Respiratory Medicine, Thoracic Surgery, Adult Cystic Fibrosis)
- Emergency Medicine, Intensive Care, Burns and Adult Major Trauma
- Eye and Ear, Nose and Throat (Head and Neck Surgery)
- Gastrointestinal Services (Gastroenterology, Gastrointestinal Surgery)
- General Medicine
- General Surgery (Breast, Endocrine and Colorectal Surgery)
- Infectious Diseases Treatment Services
- Neurosciences (Neurology, Neurosurgery)
- Special Care Nursery
- Orthopaedics
- Renal Services (Nephrology, Urology, Haemodialysis, Renal Transplantation)
- Specialist Medicine (Clinical Immunology, Clinical Pharmacology, Dermatology, Endocrinology/Diabetes, Hyperbaric, Rheumatology)
- Specialist Surgery (Dental Surgery, Faciomaxillary Surgery, Plastic Surgery, Vascular Surgery)
- Psychiatry (Adult, Child, Adolescent, Youth, Aged)
- Geriatric Medicine
- Rehabilitation
- Community programs (Melbourne Sexual Health Centre, Community Medicine, Alcohol and Drug Services, Carer Support, Community Health, Aged Care Assessment Service, Hospital Admission Risk Program, Prosthetics and Orthotics, Sub acute Ambulatory Specialist Care).
Partnerships

Alfred Health recognises that it is part of the broader health system and that meeting the health needs of our community is best done in partnership with consumers, carers, the community and volunteers and other health care providers.

Alfred Health involves consumers, carers and community members in meaningful ways throughout the health service. There are many consumers and community members on key committees and groups at Alfred Health with their involvement supported by our Consumer and Carer Engagement Strategies.

In planning and developing services to meet the needs of the community, Alfred Health partners with many other valued service providers and agencies including:

- Monash University
- Alfred Medical Research and Education Precinct Partners
- Monash Partners Academic Health Science Centre
- The Royal Women’s Hospital
- Ambulance Victoria
- Boon Wurrung Foundation
- Inner South, Bentleigh-Bayside and Central Bayside Community Health Services
- South Eastern Melbourne Primary Health Network and Southern Melbourne Primary Care Partnership
- Southern Melbourne Integrated Cancer Service
- Metropolitan, regional and rural hospitals throughout Victoria, particularly Monash Health, Peninsula Health and Latrobe Regional Hospital
- Cities of Stonnington, Glen Eira, Port Phillip, Kingston, Bayside and Melbourne
- VicHealth, Transport Accident Commission, Victorian AIDS Council, Health Issues Centre, Living Positive, Mental Illness Fellowship, HammondCare, Positive Women, Volunteering Victoria and Ethnic Communities Council
- Victorian Department of Health and Human Services.
Our community

Our local catchment covers people in the local government areas of:

› Bayside
› Stonnington
› Glen Eira
› Kingston
› Port Phillip
› Melbourne

Alfred Health’s local communities’ demographic characteristics include:

› A population that includes the very rich and the very poor
› An extreme range of housing types, with significant numbers of people who live in supported residential services, rooming houses and community housing
› Growing population, but relatively slowly compared with the rest of Victoria
› A community that is a bit older than average and ageing but not dramatically so
› Relatively socio-economically advantaged, but with pockets of low income/poverty
› Low proportion of Aboriginal people
› Greater cultural diversity than average.

Residents of inner south-east Melbourne enjoy better self-reported health status, lower smoking rates and higher levels of physical activity than Victorian averages.

While the rates of obesity are below the Victorian average, it remains a local health priority due to its high prevalence. Residents experience levels of psychological distress consistent with statewide averages; however a greater proportion of the community is at risk of alcohol related harm.

Alfred Health patients are more likely to be male than female and are primarily aged between 45 and 84 years; these characteristics have not changed over recent years. There has been significant annual growth (approximately six per cent) in presentations to our emergency departments, slower growth in inpatient admissions and a small decline in our average length of stay (5.7 to 5.4 days) for multi-day patients over the last five years.

The majority of consumers who access services tend to present with more complex health needs. These can be either emergency (e.g. major trauma) or chronic (e.g. cystic fibrosis, transplant) in nature but often require frequent utilisation of services over an extended period of time. Some statewide consumers will have a life-long relationship with Alfred Health.

Preparing our plan

Alfred Health has a long-term planning cycle that ensures we respond to the changing and emerging needs of Melbourne and Victoria. The strategy plan process draws together information and ideas that are regularly gathered along with a specific set of point-in-time actions.

The planning process has been led by the Alfred Health Board in partnership with Executive Directors.

Multiple processes have been used to gather diverse views and information for the Board to consider and review including feedback from consumers, carers, community members, partners and staff. The process included Chief Executive-led discussions, workshops, focus groups, organisation-wide surveys, patient surveys, unit meetings and individual interviews.

It was gratifying to see the very positive attitudes towards Alfred Health expressed by all groups. At the same time, there was no shortage of suggestions of how we can improve. These themes and ideas have been taken into consideration in the development of our purpose and beliefs as well as the strategic goals and objectives.
Our purpose

*To improve the lives of our patients and their families, our communities and humanity.*