

Strategy 2020-2023

Commission
on Excellence
and Innovation
in Health.

Let's put imagination to work
ceih.sa.gov.au



Government
of South Australia

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Foreword from the Minister for Health and Wellbeing

Every South Australian deserves excellent healthcare.

I would like to thank everyone who has contributed to the Commission on Excellence and Innovation in Health (CEIH) Strategy 2020-2023.

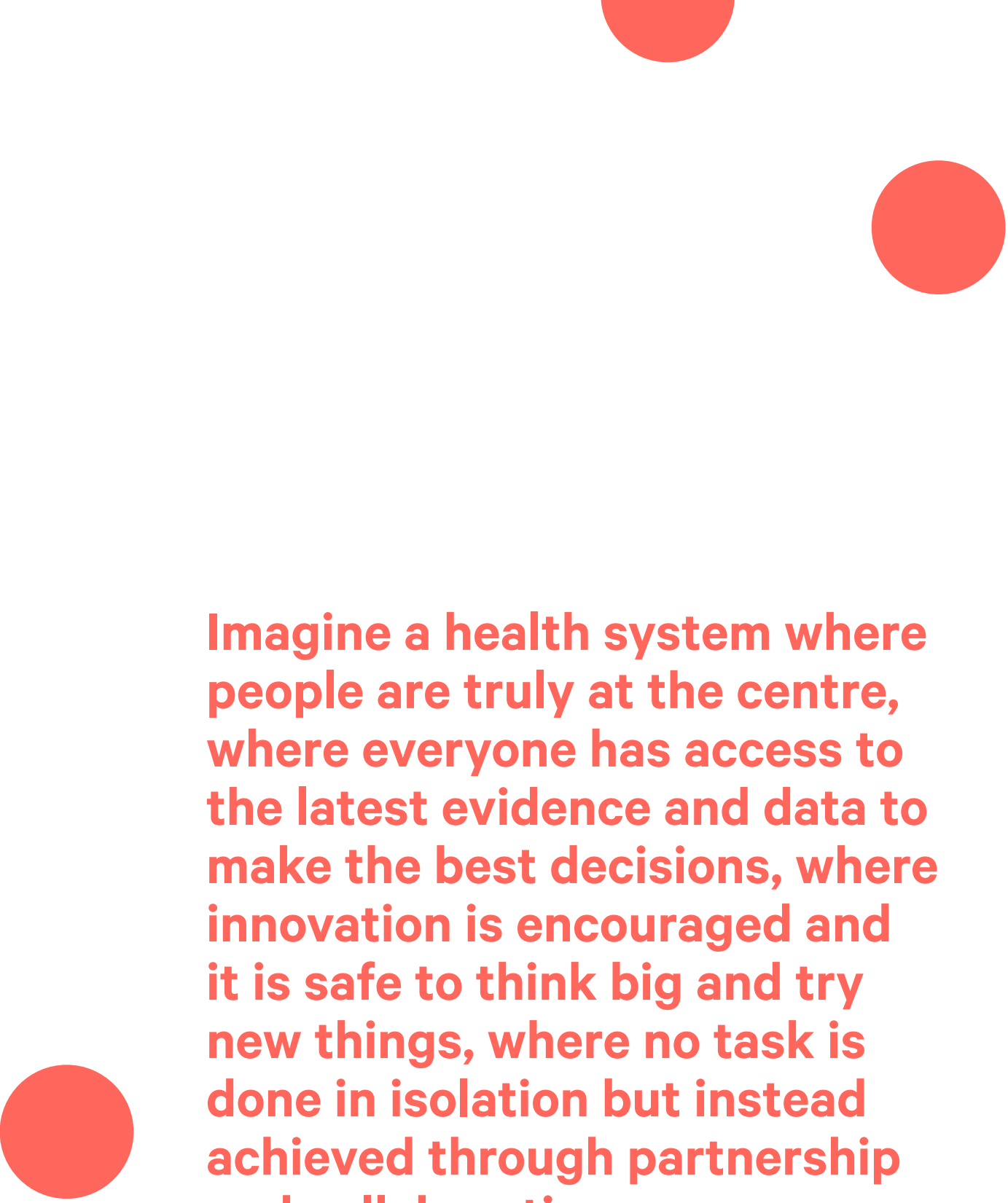
CEIH has been formed to help unlock potential within the health system and create opportunities to improve healthcare in South Australia.

CEIH sparks innovation and excellence by providing existing areas of the health system with the tools they need to turn ideas into action. Their remit is broad, across both the public and private sectors, and all different healthcare settings across South Australia. Wherever healthcare happens, CEIH will be there to connect people, ideas and knowledge.

Hon Stephen Wade MLC
Minister for Health and Wellbeing



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Imagine a health system where people are truly at the centre, where everyone has access to the latest evidence and data to make the best decisions, where innovation is encouraged and it is safe to think big and try new things, where no task is done in isolation but instead achieved through partnership and collaboration.

Change doesn't happen by chance, so that's what we are here for.

Our vision

**Together,
let's create
better
healthcare
for South
Australians**

Our approach

We seek new perspectives and solutions to challenges, and partner with the people involved in health care to turn innovative ideas into better healthcare.

Our approach is hands-on, ideas driven, and evidence based.

Wherever healthcare happens, we connect people, ideas and knowledge.

What we want

- Excellent health outcomes
- Excellent experiences for everyone
- Consumers, carers and clinicians engaged in design, delivery and evaluation of health services
- Increased confidence and pride in the South Australian health system
- A culture in the health system of innovation and striving for excellence
- SA recognised as having an excellent health system and a leader in healthcare innovation

The background of the entire page is a solid red color. Overlaid on this are several white circles of varying sizes. In the upper right, a large white circle contains the 'What we do' section. In the lower left, another large white circle contains the 'How we work' section. The background is also decorated with a pattern of red circles and bubbles of various sizes, some of which are semi-transparent, creating a layered, organic effect.

What we do

- 1 Build capability.** We create opportunities for people to learn new skills and support the mindsets that allow innovation to happen.
- 2 Advice and support.** We provide advice on collaboration and engagement, data and analytics, improvement science, health system design, research translation, horizon scanning and innovation.
- 3 Partnering and connecting.** We bring people together to solve problems. That means connecting clinicians, consumers and the community so that they can collaborate and learn from each other.
- 4 Innovation, excellence and best practice.** We think big and look for creative solutions that place South Australia as a global leader in health.

How we work

- We treat everyone with compassion, honesty and respect
- We strive for excellence in everything we do
- We celebrate our successes and the success of others
- We celebrate diversity of people and thinking
- We learn from failure and actively seek feedback
- We are responsive and adaptive

The way we work

Our behaviours

Our principles

Accountability

Collaboration

Trust

Drivers of our success

Lead by example and role model.

Drive for results and outcomes.

Leverage the power of diversity.

Champion 'One Team, One Culture'.

Always approachable, open and transparent. Hide nothing.

Always act with integrity and trust.

Expectations

Take ownership and responsibility for outcomes, words and actions.

Self-motivated. Can-do attitude.

Courage to be different without being divisive.

Work as a team and encourage teamwork in others.

Words and actions always match.

Never betray something shared in confidence.

Obstacles to our success

Not proactive. Waits to be told.

Avoiding or afraid of taking responsibility.

Withholding knowledge.

Stubborn and rigid thinking.

Not being transparent, and working in silos.

Participating in or encouraging gossip.

Unacceptable

Blaming others for own mistakes.

Being irreproachable. Never my problem.

Bullying, harassment, and discrimination.

Rudeness and arrogance. Demeaning others.

Irresponsible use of CEIH resources, time, or funds.

Lying, cheating, and fraudulent behaviour.

Empathy

Learning

Aim High

Customer Focus

Make everyone feel valued and understood.

Cultivate curiosity about others and challenge bias.

Promote life long learning and curiosity.

Encourage everyone to share knowledge.

Nurture high expectations and standards in others.

Not here to do the possible.

Champion the whole of customer experience in everything we do.

Encourage everyone to speak on behalf of the customer.

Seek to understand others' point of view.

Welcoming and interested in others.

Give room to fail. Learn from mistakes.

Seek and respond to feedback.

Hold oneself to high expectations and standards.

Celebrate our success and the success of others.

Solutions are customer-focused.

Know the needs of our customers.

Not listening or considering the feelings of others.

Promoting own agenda.

Not giving or receiving constructive feedback.

Not taking time to reflect on our culture, vision, and strategy.

Slow and unresponsive.

Risk adverse. Everything is too hard.

Mostly focused internally on CEIH.

Mis-alignment with our vision and approach.

Devaluing or undermining the work of others.

Acting with contempt.

Condescending of other's views or ideas.

Destructive criticism.

Making mistakes without caring.

Strong sense of entitlement.

Self-centred ambition.

Power-seeking.



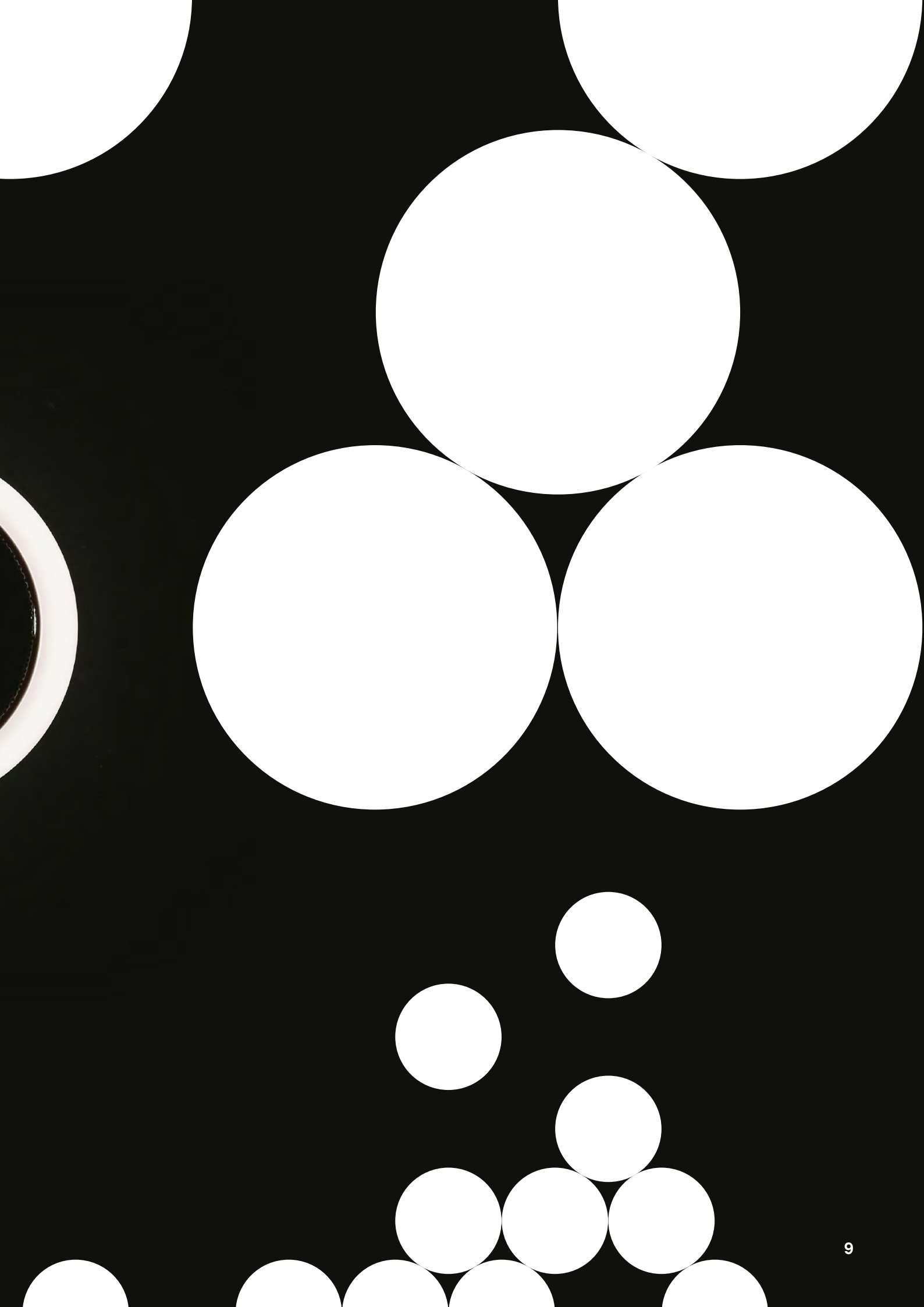
Determining priorities

To make sure we use our resources most effectively we need to prioritise our work carefully and fairly.

By carefully, we mean choosing to work on projects that are most likely to succeed in significantly and sustainably improving healthcare in South Australia.

By fairly, we mean using our resources equitably and making decisions transparently.

We will prioritise work according to clear criteria. Our selection criteria are described in the next pages.



Project selection criteria:

Primary factors

Projects would need to meet **most** of these criteria in order to be considered.

	1	2
Criteria	Strategic Fit	Impact
Rationale	Does the project fit with our strategic goals?	Does the project aim to have a significant positive impact that can be clearly measured?
A strong contender	Project needs the support of CEIH to succeed.	Either very high impact on a small group in need, or a high impact on many, with meaningful metrics in place.
A weak contender	Project already underway and the responsibility of other stakeholders.	Incremental improvements, achievable without CEIH; or larger scale impacts that lack reliable metrics.



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Scalability

Innovative

Partner Ready

Exit Ready

Does the project have outcomes that can be scaled across the health system?

Does the project involve new ways of doing and thinking?

Are partners available and ready to contribute?

Are the impacts sustainable after our input?

Project can be easily and effectively rolled out widely.

Project positively disrupts long-standing processes and ways of thinking.

Partners are enthusiastic and committed, and there is genuine executive sponsorship.

There is clear ownership to enable benefits to be sustained and built on.

A very local solution which has little buy-in from other stakeholders in the health system.

Project sustains current thinking and interests.

Partners either not committed, lacking clear sponsorship, or distracted with other things.

Lack of ownership to sustain benefits long term.

Project selection criteria:

Secondary factors

Programs that meet some of these criteria in addition to the primary factors above, would have a high chance of selection.

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Criteria	Practicality	Whole of CEIH
Rationale	Is the project feasible?	Does the project require the involvement of all of CEIH's capabilities?
A strong contender	Project has personnel with skills and mindsets to break through and succeed.	Project success depends on innovative thinking, smart data metrics, human-centred design, advanced project and stakeholder management.
A weak contender	Lack of required skills and thinking to generate excellent outcomes.	Project is focused very much in needing one area of domain expertise, rather than the full range.



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**Return on
Investment**

**Capability
Dividend**

Risk Profile

Will the project likely generate a substantial return on effort, funds and resources invested?

Does the project involve building long term capability across the health system that will outlive the project?

How likely is the project to succeed, and have risks been properly evaluated?

Project appears to be a compelling combination of sensible resources allocation and enormous returns.

Projects builds skills and experiences that can be further deployed with CEIH for future benefits.

Project balances well identified risks with the promise of outstanding outcomes.

Possibly a great deal of effort for a small or medium return.

Project reliance on CEIH's skills, and no future benefits will accrue unless CEIH is involved.

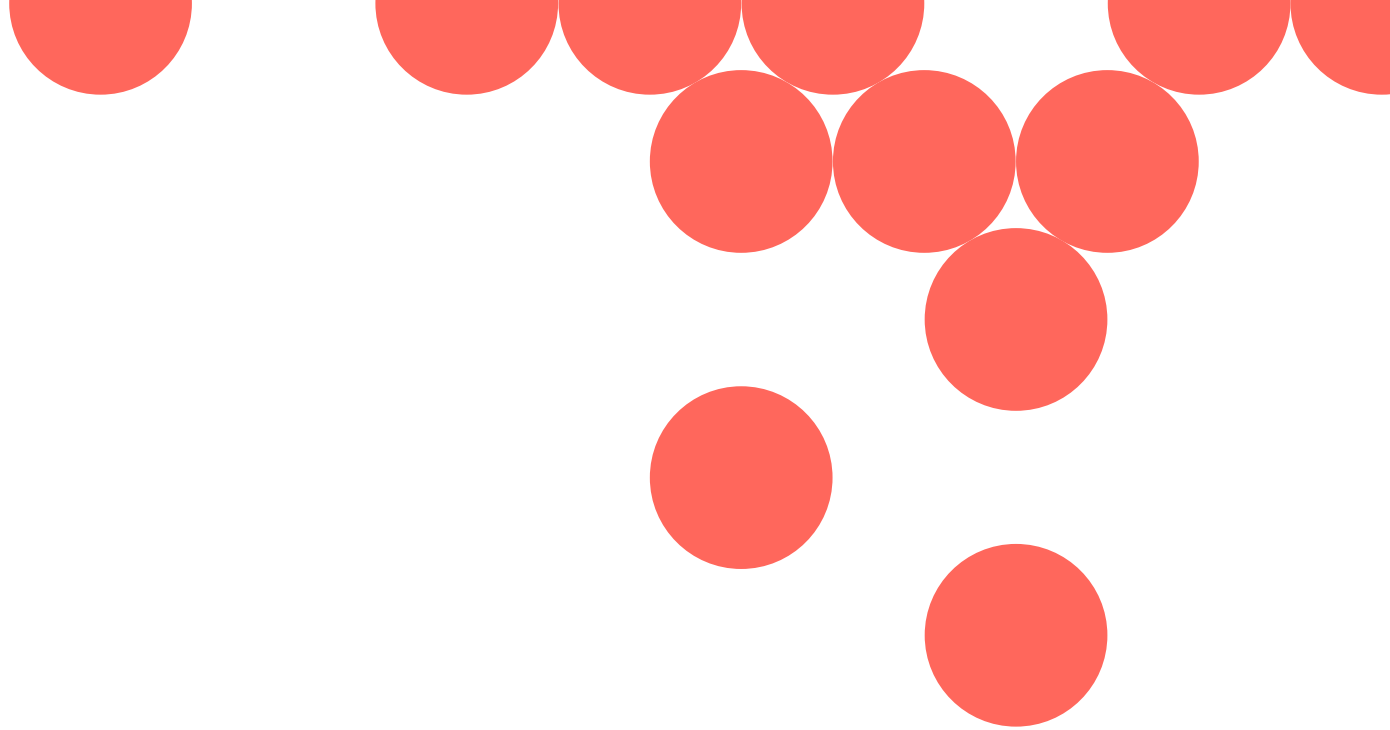
A lack of risk assessment, or the volume and complexity of risks mean success is very unlikely.

Balancing our project portfolio

We will endeavor to generate a balanced portfolio of projects in terms of timeframes and impact.

By timeframes

we mean balancing projects that are short-term and quick to produce results with longer-term more ambitious projects.



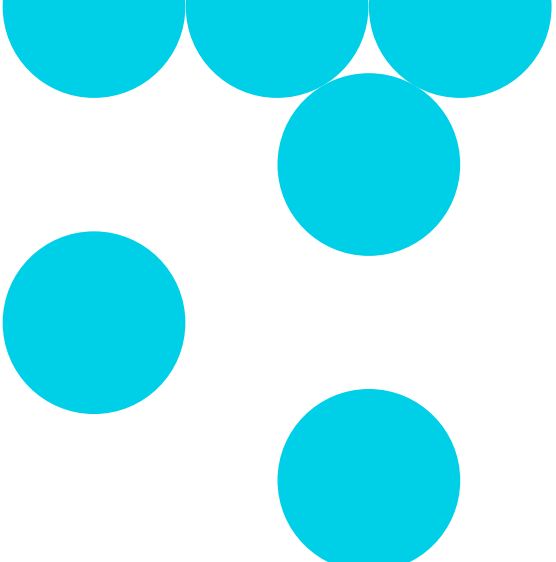
By impact

we mean balancing projects that achieve results for one part of the health sector with those that have an impact on the broader health system.

Building a culture of innovation

By understanding innovation

we mean that it involves new ideas, research and continuous improvement supported by CEIH, and disruptive and strategic innovation where CEIH brings people together to solve problems.



We have a significant opportunity to help all stakeholders in the health system understand, embrace, and build the capability to deliver innovation.

By embracing innovation


we mean choosing to put established thinking and practice to one side, and being able to consider new ways of working with an open and curious mindset.

By building the capability

we mean learning new approaches, skills, and collaborative ways of working to enable innovation to happen.



Our operating model

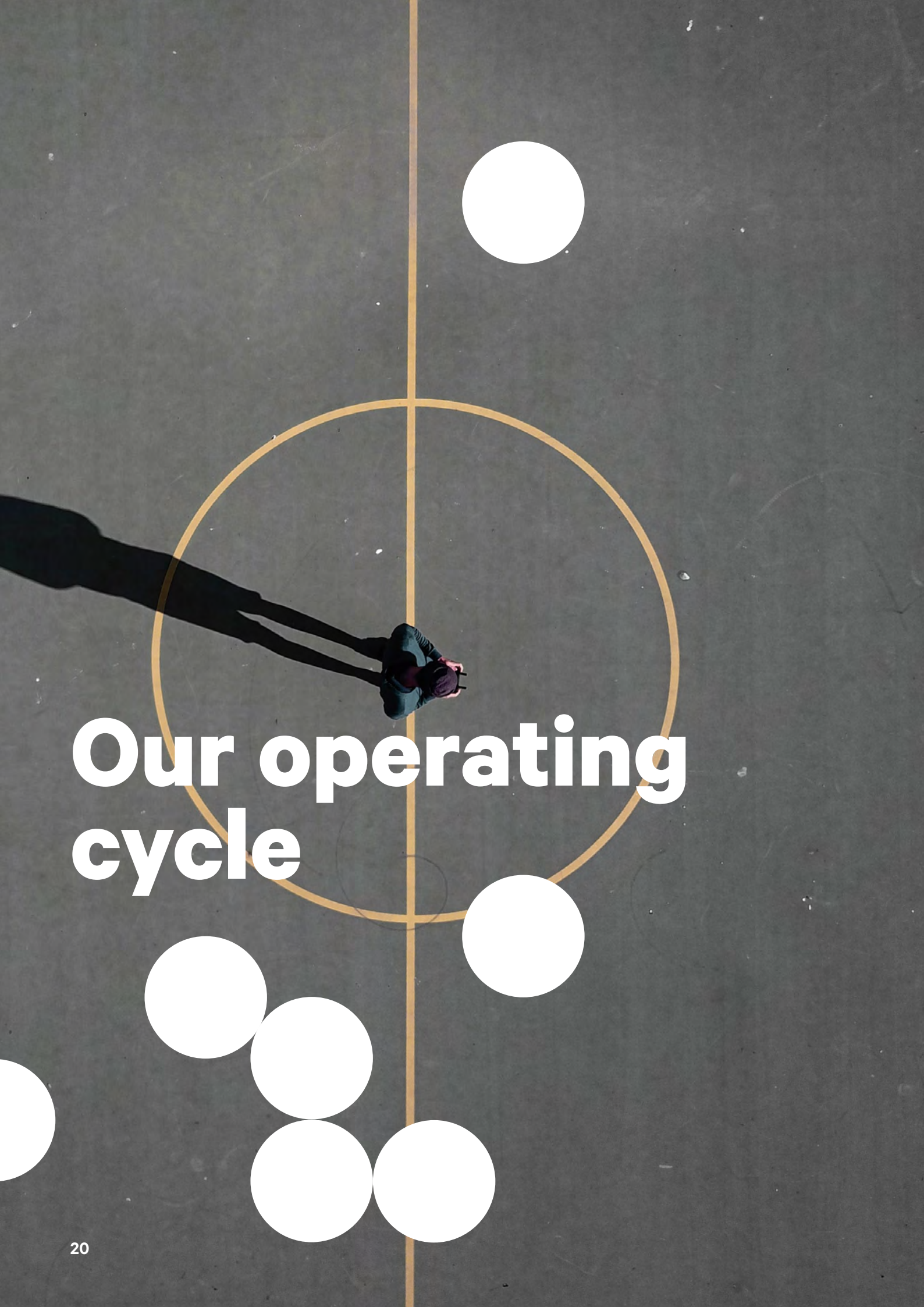


CEIH brings together a diverse group of skills, experiences and people to be able to deliver initiatives that haven't been attempted before.

With such a diverse group and range of opportunities, we need a clear way of working to enable our team to see where we are heading, and why.

Our model will mean we work in defined cycles, that enable us to start and complete projects, manage resources, and review and report on performance.

Each cycle will be four months. At the beginning of each new cycle we will review progress to see which projects should continue, have been completed, and choose new projects.



Our operating cycle

Start of cycle: capture of ideas

Potential new projects are assessed based on capacity, selection criteria and portfolio balance, and the ones to progress are selected.

Scoping of projects: validation and metrics

Project ideas are explored, possible outcomes framed, required metrics and data for measurement captured. Possible partners identified and consulted.



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and Innovation
in Health.**

End of cycle: assessment

All existing projects are assessed against performance milestones and desired outcomes. Decisions around their future are made, for example, which continue, which are halted, and which are revised.

Project selection: opportunities actioned

A wide range of properly scoped projects will be taken forward, with project plans and evaluation metrics defined up front.

Measures of Success

We will proactively define relevant measures in all our work.

For Consumers & Community

Key success measures for this stakeholder group will be:

- **Consumer and carer experience**
has it improved in a material fashion? Have satisfaction, positive sentiment, and compliments risen? Have complaints reduced? Do consumers and carers feel their end to end experience has been managed?
- **Consistent consumer and carer experience**
has clinical variation reduced?
- **Community Health literacy**
has it improved in a material fashion?
- **Volume and effectiveness of connections**
how many individual engagements, forums and community partnerships have we built, and are these meeting or exceeding planned objectives?
- **Increased community input into healthcare**
has the number of engagements, forums, and partnerships increased, and are they having an impact?
- **Equal access to healthcare**
have the above metrics improved across all demographic groups?
- **Best practice**
have consumer and community measures achieved Australian or global best practice?

For Clinicians

Key success measures for this stakeholder group will be:

- **Staff satisfaction**
are clinicians in SA more satisfied and more engaged? Do they have reduced absenteeism and feel supported?
- **Working across disciplines**
have interprofessional working relationships improved?
- **Evidence driven innovation**
have we provided better access for clinicians to evidence, data and tools, and has this translated into improved healthcare outcomes?
- **Innovation participation**
are clinicians more supported to innovate and translate research into practice?
- **Leadership development**
is there an increase in internal promotions and improved feedback on leadership in employee surveys?
- **Best practice**
has access to Australian or global best practices in technology, processes and tools increased?
- **Improved networks**
are clinicians better able to source expertise, help, resources etc.?
- **Volume and effectiveness of connections**
how many links and partnerships have we built, and are these meeting or exceeding planned objectives?
- **Increased capability**
do clinicians have increased capability in the whole of the consumer and carer experience, innovation, improvement science, data and analytics?

For the Health System

Key success measures for this stakeholder group will be:

- **Partnership success**
did we achieve what we set out to do when building each partnership, and will the initiative be sustained post-CEIH involvement?
- **Clinical measures**
have we moved the needle in economic, clinical, consumer, and carer measures? Has variation reduced?
- **Breadth of impact**
have we impacted a large percentage of the general population in terms of health outcomes?
- **Depth of impact**
have we positively impacted priority groups?
- **Sustainability**
will the positive impact of projects, forums and networks developed by CEIH endure well beyond the life of CEIH? Have the projects been embedded and operationalised?
- **Culture measurement**
has there been an improvement in innovation, collaboration, consumer and carer centricity?
- **Value**
has duplication reduced? Are there improved outcomes at less or equal cost?
- **Best practice**
are health system measures at Australian or global best practice?
- **Innovation**
has there been an increase in the number of scalable improvements and solutions?
- **Data literacy**
is there improved system capability in data and informatics?

For CEIH

Key success measures for this stakeholder group will be:

- **A reputation for getting good things done**
have our chosen projects been impactful and sustainable, and have they delivered what we planned they would?
- **Provider of choice**
has CEIH become the preferred provider of advice in the health sector in South Australia? Does CEIH get repeat requests for help?
- **A reputation for solving complex problems**
is CEIH recognised as having helped solve complex and/or risky projects, that none other could do?
- **Reputation and recognition**
is CEIH recognised for having made, or helped others be recognised for making a very positive contribution to healthcare in South Australia?
- **Sustainability**
has CEIH participation led to improvements, innovations, networks, and other activities which have become embedded and sustained?



We are CEIH



**Wherever healthcare happens,
we're there, connecting people,
ideas and knowledge.**

**We put imagination to work
to advance healthcare for all
South Australians.**

Commission on Excellence and Innovation in Health

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