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| **Attribute: Comprehensive care delivery** | | | |
| **Element** | **Reflective questions**  There are many different strategies to meet each element. These questions are designed to start a conversation about how you may go about addressing an element, and key things to consider. | **Write down your reflections, this can include:**   * **Describing your approach to meet this element** * **Listing the documentation or evidence that shows you have met this element** * **Considering if improvements can be made; OR if your organisation has not addressed this element - what action will you take? (see next column)** * **What could we do differently?** | **Taking action**  **Prepare a formal action plan addressing:**   * **What do you need to do?** * **How will you do it?** * **What are the barriers and enablers?** * **Who will be responsible?** * **Who do you need to consult?** * **When will this happen? Consider priorities and timeframes** * **How will you monitor, measure and evaluate?** * **What is your quality improvement strategy?** |
| **Patients are engaged as partners in their care** | * Do your policies and processes set clear expectations for effective communication and shared decision making with patients, their families and carers? * Do your policies and processes aim to reduce the health literacy demands of information materials, the physical environment and local care pathways? * Does your workforce have access to health literacy and communication training, including communicating risk? |  |  |
| **Goals of care guide clinical decisions and the patient journey** | * How are the patient’s goals of care documented? * How do you ensure that the patient’s goals of care are communicated to the patient, carer, clinical team and external partners following discharge? * Do you have a policy and process to support patients in advance care planning? |  |  |
| **Diversity and equity are respected and supported** | * What is the diversity of the patient population using your service? * What strategies do you have to support the different needs and culture of your patient population? * If your patients have limited English, do you have interpreter or translation services available? * How are members of the workforce supported to develop cultural competence? Do they have access to appropriate training? |  |  |
| **Transparency is a core element of safety and quality care** | * Do you have an open disclosure policy? Are patients, families and the workforce aware and supported to use this policy? * How does your organisation respond to complaints or compliments? Are they communicated back to the workforce and used to inform process improvements? |  |  |



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| **Attribute: Purpose, strategy and leadership** | | | |
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| **A commitment to exceptional person- centred care is clearly stated in the**  **organisations purpose and strategy** | * Does your organisation’s vision, purpose and strategy clearly state, in simple terms, its commitment to person-centred care principles? * Are members of the workforce recruited and trained around a shared set of values and goals that embraces person-centred care principles? |  |  |
| **Great leadership drives exceptional person- centred care, with the support of champions across the organisation** | * How does the leadership team model person-centred care in their everyday behaviour and ‘lead by example’?   + Are they present on the wards?   + Does the workforce and patients know who they are?   + Do they encourage the workforce to take ownership and responsibility for providing great person-centred care? * Do the executive and board consider and show a commitment to person-centred care when making decisions and allocating resources? * How are champions of person-centred care recognised across the organisation? How are they supported? |  |  |
| **A person-centred strategy is articulated to members of the workforce and the community and implemented across the organisation** | * Do your organisational documents clearly articulate person- centred care strategies and describe how they will contribute to the delivery of person-centred care? * How do leaders across the organisation communicate the organisation’s commitment, purpose and vision of person- centred care to the workforce, patients, families and the community? |  |  |



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| **Attribute: People, capability and a person-centred culture** | | | |
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| **An organisational culture for person- centred care is built and maintained through a long-term, systematic approach** | * What is your organisational culture currently like? * Does the workforce value and respect person-centred care principles? Ask members of your clinical and non-clinical workforce, patients and families what they think the culture is like in your organisation * How do teams work together in your organisation? |  |  |
| **The capabilities of all members of the workforce are**  **continually developed through formal and informal learning** | * What formal and informal learning opportunities are available to members of the workforce to enable them to develop person- centred skills? * Are there ways that the organisation can incorporate informal learning opportunities into day to day practice? * Is there support for the workforce to undertake training – is this a one-off, or are there opportunities for continuous development? |  |  |
| **The organisation regularly monitors and is dedicated to supporting workforce satisfaction and wellbeing** | * How does your organisation monitor workforce satisfaction and overall wellbeing? * What processes are in place to address any concerns that the workforce may raise? * What strategies are in place to improve workforce wellbeing? |  |  |



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| **Attribute: Person-centred governance systems** | | | |
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| **Consumers and the community are**  **involved in governance at all levels** | * How are consumers involved in the governance of your organisation? Consider if they are involved in planning, design, implementation and evaluation of the services * What opportunities are available, at both an organisational and program level, for consumers to be involved in governance activities? * Who are your consumer representatives? Do they adequately represent the diversity of your patient population? |  |  |
| **Consumers are trained and supported to meaningfully contribute** | * What sort of recruitment processes are used to fill the consumer representative role/s? Are they formalised? Do they identify the individual skills and perspective needed? * How does your organisation support consumer representatives? Do you provide education, training and ongoing support? * Are perspectives from patients and consumers incorporated into your organisation’s workforce training? |  |  |
| **Organisational structures and models of care are designed around the person** | * What do your current models of care look like? * Are there opportunities for greater teamwork, or for care to be more organised around the goals of the patient? * How do you develop your patient information? Do you have consumers involved? |  |  |
| **There are clear accountabilities at all levels – from the board to the clinician** | * Does your board receive reports or measures about patient experience? * Do your position descriptions (for the executive, clinical and non-clinical workforce) explicitly include roles and responsibilities in relation to the delivery of person-centred care? * Do your performance review processes (including performance management, reward and recognition) include accountability for delivery (or enabling delivery of) person-centred care? |  |  |
| **Financial, strategic and operational decisions and processes are person-centred** | * Does your board consider person-centred outcomes and measures in their meetings? * How are person-centred care principles incorporated into executive decision making? Consider if starting meetings with a patient story would be helpful * How are patients, families and consumers involved in the design, implementation and evaluation of operational processes? |  |  |



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| **Healthcare organisations have a comprehensive network of service partners and relationships** | * Who are your external partnerships with? Do these partnerships support care delivery that is safe and coordinated around the needs of your patients? * What other linkages/partnerships could your organisation make within and across the health and other sectors to support comprehensive care? * What structures and processes are in place to support and foster relationships with external partners, such as local community services? |  |  |
| **There is a focus on seamless transitions and coordination of care** | * What strategies are in place to ensure safe transitions of care? * Are there clear care and referral pathways to support continuous care? * How does information flow within your organisation? Can you improve the flow of information so it is accessible to the right person at the right time? |  |  |
| **Healthcare organisations operate as leaders in system improvement** | * What opportunities are available for your organisation to lead or collaborate on person-centred care initiatives? * Are there opportunities for you to share your learnings in relation to person-centred care with other organisations? |  |  |
| **Community volunteers are recognised and supported as critical partners in enhancing the patient experience** | * Does your organisation use volunteers to support the delivery of care? * What services across the organisation could benefit from partnering with volunteers? |  |  |



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| **Person-centred design principles are applied to the built environment** | * Consider the features of a person-centred care built environment. How does your organisation perform against each feature? * Consider input from patients and consumers when designing new, or renovating existing, facilities |  |  |
| **Healthcare organisations are pragmatic and innovative where resources are limited** | * What current opportunities are available in your organisation to encourage a person-centred environment? * Are there innovative ways to use your existing physical space to promote patient and family engagement? Ask your patients |  |  |
| **Technology must actually enhance patient experiences and outcomes, but also not be relied upon alone** | * How does your organisation’s technology (or technology interventions) enhance patient experience and outcomes? Think about everyday technologies, such as alarms and monitoring devices * What systems and processes does your organisation have in place to monitor and assess technology risks? * How does your organisation build workforce capability and willingness to use new technologies? |  |  |



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| **There is a culture of learning and continuous improvement** | * How does your organisation ensure transparency of data and information about patient experience and care delivery? * Does this data and improvement activities get reported to executives, senior managers, and the workforce? * How does your organisation celebrate success and share learnings? |  |  |
| **Measurement can be acted on to improve outcomes and reflects what patients and communities value** | * What information (qualitative and quantitative) does your organisation collect to measure if improvements have been made, and what is important to the organisation’s patients and communities? * What other types of information can you collect to build a richer picture of patient experience and outcomes? * How does your organisation use this information to improve outcomes for patients? |  |  |