



Victorian Clinical Council inaugural meeting communiqué

The Victorian Clinical Council held its inaugural meeting on 31 March 2017. A key message was the opportunity to advance quality and safety in the Victorian health sector.

Individual council members demonstrated the diversity of perspective, depth of experience and range of motivations underlying participation in the council. These attributes will be fundamental to meeting the council's responsibility to support efforts to achieve zero avoidable harm.

Collaboration

Laying a foundation for collaboration between the council and some of its partners was a key objective of this meeting. We heard from:

- the Secretary to the Department of Health and Human Services, Ms Kym Peake
- the Chief Executive Officer of Safer Care Victoria, Professor Euan Wallace
- the Chief Executive Officer of the Victorian Agency for Health Information, Dr Diane Watson
- the Deputy Secretary, Health Service Performance and Programs, Mr Terry Symonds
- the Parliamentary Secretary for Health, Carers and Volunteers, Ms Gabrielle Williams.

It was clear that the establishment of the council signals a commitment to strengthening the culture of collaboration for safety and quality in the Victorian health sector so that meaningful clinical and consumer engagement becomes business as usual for the Victorian Government, the department and health services.

The expectation is that advice from the council will strengthen system planning and investment decisions to ensure Victorians achieve better health outcomes and have better experiences of health care. The council noted the requirement for access to accurate, meaningful data to support its work and the work of the sector more broadly.

Quality and safety reforms

The council heard from Safer Care Victoria and the department on two quality and safety reforms:

1. the establishment of minimum volume thresholds for particular procedures and interventions and designating which hospitals (public and private) can offer them
2. the development of the statewide design, service and infrastructure plan, including one of its key reforms, the introduction of formal role delineation into the Victorian health system.



Continuing Victorian Clinical Council inaugural meeting communique

The council showed support for these reform initiatives and provided feedback that covered early implementation considerations and suggestions for responding to the growing demand for health services. Further discussion will occur at upcoming council meetings.

Priority topics

Members provided input into ongoing work to establish the council. They identified the following priority topics for council meetings:

- integrating care across different health settings
- addressing unwarranted variation and eliminating avoidable harm
- chronic disease management and the interface between primary and acute care
- recommending improvements to health system infrastructure including the opportunity of digital health.

Terms of reference and future meetings

Advice from council members on the draft terms of reference was sought. The feedback provided will bring greater clarity, ensure consistency and eliminate unnecessary duplication within the document.

The council also discussed a proposed process for the development of the quarterly meeting agendas, with members supportive of utilising sub-committees to drive content development.

A full report on the meeting will be prepared and published on the Victorian Clinical Council webpage.

I look forward to our next meeting, to be held on Friday 16 June 2017.



Associate Professor Jill Sewell AM

Chair, Victorian Clinical Council