

# Patient Empowered Care

Abbey Perumpanani  
Northern NSW LHD

Patient Centered Care

## Patient Centered Care



Shifting the Dial: 5 year productivity review

Chapter 2: Healthier Australians

Overall, the evidence suggests that Australia has not moved sufficiently to a patient-centred model

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#### ient the centre of care

ents should re-configure the health care system around the principles of patie within a five year timeframe.

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## Patient Driven Care

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**Have we covered everything?**

You could [help us](#) make sure by asking your doctor these questions before you are discharged.

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## Have we covered everything?

You could help us make sure by asking your doctor these questions before you are discharged.

1. When will my GP receive information about my stay in hospital?

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## Have we covered everything?

You could help us make sure by asking your doctor these questions before you are discharged.

1. When will my GP receive information about my stay in hospital?
2. Can I have a written list of my medications to take with me when I go home?

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You could help us make sure by asking your doctor these questions before you are discharged.

1. When will my GP receive information about my stay in hospital?
2. Can I have a written list of my medications to take with me when I go home?
3. **What do I have to do next?**  
e.g. Make an appointment with my doctor in two weeks' time/follow up with a specialist/other

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1. When will my GP receive information about my stay in hospital?
2. Can I have a written list of my medications to take with me when I go home?
3. **What do I have to do next?**  
e.g. Make an appointment with my doctor in two weeks' time/follow up with a specialist/other
4. **Are there any outstanding test results that need to be followed up?**
  - How do I get my test results?
  - Who should I follow them up with?

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e.g. Make an appointment with my doctor in two weeks' time/follow up with a specialist/other
4. Are there any outstanding test results that need to be followed up?
  - How do I get my test results?
  - Who should I follow them up with?
5. Who should I contact if I have any questions?

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1. When will my GP receive information about my stay in hospital?
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e.g. Make an appointment with my doctor in two weeks' time/follow up with a specialist/other
4. Are there any outstanding test results that need to be followed up?
  - How do I get my test results?
  - Who should I follow them up with?
5. Who should I contact if I have any questions?
6. Is there anything else I should know about my stay in hospital?

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• How do I get my test results?  
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5. Who should I contact if I have any questions?
6. Is there anything else I should know about my stay in hospital?

Beth Stacey  
Nurse Unit Manger (Level 1)  
Grafton Base Hospital

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### Discharge Summary Completion

Group	Completion Rate
Control	~28%
Phase 1	50%
Phase 2	70%

## Next Steps

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Dear Mr Smith,

This morning you will be visited by Dr Burrell, your treating doctor.  
Following that he will hand over your care to Dr Shah who will be looking  
after you over the weekend.



## Next Steps

Dear Mr Smith,

This morning you will be visited by Dr Burrell, your treating doctor. Following that he will hand over your care to Dr Shah who will be looking after you over the weekend.

Today you will receive medications at 0800, 1200 and 1800. This will include antibiotic medications which help to fight infection. You may wish to discuss with your treating doctor the choice of antibiotics made for you.

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Being the 4<sup>th</sup> day after you had a cannula placed into your arm, we will be changing the cannula today.

Your physiotherapist, Mr John Bloggs will see you this afternoon.

We are still expecting to have you ready for discharge in 3 days.

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## Next Steps

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Please ring your buzzer and ask for me if you wish to discuss anything or have any questions

Wishing you all the very best

Ms Jane Doe  
Nurse Unit Manager of Level 2.

## Next Steps

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Nurse Unit Manager of Level 2.

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Paradigm Changes

## Paradigm Changes

### 1. Quality and Risk

## Paradigm Changes

### 1. Quality and Risk



1. Quality and Risk

2. Change Management

# Paradigm Changes

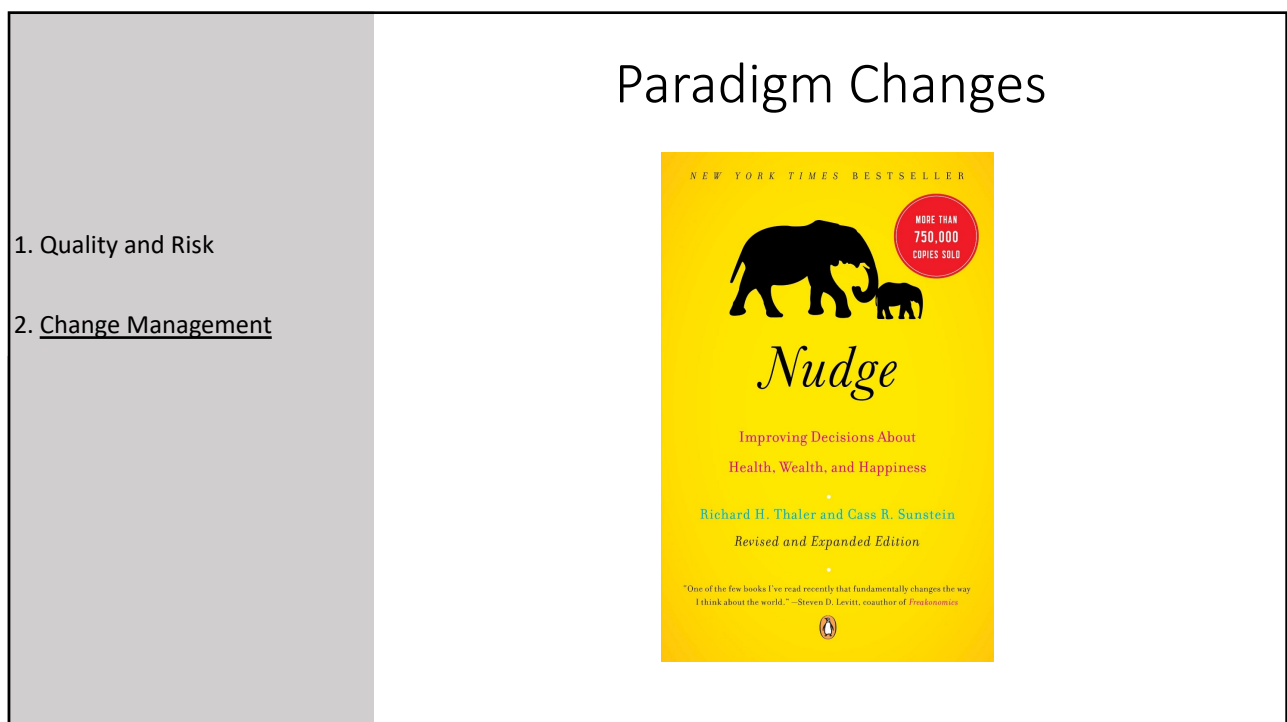
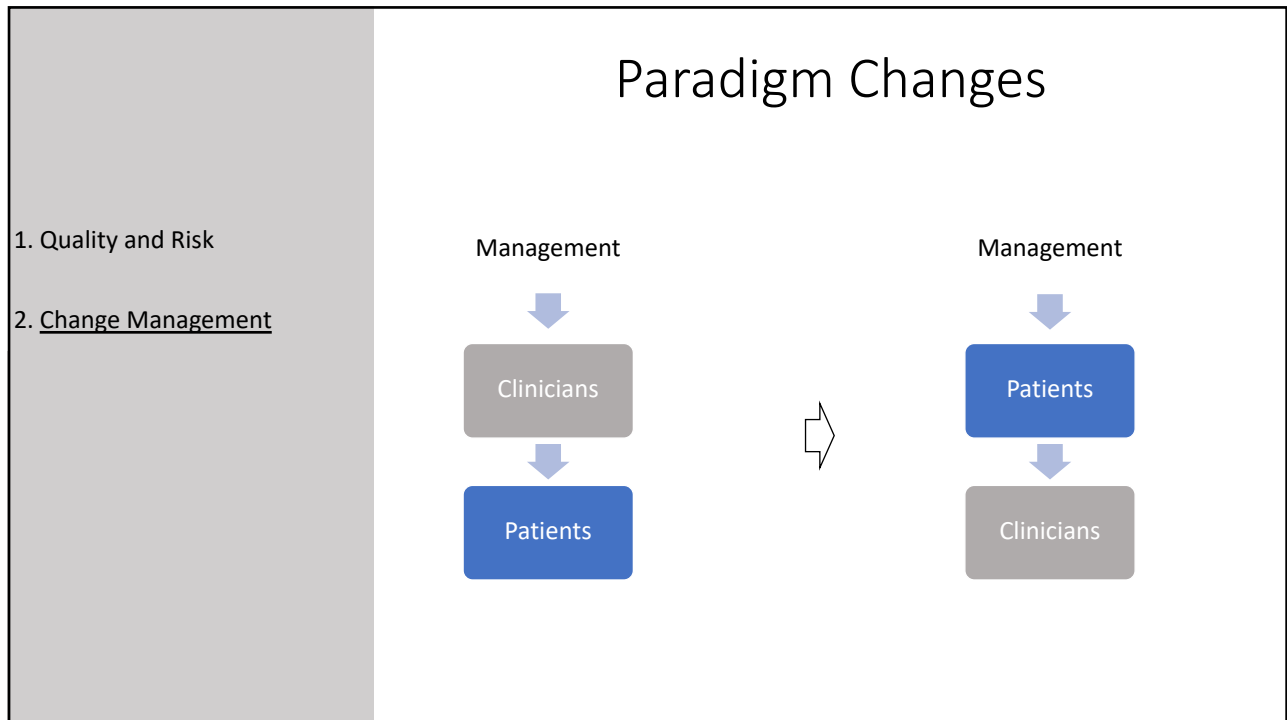
1. Quality and Risk

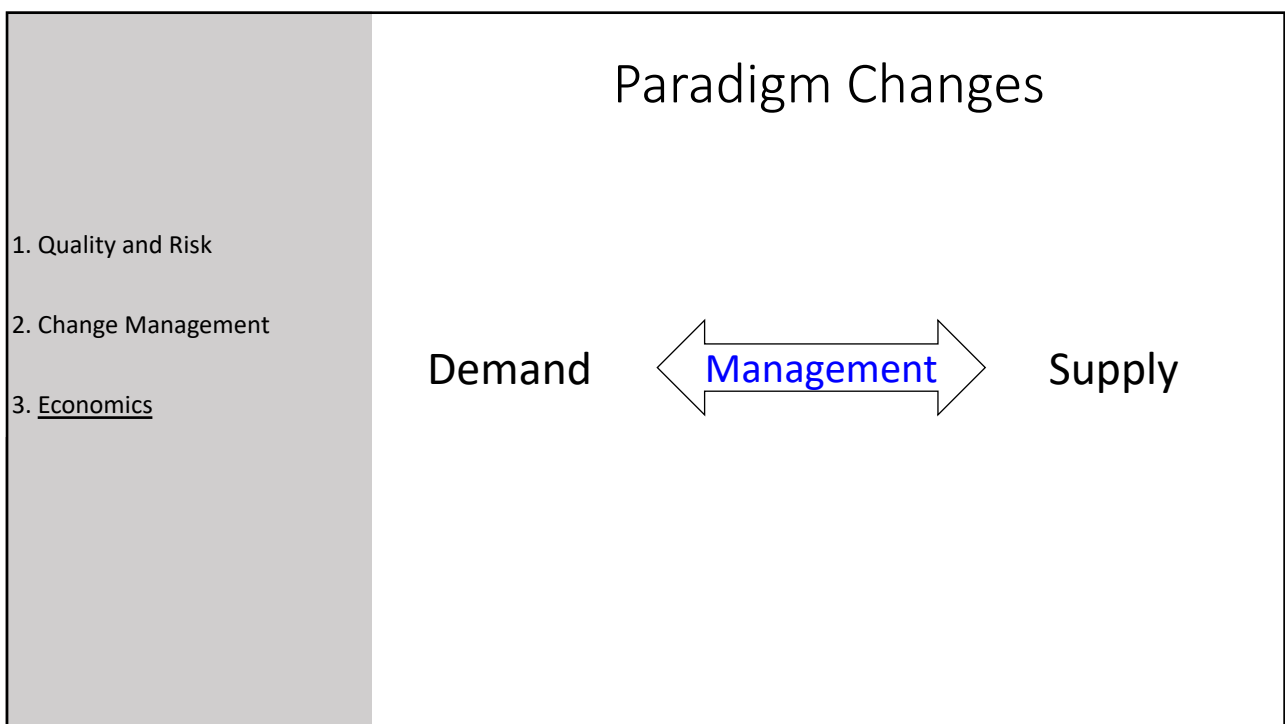
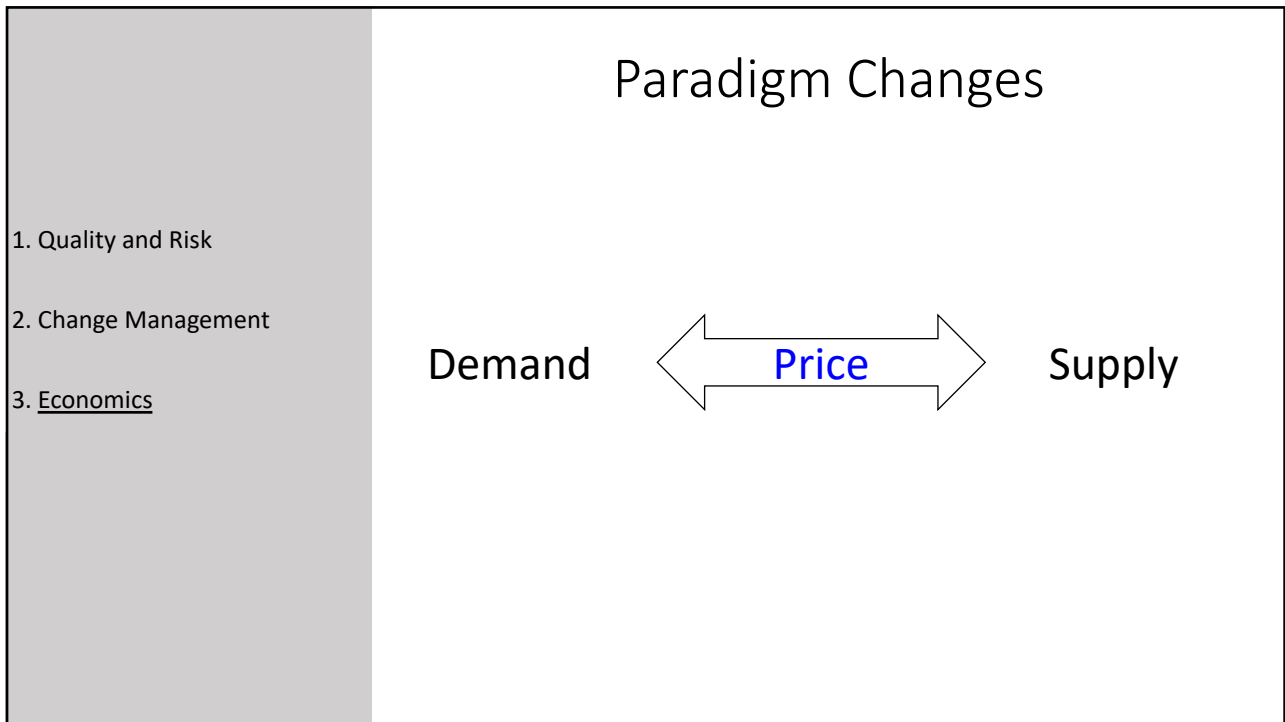
2. Change Management

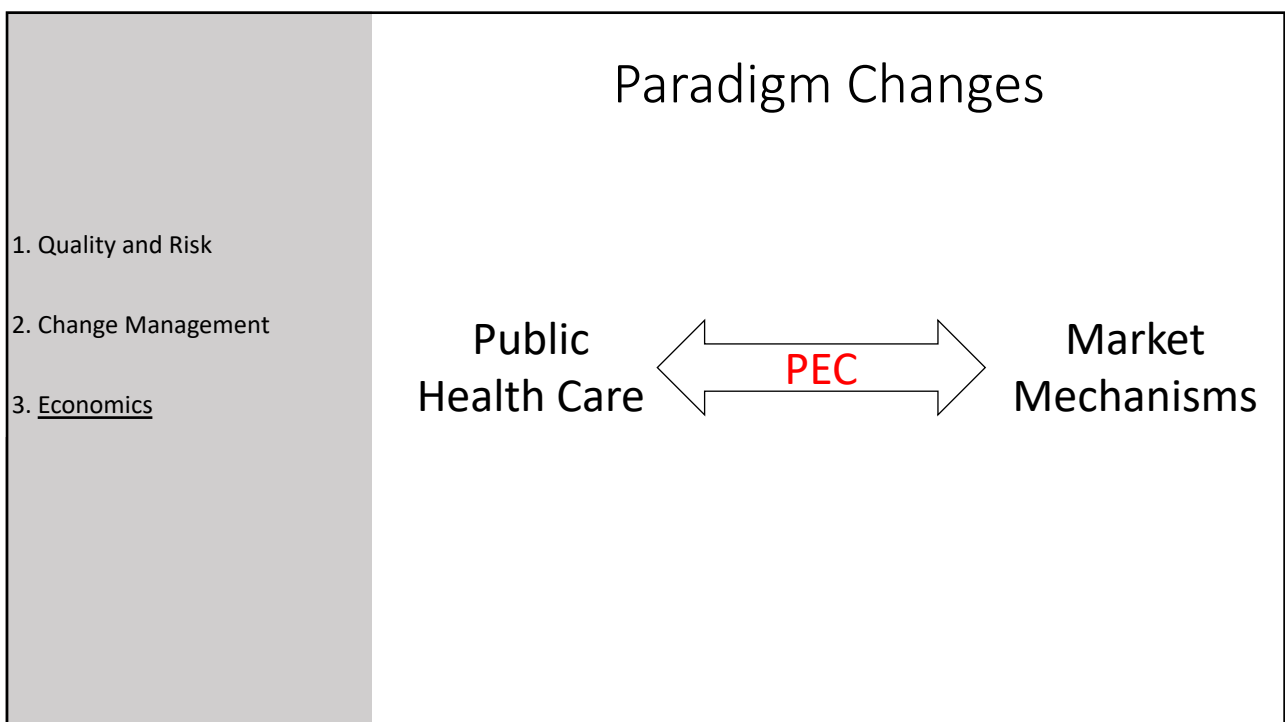
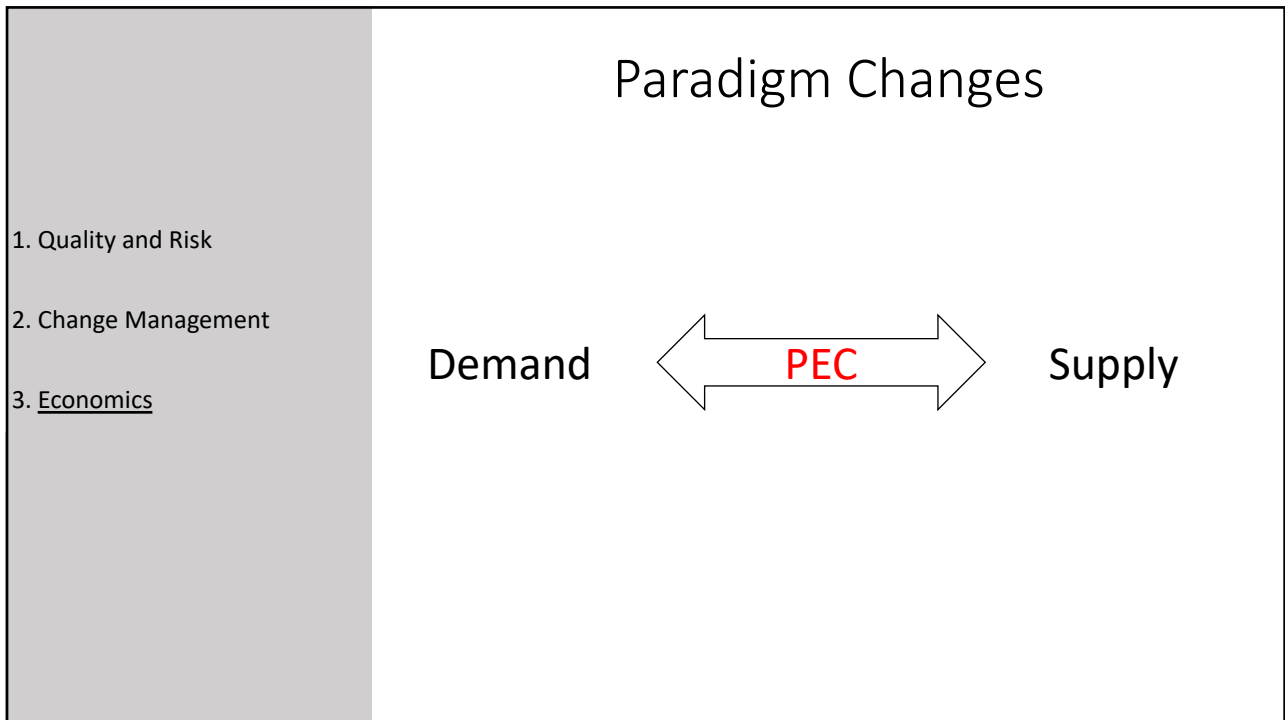
# Paradigm Changes

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graph TD; Management --> Clinicians; Clinicians --> Patients;
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The diagram illustrates a three-step process for paradigm changes. It begins with 'Management' at the top, followed by a downward arrow to a grey box labeled 'Clinicians'. Another downward arrow leads from 'Clinicians' to a blue box labeled 'Patients' at the bottom.









<ol style="list-style-type: none"><li>1. Quality and Risk</li><li>2. Change Management</li><li>3. Economics</li><li>4. <u>Legal</u></li></ol>	<h2>Paradigm Changes</h2>
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<ol style="list-style-type: none"><li>1. Quality and Risk</li><li>2. Change Management</li><li>3. Economics</li><li>4. <u>Legal</u></li></ol>	<h2>Paradigm Changes</h2> <p>Tort Law</p>
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1. Quality and Risk
2. Change Management
3. Economics
4. Legal

## Paradigm Changes

Tort  
Law

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Contract  
Law

Paradigm Changes

1. Quality and Risk
2. Change Management
3. Economics
4. Legal

## Economic Value

<p><u>Paradigm Changes</u></p> <ol style="list-style-type: none"><li>1. Quality and Risk</li><li>2. Change Management</li><li>3. Economics</li><li>4. Legal</li></ol>	<h2>Economic Value</h2>  <div><div>1%</div><div>Efficiency</div><div>=</div><div>\$130 million</div><div>in added value</div></div>
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[abbey.perumpanani@health.nsw.gov.au](mailto:abbey.perumpanani@health.nsw.gov.au)

Director Clinical Programs  
Northern NSW LHD