

# Contestability

## Case Study – Lady Cilento Children's Hospital

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# Introduction

- » RCH is a 168 bed paediatric tertiary facility
- » Plan to move to Lady Cilento Children's Hospital (combined MCH and RCH services) – 359 bed quaternary hospital
- » Has a large functional, fully equipped kitchen
- » Nutrition Bays and Ward Pantries on every floor
- » Significant work on MOC and MOSD and Operational Brief for food services

# RCH Service

1. Food Safety Program – compliant
2. Food Service Manager and dedicated food service staff
3. Management of all food stores at RCH
4. Management of retail food services
5. Introduction of new products and services for patients and retail
6. New compliant menu
7. LCCH MOC completed based on current model
8. Morning tea, afternoon tea and supper snacks to all wards daily – completed.
9. Patients are eating more and are more satisfied
10. AND retail has never performed so well.

# RCH Food Services Staff



# Lady Cilento Children's Hospital



# Blueprint Document February 2013



# Then Contestability happened...

# What is contestability?

- » Contestability is a process of reviewing the delivery of our services to ensure we are providing the public with the best possible services at the **best possible price**. It encourages innovation and focuses on building partnerships to improve access and affordability of public services.
- » The Blueprint announced that public health services would be exposed to contestability processes
- » The Contestability Branch was established in January 2013 and works in partnership to undertake contestability assessments
- » At Queensland Health, contestability will become part of our everyday decision-making and consideration and is part of a long-term process of changing how we do business.

# Does contestability mean outsourcing?

- » No. Can include:
- » retaining and improving existing processes
- » commercialising
- » corporatising
- » privatising
- » joint ventures
- » partnering
- » managed services
- » public sector mutuals
- » backsourcing
- » stopping the service
- » Whatever the outcome, contestability is focused on achieving the best model for health service delivery – with the needs of our patients at the centre of those decisions.

# Planning

- » Meet with contestability management group (KPMG)
  - › Series of meetings to ensure all parties had indepth understanding of paediatric food service
- » Determine Model of Care
  - › Part of operational brief and MOC for LCCH
- » Determine Specs and KPI's as per our LCCH document
  - › Shouldn't change quality of service
- » Ensure reference to all QH standards, Guidelines and Directives
  - › Be specific about requirements
- » Review offer documents to ensure all correct
  - › Constantly and consistently – many hours
- » Offer Documents endorsed for release to market

# What we can't live without..

- » Patients can choose what they want
- » How much they want
- » Needed the flexibility of both a fridge and oven
- » Selection of fresh fruit and condiments always available
- » Staff ALWAYS available for support at ward level
- » Hot food – hot
- » Patients choose at time of meal

Compliance with Queensland Health Nutrition Standards for Meals and Menus (Paediatrics)

# Legislation, Accreditation and Directives

- **Food Act 2006 (Queensland)**
- **Australia New Zealand Food Standards Code (FSANZ)**
- **Health Service Directive – Food and Nutrition Safety (QH-HSD-028-2013)**
- **Health Service Directive – Procurement and Logistics (QH-HSD-009-2012)**
- **Provision and Purchasing of Enteral Nutrition Products to Patients through Queensland Health Services (QH-POL-015:2012)**
- **Eligibility Criteria, Supply and Charging for the Home Enteral Nutrition Service (HENS) to Outpatients (QH-IMP-015-1: 2012)**
- **Care of Outpatients Receiving HENS (QH-IMP-015-2: 2012)**
- **Protocol for Enteral Nutrition Order Form (QH-PCD-015-1-1: 2012)**
- **Provision of clinical products/consumables in an outpatient setting Health Service Directive (QH-HSD-030:2013)**
- **Guideline for home enteral nutrition service (HENS) for outpatients eligibility, supply and costing Health Service Directive.**
- **ACHS National Standard 12 (12.5.1,12.5.2, 12.6.1, 12.6.2, 12.6.3, 12.7.1, 12.7.2).**
- **ACHS Equip 5 Standard 1.5.7**
- **Nutrition Screening Assessment and Support Policy (QH-POL-345:2011) and Standard**

# Prepare in-house bid

- » Determine staff requirements (existing – minimum requirements with cover for leave & sick leave)
- » Determine equipment requirements
- » Determine food costs – based on expected activity + CPI + additional services eg mid-meals
- » Submit for costing build up by finance – for own bid
  - › Take project team site visits – kitchen

# Equipment/ FF&E





# Communication

- » Need a clinical lead at the site (eg Director Dietetics) with detailed knowledge of food services
- » Clarification of aspects of the Offer document from external bidders with contestability management group
- » Clarification of in-house bid
- » Regular meetings with staff to keep informed of progress and plans for future – preparing staff for any outcomes and talking through what that means operationally
- » Outcome announcement
  - › When, how, who will deliver this – needs significant consideration and logistical planning – can't get this wrong?

# Outcome

- » The contract for facilities management at Lady Cilento Children's Hospital has been awarded to Medirest, in partnership with major sub-contractor Honeywell.
- » Medirest will not be employing staff from RCH for LCCH – due to transmission of business
- » Estimated annual \$4 million saving

# What is included?

- » Services that will be provided by Medirest and Honeywell at the new LCCH are:
  - › Portering and Patient Support
  - › Cleaning
  - › Patient Food
  - › Linen and Laundry
  - › Materials Distribution
  - › Facilities Management
  - › Helpdesk
  - › Building and Engineering
  - › Maintenance
  - › Grounds and Gardens Maintenance
  - › Security
  - › Pest Control
  - › Central Energy Plant Operations

# Delivery of announcement

- » Background work on HR management
  - › Who would be impacted
  - › How many staff
  - › Who is on leave/will they be contactable on the day?
  - › Who are your key contacts/supervisors on the day?
- » Delivered by GMO to all impacted staff
  - › Same day as formal announcement (1 hour prior)
    - Heartfelt and clear
    - Prepared and very respectful
  - › Timely - decision made day before only – no change of rumours or communication leaks
  - › No reflection on the performance and professionalism of our current facilities management team whose service as a group and as individuals is highly valued

# Staff offering

- » **Be very clear on what you offer staff**
- » Employed Careers counsellor – Trevor Roberts – open to all temporary, casual and permanent staff
- » Some positions will be identified for LCCH at same level – administration/AIN/AHA
- » Permanent staff will be offered entitlements package
- » Permanent staff will be priority for finding positions
- » All impacted staff will be supported to attend training sessions in identified areas to upskill
- » One on one interviews offered to every staff member – Line manager and HR Director
- » Roster changes to support training and other work opportunities

# Response

- » Very difficult for managers – need to be prepared
- » Varied reactions
- » Individual appointments very important
- » Food Service perspective
  - › Voiced concerns about manager – not self
  - › Very happy with the way it was managed and pledge of ongoing support
  - › Aware of the environment and felt they have been optimistic but aware of the potential outcomes

# Evaluation of Process

- » CHQ very inclusive from start of process and remained throughout – no secret agreements – very transparent
- » Identified Director Dietetics as lead for KPI tender and MOC document
- » Preparedness very high for all staff – could be outsourced
- » Very good communication and clarity with new provider regarding:
  - › Expectations
  - › Deliverables
  - › Penalties
  - › QH policies and governing documents – menu standards
  - › Good lead in time for interface between LCCH and Medirest

# Considerations - 2015

- » Food Safety Accreditation – EBFC, Formula room, wards
- » ACHS – Nutrition Standard 12
  - o What QH Food Services/Nutrition Support staff will we need?
    - More than previously
    - No dedicated food service Manager
    - No dedicated Nutrition Support/Systems/training position
  - o Food and Nutrition Sub-Committee – regular meetings and membership consideration
  - o Chaired by Director, Dietetics and Food Services
  - o Audit schedule for food services
  - o Students??

# BIG THANKYOU

- » CHQ Board and Executive for their consistent inclusion
- » Statewide FoodServices - Denise Cruickshank
- » Mr Jay Nair, Previous Food Services Manager, RCH

# Outcomes

» Will let you know...



# Annual Paediatric Society Qld Meeting September Friday 5 & Saturday 6 2014



Venue: **Brisbane Convention & Exhibition Centre**

*Incorporating the “Winter” Endocrine Symposium  
& the Turner-Gibson Oration*

Preferred hotel **Rydges Southbank** located beside conference venue

**Click below for ALL details and Registration**

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