



THE UNIVERSITY OF
NEW SOUTH WALES



CENTRE FOR CLINICAL GOVERNANCE RESEARCH IN HEALTH

Annual Report 2007



Centre for Clinical Governance Research
in Health

***The Centre for Clinical Governance Research in Health
undertakes strategic research, evaluations and research-
based projects of national and international standing with a
core interest to investigate health sector issues of policy,
culture, systems, governance and leadership.***

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CENTRE STAFF 2007



A Group of Centre staff at a meeting in 2007.

Standing (left to right): Sue Christian-Hayes, Professor Jeffrey Braithwaite, Joanne Travaglia and Robyn Clay-Williams.

Seated (left to right): Dr David Greenfield and Dr Marjorie Pawsey.

The full complement of Centre staff can be found in the Staff Listing section.

Mission Statement

MISSION

The Centre for Clinical Governance Research in Health is an international research capability in the Faculty of Medicine at the University of New South Wales. Its core focus and mission are to investigate and provide new knowledge about policy, governance, organisation, work and leadership in the health sector.

As a health research facility, the Centre strives to be theoretically and methodologically progressive and industry-relevant. To satisfy and achieve its mission the Centre draws on the unique expertise of the assembled researchers and undertakes exciting cross-disciplinary research with academic and industry collaborators. The researchers include staff members, visiting fellows, associates and partners. The Centre undertakes external collaborations within Australia and internationally, including with the:

- Centre for Health Informatics, University of New South Wales;
- Clinical Excellence Commission, New South Wales;
- Australian Commission on Safety and Quality in Health Care;
- Australian Council on Healthcare Standards;
- NSW Health Department;
- South Australian Health Department;
- ACT Health Department;
- Australian College of Health Service Executives;
- Australian Patient Safety Foundation;
- The Sax Institute, New South Wales;
- Australian Healthcare and Hospitals Association;
- Australian Health Care Reform Alliance;
- World Health Organization in Kobe, Japan;
- Shanghai Municipal Health Bureau, People's Republic of China;

Mission Statement

- Various agencies within the English National Health Service, United Kingdom;
- University of Southampton; United Kingdom
- University of Manchester; United Kingdom
- Medical Management Centre, Karolinska Institute, Sweden;
- Society for The Study of Organising in Health Care;
- Intermountain Health Systems, Utah, United States of America;
- Affinity Health Care;
- Faculty of Nursing, University of Technology, Sydney;
- Health Informatics Research and Evaluation Unit, University of Sydney;
- Ramsay Health Care; and,
- Australian Health Insurance Association.

Centre staff also have intellectual engagement with colleagues in the International Society for Quality Health Care (ISQua). Staff secure research funding from national and international sources and publish in international journals such as *British Medical Journal*, *The Lancet*, *Journal of the Royal Society of Medicine*, *Social Science & Medicine*, *Health Services Management Research*, *International Journal of Health Planning and Management*, *Journal of Health Services Research and Policy*, *Quality and Safety in Health Care*, *International Journal Of Health Care Quality Assurance and Organization Studies*.

Objectives and Principles

OBJECTIVES

The Centre has six main objectives. These are:

1. To be an internationally recognised reservoir of knowledge and expertise on clinical work management issues with a capacity to respond to requests for advice and consultation.
2. To undertake internationally recognised inter-disciplinary research and development projects on clinician led approaches to organising and managing clinical work across the full spectrum of care.
3. To provide a focal point for initiating and managing collaborative research and development projects on clinician led approaches to the organisation and management of clinical work involving partners drawn from other groups within the Faculty of Medicine, other departments within the University, Federal, State and Area health authorities and potential academic, policy and practitioner collaborators in other universities both within and external to Australia.
4. To provide a supportive environment for developing research skills of early health researchers from both clinical and social science disciplines.
5. To facilitate the development of education and training activities both within and outside the University in support of clinical governance.
6. To develop an international research reputation not simply in health but also in the base disciplines from which Centre members are drawn viz., policy studies, discourse analysis, sociology, organisational behaviour, social theory, anthropology, psychology, health informatics and clinical studies.

Objectives and Principles

PRINCIPLES FOR STUDIES

The Centre conducts internationally respected research studies. We have designed six principles for our research projects, and each study must satisfy these principles. These are:

- Utility and usefulness
- Highest quality results
- Feasible and realistic aims
- Propriety – to conduct our work ethically
- Accurate reporting and faithful interpretation of results
- Pursuing inclusivity.

Director's Review



JEFFREY BRAITHWAITE

" We are developing new theoretical ideas and producing exciting new findings. The rest of this report shows how"

The Centre's research profile in national and international context

This was another successful year: one that produced a great deal of fascinating data and well-received publications. We secured new grants in 2007, particularly a large Australian Research Council (ARC) Linkage Grant with our partner ACT Health examining inter-professional learning and practice over a four year period.

Exhibit 1: Systems change

When evaluating the effects of a health system-wide safety improvement program we found that 4 percent of the state's health professionals have been trained in NSW and now apply safety skills and conduct root cause analysis. While health professionals strongly support the safety improvement program they feel that further cultural change is required if the benefits of the safety improvement program are to be more fully achieved and sustained. [Braithwaite J, Westbrook MT, Travaglia JF, Iedema R, Mallock NA, Long D, Nugus P, Forsyth R, Jorm C, Pawsey M. Are health systems changing in support of patient safety? A multi-methods evaluation of education, attitudes and practice. *International Journal of Health Care Quality Assurance* 2007; pp. 585-601.]

The accompanying exhibits show some of the key observations we made in 2007. There is evidence that although change is slow, efforts to enhance the way health systems respond to demands to improve health care quality and safety are accelerating (Exhibit 1).

The extensive work we concluded in 2007, from work conducted over the past six years, looked at accreditation

in conjunction with partners such as the Australian Council on Healthcare Standards, Ramsay Health Care, the States and Territories

Director's Review

and the Australian Commission on Safety and Quality in Health Care. It has borne much fruit (Exhibit 2). There was until now not a great deal known about accreditation and its contribution to improved care, and we are doing highly-regarded work to help fill the gaps, particularly through a very large ARC project.

Our work examining how public health settings and health services are managed is an ongoing stream of activity. In an interesting study, we found that the managerial tasks of different types of managers are similar, and generic (Exhibit 3). Whether one is a clinician with a limited range of managerial responsibilities, the director of a clinical unit or department, the head of a stream of care across an area or regional health service or

Exhibit 2: Accreditation

The necessity for an empirically grounded, comprehensive evidence base for accreditation has long been recognised. Without this, the varying positive and negative views about accreditation will remain anecdotal, influenced by ideology or preferences, and driven by such biases. This review of health care accreditation research literature reveals a complex picture. There are mixed views and inconsistent findings. Only in two categories were consistent findings recorded: promote change and professional development. Inconsistent findings were identified in five categories: the professions' attitudes to accreditation; organisational impact; financial impact; quality measures; and program assessment. In the remaining three categories – consumer views or patient satisfaction; public disclosure; and surveyor issues – we did not find sufficient studies to draw conclusions. [Greenfield D, Travaglia J, Braithwaite J, Pawsey, M. *An Analysis of the Health Sector Accreditation Literature*. Sydney: Centre for Clinical Governance Research, 2007.]

Exhibit 3: Management Science

An examination of the work pursuits of public health managers found that the work activities of public health managers map broadly to those of clinician-managers. The paper supports the general view that public health management is complex and challenging, is conducted across varied settings, and the tasks facing public health managers are diverse. They experienced all the chaotic, fragmented and testing times that general and other managers experienced, and struggled to impose order on these. [Braithwaite J, Luft S, Bender W, Callen J, Westbrook JI, Westbrook MT, Mallock NA, Iedema R, Hindle D, Jochelson T. The hierarchy of work pursuits of public health managers. *Health Services Management Research* 2007; 20: pp. 71-83.]

a senior clinician-executive in a large health service organisation, what has to be done - manage costs and budgets, handle people problems, address logistical issues, fix organisational problems, and improve systems of care - remains relatively constant, although the mix of activities and range of responsibilities alters by position.

Director's Review

Organisational culture is a key variable in health sector performance. One untapped source of new ideas lies in the way culture emerges from the naturally selected behaviours of people. Humans are evolved to be tribal, wary of other groups, and when under pressure protect our

Exhibit 4: Culture

Evolutionary psychology was used to examine the deep conceptual underpinnings of trust and communication breakdowns via selected health inquiries into things that go wrong. The paper finds that armed with an evolutionary approach one can predict survival mechanisms such as turf protection, competitive strategies, sending transgressors and whistleblowers to Coventry, self-interest, and politics and tribal behaviors. [Braithwaite J, Iedema RA, Jorm C. Trust, communication, theory of mind and the social brain hypothesis: deep explanations for what goes wrong in health care. *Journal of Health Organization and Management* 2007; 21 (4/5) pp. 353-367.]

turf and strive to survive. How do such behaviours manifest in modern health settings? Exhibit 4 briefly summarises our analysis of this phenomenon. This paper won a prestigious award from Emerald publishers as one of its highly commended papers in 2007.

Much of the Centre's work in recent years is in patient

safety. This is an area requiring multi-disciplinary research skills in order to understand and investigate it theoretically and empirically.

In Exhibit 5 we present a summary of work for the Clinical Excellence Commission, NSW on this topic. In this monograph we discuss the views of many clinicians who are involved in patient care and were canvassed, via 30 focus groups, about the extent to which they are affected by patient safety issues, what they thought about efforts to improve patient safety and how they were contributing to the work of making care safer and of higher quality.

Exhibit 5: Patient Safety

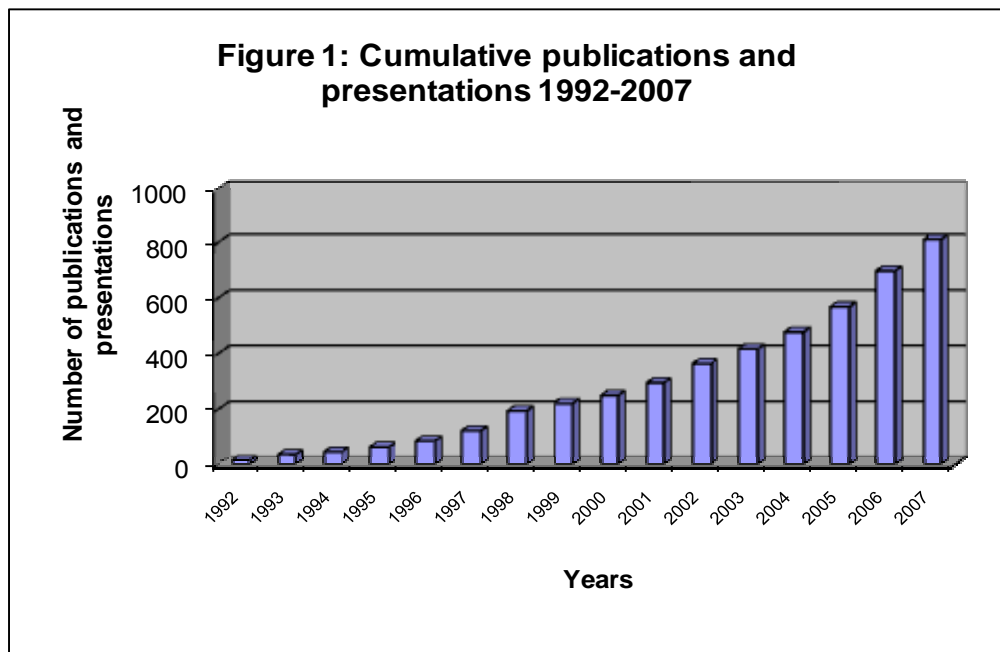
In this study we gathered the views of nurses, doctors, pharmacists, allied health professionals, academics and managers in 30 focus groups across NSW. We sought their opinions about the causes of and possible solutions to breakdowns in patient safety, and asked them what they thought it would take to achieve the goal of reducing errors and improving safety for all patients. The study shows that patient safety is a problem requiring cohesive and coordinated solutions. Participants were strongly committed to the current direction and strategies for addressing medical errors and adverse events, and believed that more work can and should be done. There was a firm belief that patient safety problems occurred not so much as a result of individual error, but rather as a result of a combination of poor communication, ineffective teamwork, cultural barriers and inadequate or inappropriate resource management. [Braithwaite J, Travaglia J, Nugus P. *Giving a Voice to Patient Safety In New South Wales*. Sydney: Centre for Clinical Governance Research, 2007.]

Director's Review

The results are encouraging, and indicated that there was much goodwill and collaborative work going on in NSW, although few people underestimate the magnitude of the task before us.

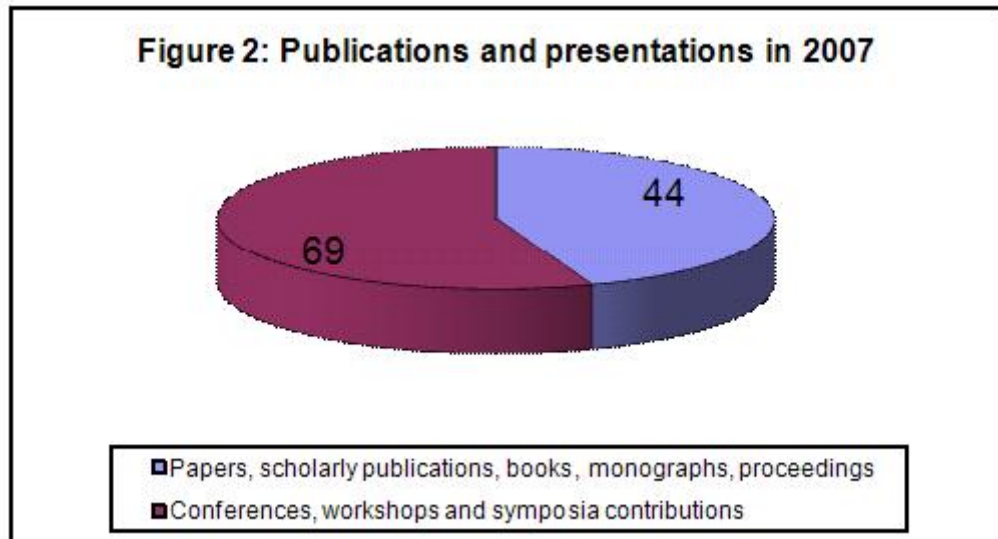
Facts and figures: historical and current profile of the Centre's activities

Carrying on the tradition of past years, then, the Centre continues to be a productive place conducting stimulating research. There were 113 scholarly outputs this year: these include substantial written contribution and a range of presentations made here and overseas (Figure 1).

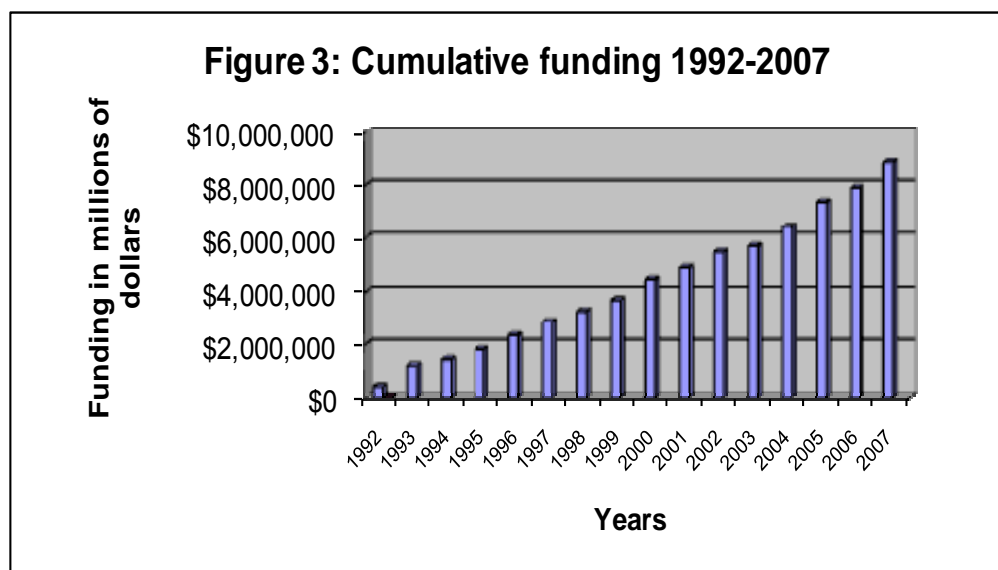


Director's Review

Figure 2 shows the breakdown of our research. Some 44 outputs were written contributions, ranging from papers in prestigious journals to conference proceedings to chapters in books to Centre reports and monographs. There were 69 presentations to conferences, symposia and workshops.



Success in attracting funding continued. The amount of cumulative Centre funding exceeded \$8.8 million in 2007 (Figure 3).



Director's Review

Conclusion

The year's highlights were the continuing contribution to national and international developments in health systems reform. As in prior years our commitment to developing research-based and theoretically-grounded solutions to clinical governance problems remains our key focus.

A handwritten signature in black ink, appearing to read 'Jeffrey Braithwaite', written in a cursive style.

Jeffrey Braithwaite, PhD
Professor and Director
31 May 2008

Management Committee

It is a requirement of the University that a Management Committee be established for each Centre. The Management Committee, according to University guidelines, should consist mainly of University staff with a direct interest in the affairs of the Centre including the Dean of the relevant faculty as the chairperson.

Professor Terence Campbell AM

*Chairperson
Senior Associate Dean
Faculty of Medicine
(to November 2007)*

Professor Richard Mattick

*Director, National Drug and
Alcohol Research Centre*

Professor Jeffrey Braithwaite

Director of the Centre

A/Professor Rosemary Knight

*Head, School of Public Health
and Community Medicine
(to mid 2007)*

Professor Timothy Devinney

*AGSM Professional Research
Fellow, Australian Graduate School
of Management, UNSW*

A/Professor Deborah Black

*Presiding Member
Faculty of Medicine*

Professor Clifford Hughes AO

*Chief Executive Officer
Clinical Excellence Commission*

Mr Alan Hodgkinson

*Deputy Head
School of Public Health and
Community Medicine
(from mid 2007)*

Professor Denis Wakefield

*Chairperson
Associate Dean (Research)
Faculty of Medicine
(from November 2007)*

The Centre's Management Committee met on three occasions during 2007: on 19 April, 29 August and 13 December 2007. Broadly, the Committee offered strategic advice to the Centre over the year. It affirmed the Centre's progress on its strategic plan 2004-2007, accepted the various reports and documents describing the Centre's work including the annual report, financial overview and publications, and noted the Centre's strengths and forward-moving trajectory in grants, publications and collaborations.

Management Committee



Some Members of the 2007 Management Committee

Standing Professor Jeffrey Braithwaite, Associate Professor Deborah Black,
Professor Denis Wakefield (Chairperson)

Seated (left to right): Professor Clifford Hughes and Mr Alan Hodgkinson

Staff Listing

DIRECTOR

Professor Jeffrey Braithwaite BA *UNE*, DipLabRelsandtheLaw *Syd*, MIR *Syd*, MBA *Macq*, PhD *UNSW*, FAIM, FCHSE

BUSINESS MANAGER

Ms Sue Christian-Hayes

SENIOR RESEARCHER

Dr Marjorie Pawsey MB BS *Syd*

RESEARCHERS

Dr David Greenfield BSc, BA, BSocWk *UQ*, Grad Cert IT *UTS*, PhD *UNSW*

Dr Jane Lloyd Bapp Sci, MHA, PhD

Dr Justine Naylor B. App. Sc. Phd *Syd*

Dr Peter Nugus MAHons *UNE*, Grad Dip ED *UTS*, PhD *UNSW*

Ms Joanne Travaglia BSocStuds (Hons) *Syd*, Grad Dip Adult Ed *UTS*, MEd

VISITING PROFESSORS AND RESEARCH FELLOWS

Dr Bon San Bonne Lee MB BS, Grad Cert IT, M Med, MHA, FFARM

Dr Philip Hoyle MBBS, MHA *UNSW*, FRACPA

Mr Brian Johnston BHA *UNSW*, Dip Pub Admin *NSW Inst of Tech*

Ms Nadine Mallock Dip Inform Med (BHI, MHI) *Heidelberg*

Professor John Øvretveit BSc (Hons), MPhil, PhD, C.Psychol, MIHM

Staff Listing

Ms Maureen Robinson Dip Phty, Grad Cert Paed Phty, Cert Mgt Ed, Cert HSM, MHA

Professor William Runciman BSc (Med) MBBCh, FANZCA, FJFICM, FHKCA, FRCA, PhD

Conjoint Associate Professor Mary Westbrook AM, BA, MA (Hons), PhD, FAPS

Professor Les White MBBS *Syd*, FRACP, DSc *UNSW*, MRACMA, MHA *UNSW*

FULL TIME SCHOLARSHIP CANDIDATES

Ms Judie Lancaster BA, LLB (Hons), MBioeth, Diploma of Nursing, Grad Cert HEd, Grad Dip Legal Practice

Ms Barbara Daly RN, MHA *UNSW*

Ms Robyn Clay-Williams, BEng

OFF CAMPUS RESEARCH CANDIDATES

Mr Greg Fairbrother RN, BA *UWS*, MPH *Syd*

Ms Lena Low Grad Dip Mgmt, MBA

Dr Desmond Yen MBA, DBA, FAICD

Ms Sally Nathan BSc, MPH *UNSW*

Ms Eilean Watson RN, BSc (Hons I), MPHEd *UNSW*

Ms Jacqueline Milne BHA, M.Com, Grad Cert HeD *UNSW*, Grad Dip Lang Teach (TESOL) *UTS*, RN, AFCHSE

Staff Profiles



JEFFREY BRAITHWAITE

Director

Professor Jeffrey Braithwaite is Professor in the School of Public Health and Community Medicine and Director of the Centre. He joined the Centre as a Commonwealth Casemix Research Fellow in 1994, and he was Head of the School of Health Services Management until it merged into the School of Public Health and Community Medicine in 2001. In 2003 Jeffrey was awarded a medal from the Uniting Church for Services to Older People. In 2004 he was a recipient of a Vice-Chancellor's Award for Teaching Excellence. In 2005 he received the President's Award of the Australian College of Health Services Executives in New South Wales with a citation that reads *"In recognition of your outstanding commitment to the College"*.

Jeffrey has contributed more than 600 professional publications and presentations in his field of expertise, is the recipient of research grants in excess of \$17 million, holds multiple Australian Research Council, National Health and Medical Research Council and industry grants and has supervised or currently supervises a cohort of 40 higher degree research students. He has managed, consulted, taught and researched widely in Australia and a number of countries including the People's Republic of China, Papua New Guinea, Singapore, Hong Kong, Japan, Canada, the United States of America and the United Kingdom. He has an international reputation in leadership and organisational behaviour in health settings, and his specific research interests include clinicians as managers, organisational theory, the future of the hospital, organisational design of hospitals, change management in health care, network theory, the evolutionary bases of human behaviour, quality and safety in health care and health policy development and implementation.

Staff Profiles



SUE CHRISTIAN-HAYES

Business Manager

Sue has been employed at the Centre for many years. Her primary role at the Centre is to provide administrative support to Management Committee and the Director of the Centre, as well as to do the financial management for the Centre's projects. Sue has worked in both the private and public sector and has experience in a variety of projects. Her work underpins much of the work of the Centre and provides the infrastructure and business support needed for the research team to flourish.

Staff Profiles



DAVID GREENFIELD

*Research Fellow and Adjunct
Lecturer, Faculty of Medicine*

Dr David Greenfield is a Research Fellow in the Centre and adjunct lecturer in the School of Public Health and Community Medicine. David's research focus is the development and enactment of practice and how organisations shape and mediate learning and knowledge management. His research inter-

ests include community of practice, innovation and change in health services, organisational culture and climate, leadership, learning and knowledge management and health service accreditation. David supervises several PhD students and reviews for academic journal.

David is working on the ARC Linkage project "*An action research project to strengthen inter-professional learning and practice across the ACT Health System*" The project is a collaborative action research partnership using interprofessional learning as the basis for improving interprofessional practice. The partners are attempting to evoke culture change in the way health professionals work together to deliver services. The project stands at the intersection of three industries – tertiary education, professionally-based education and the health system, and it spans both the public and private health sectors.

Over the past three years David was part of the team researching health care accreditation. Working with industry partners, the Australian Council on Healthcare Standards and Ramsay Health Care, the project examined the relationships between health service accreditation and clinical and organisational performance, and survey team and surveyor reliability in accreditation.

David holds Bachelor's degrees in Science, Arts and Social Work from the University of Queensland, a Graduate Certificate in Information Technology from University of Technology Sydney, and a PhD from the University of NSW. David's skills are in supervision and conflict resolution-mediation.

Staff Profiles



JO TRAVAGLIA

Research Fellow

Jo Travaglia is a medical sociologist with a community work background who has been involved in health services research and practice for over 25 years. She has a particular interest in the health and safety of vulnerable groups, both patients and staff. Jo has led research and evaluation projects on a range of topics relating to: ageing and ethnicity;

cultural competence and adult education; critical theory, disability, ethnicity and health; gender and ethnicity; equity and the utilisation of home and community care services; place, space and health; and the impact of diversity on access to, and the provision of, quality health care services.

Jo's Honours thesis "The garbled voice" was amongst the first Australian research into the experiences of people with disabilities from culturally and linguistically diverse backgrounds. Since 1990 she has researched and taught in the areas of adult education, diversity, ethnicity, gender and disability in health, discrimination, cultural and other forms of competence, critical pedagogy, organisational and cultural analysis, sociology of education, medical sociology and research methods.

Over the last five years, Jo has worked on the Centre's evaluation of the impact of the Clinical Excellence Commission programmes in NSW. A major piece of work within this evaluation was a study of the NSW health professionals' concerns about, and attitudes towards, patient safety and incident reporting. She is currently working on a large ARC funded grant on interprofessional learning across ACT Health. Jo is finishing her PhD, using Bourdieu's theories to explore the location of vulnerability within the field of patient safety.

Staff Profiles



PETER NUGUS

Research Fellow

Peter's previous project is part of a program of research undertaken by the Centre on behalf of the NSW Department of Health's Clinical Excellence Commission, and realised a completed PhD. The research context is the enlarging area of clinical expertise of Emergency clinicians which has been well

documented. However, very little research has looked at the role of Emergency doctors and nurses as 'gate-keepers' of the hospital. The two study questions are: What is the organisational role of ED clinicians? and further: how do they accomplish this role? The completed fieldwork consisted of undertaking eight months of ethnographic observation and interviewing Emergency and non-Emergency clinicians and in the Emergency Departments of two tertiary referral hospitals in Sydney.

Drawing on the theory of symbolic interactionism, a grounded methodology and methods of discourse analysis, the thesis will describe the way Emergency clinicians organise the pathway of the patient through the hospital by negotiating a complex web of variables. These include medical knowledge, role-based and interdepartmental hierarchies, work structures and process, communication and negotiation skills, organisationally imposed time priorities and personal and professional relationships.

Peter is now working on the large ARC Linkage Project in inter-professional learning, and is stationed in Canberra. He works daily with other centre staff and the industry partner, particularly ACT Health, in the field.

Staff Profiles



LES WHITE

Visiting Professor

Les White joined the Centre in 2000 as partner-investigator on the study 'A Project to Enhance Clinician Managers' Capacities as Agents of Change in Health Reform'. Les is concurrently the Executive Director at the Sydney Children's Hospital, the John Beveridge Professor at the University of New South Wales, and a Visiting Research Professor in the Centre. His research interests include paediatric cancer, health systems, cultural change in paediatric institutions, and the ways in which clinicians can balance both managerial and clinical interests.

BON SAN BONNE LEE

Visiting Fellow

Bon San Bonne Lee is a specialist in spinal rehabilitation at the Prince of Wales Hospital (POW) Spinal Medicine Department and Director of the POW Spinal Pressure Care Clinic (SPCC). He works with the Centre on the ARC Discovery grant: Preventative Health Care: are clinicians identities attuned to the requirements of health care reform? His work is at the intersection between the clinical-management interface, and he is interested in this intersection both in his clinical work and his research. The CCGR and SPCC have collaborated on publications exploring clinical outcomes and work practices including detailed ethnography of the SPCC multidisciplinary intervention including; management, communication and environmental interactions.

Staff Profiles

PHILIP HOYLE

Visiting Fellow

Philip joined the Centre in 2000 and is a partner investigator on the study 'A Project to Measure and Manage the Psychological Impact of Reform on Clinician Managers as Agents of Organisational Change'. Philip is the Director of Acute Services for the Northern Sydney Area Health Service and has an interest in evidence-based medicine, evidence-based management and organisational change.



NADINE MALLOCK

Visiting Fellow

Nadine is a Visiting Researcher in the Centre. She has a background in Informatics in Medicine and Business Management with Bachelor and Masters qualifications from the University of Heidelberg, Germany. Until April 2005, Nadine was a Research Of-

ficer at the Centre for Clinical Governance Research. Her research interests include standardisation of clinical care, in particular the construction of "ideal" clinical pathways, and quality improvement as well as evaluation tools and methods.

As a visiting researcher, Nadine has been involved in a range of projects at the Centre. These include the investigation of how managers from Singapore and Australia use their time and an analysis of the Australian and German health care systems.

Staff Profiles



BRIAN JOHNSTON

Visiting Fellow

Brian Johnston has been the Chief Executive of the Australian Council on Healthcare Standards (ACHS) since November 2000. He has been professionally involved with the ACHS since being appointed as a surveyor in 1985 and was also previously a member of the Standards Committee for six years. He was instrumental in gaining ACHS' Board support for the ACHS contribution as the major industry partner in the

Centre's Australian Research Council Linkage project on examinations of the relationship between accreditation and clinical and organisational performance.

Mr Johnston and Professor Jeffrey Braithwaite jointly convene a group of health care accreditation agencies to collaborate on research into accreditation. Mr Johnston's commitment to research is also demonstrated by the establishment of an ACHS Research Panel to advise the ACHS Board on the strategic direction for research into quality improvement in health care.

Mr Johnston has qualifications in health administration from the University of New South Wales, and in public administration from the NSW Institute of Technology (now the University of Technology, Sydney). He is a Fellow of the Australian College of Health Service Executives, a Fellow of the Australian Institute of Company Directors and a Fellow of the Australian Institute of Management. He is a member of the Management Committee of the Royal Australian College of Surgeons' Australasian Safety and Efficacy Register of New Interventional Procedures-Surgical (ASERNIP-s) and is also a National Councillor and former Treasurer of the Australian Healthcare and Hospitals Association.

Staff Profiles



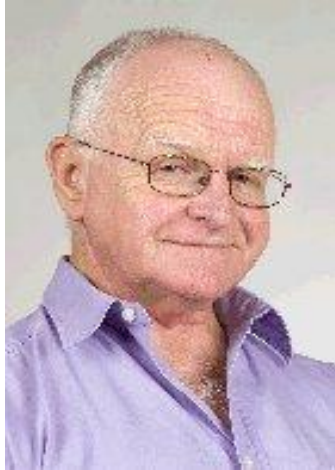
MARJORIE PAWSEY

Visiting Fellow

Dr Marjorie Pawsey, has experience in standards development, the delivery of accreditation services and in implementing programs to promote the quality and safety of health care. She was a partner investigator in the Australian Research Council (ARC) Linkage Project *Examinations of the relationship between accreditation and clinical and organisational performance*, 2005-2007. She was actively involved in the administration of the project and the development of the tools to measure clinical performance and to test the reliability of the assessment by the accreditation surveyors. She is now participating in writing papers and preparing presentations to report on the findings of the project.

Marjorie retired from her role as Principal Research Consultant at the Australian Council on Healthcare Standards (ACHS) at the end of 2007 to spend more time grandparenting. During the year she had a major role in a multi-method evaluation of the development of the 4th edition of the ACHS EQUiP (Evaluation and Quality Improvement Program), she acted in her old role as the Executive Manager, Development, for six weeks while the Executive Manager was on leave and she was the primary author of the ACHS *National Report on Health Services Accreditation Performance 2003–2006*. She presented results from the ARC project on the association between clinical indicator and accreditation performance at the 5th Australasian Conference on Safety and Quality in Health Care in Brisbane in August. She also examined candidates for the Australasian Association for Quality in Health Care (AAQHC) Fellowship Program as a member of the Board of Examiners. In her role as a reviewer of accreditation standards against the International Principles for Healthcare Standards for the International Society for Quality in Health Care (ISQua), she was a team member for the review of two sets of standards.

Staff Profiles



BILL RUNCIMAN

Professorial Research Fellow

Bill Runciman is Professorial Research Fellow – Patient Safety at the Royal Adelaide Hospital, Joanna Briggs Institute and University of Adelaide. He has been President of the Australian Patient Safety Foundation since its inception in 1988.

Qualifications

BSc (Med) (1965), MBBCh (1969), (Witwatersrand), FFARACS (Anaesthesia) (1975), FFARACS (Intensive Care) (1981), PhD (Flinders University of South Australia) (1983), FHKCA (Hon) (1983), FRCA (1983), FANZCA (1992), FFICANZCA (1995), FJFICM (2002)

Awards

William Russ Pugh Award of the Australian Society of Anaesthetists, 2008

The Gilbert Brown Prize of the Royal Australasian College of Surgeons (RACS) (1978). The Lennard Travers Professorship (Faculty of Anaesthetists) (1982-83). The John Mitchell Crouch Fellowship of the RACS (1987) Jubilee Medal of the Faculty of Medicine of the University of Witwatersrand (1997).

He has been on International Task Forces on Safety in Anaesthesia and in Intensive Care (1989-1995), the Australian Council for Safety and Quality in Health Care (2000-2005), the Australian Health Information Council (2004-2006) and is co-coordinator of working groups of the World Alliance for Patient Safety of the World Health Organization which are developing the International Classification for Patient Safety and reviewing research methods and measures.

Professor Runciman is Visiting Professor at the Centre for Clinical Governance Research of the University of New South Wales and is an Adjunct Professor at the Psychology Institute of the University of South Australia.

He has published over 200 scientific papers and chapters and has given over 500 lectures by invitation.

Staff Profiles



MARY WESTBROOK

Conjoint Associate Professor

Conjoint Associate Professor Mary Westbrook's main areas of research are organisational behaviour, health professionals' work practices and career development, health consumers, safety in health care, the psychology and sociology of illness, disability and ageing, ethnicity and gender. Mary has more than 200 professional publications including over 120 research articles in peer reviewed journals.

In 2007 Mary's research work at the Centre centred on evaluation of the NSW Incident Information Management System (IIMS) introduced by the Department of Health in 2004-2005; the attitudes and practices of health practitioners regarding patient safety both in Australia and cross-culturally; and cross-cultural differences in health managers' work practices and the pressures they experience. She also provided advice on research design and analysis to other members of the Centre.

Before joining the Centre Mary was Associate Professor in the Department of Behavioural Science, Faculty of Health Sciences, The University of Sydney. She is a Fellow of the Australian Psychological Society. In 1998 Mary was made a Member of the Order of Australia for 'services to people with disabilities, in particular those suffering from post-polio syndrome, and to education in the field of health sciences research'. She is a member of the Board of the Northcott Society, one of the largest Australian NGOs providing services for people with physical disabilities. Mary is also a trustee and member of the Advisory Board of the Thomas Hepburn Lennox Scholarship Fund which provides scholarships for people with physical disabilities to pursue tertiary education, and is a member of the Medical Advisory Board of Post-Polio Health International, USA. She runs the Post-Polio Network (NSW) Inc's world-

Staff Profiles



MAUREEN ROBINSON

Research Fellow

Maureen Robinson is a Director of Communio. Communio's and Maureen's key work focuses on service improvement particularly in the fields of patient safety and health care quality. She has an impressive track record of leading and creating reform in health care quality including establishing and developing the priorities for

quality and safety in the New Zealand health and disability sector, leading the review and rewrite of the Evaluation and Quality Improvement Program standards for the Australian Council on Healthcare Standards, developing Australia's first state-based health quality and clinical governance framework and designing and overseeing the implementation of the NSW Incident Information Management System. Maureen has clinical experience in both the Australian and USA health systems and an extensive background using quality improvement to enhance service delivery and patient care. Maureen was a member of the Australian Council for Safety and Quality in Health Care, founding member of the State Quality Officials Forum and a member of the National Health Priorities Action Council.

JANE LLOYD

Postdoctoral Research Fellow

Jane joined the Centre in November 1997 as a Postdoctoral Research Fellow. Jane holds a Bachelor's degree in Applied Science (Health Education) from the University of Canberra and a Masters in Public Health from the University of New South Wales. Jane has over ten years experience in public health, project management and health services research. She has held a number of positions in government, non government and academic settings within Australia and overseas. For example, in 1999, Jane taught epidemiology at the Institute of Health Science in the Maldives and established the Institute's first female soccer team! From 2000-2002, Jane was employed as Executive Officer, New South Wales Public Health Network. In 2003, Jane moved from Sydney to Darwin to manage a research project investigating the incidence and prevalence of diabetes and related conditions among Aboriginal Australians living in the Darwin Region.

Jane's PhD, submitted in October 2007, examined the implementation of Aboriginal health policy. The research found that Aboriginal health policies evolve and devolve as they are implemented. This dynamic process is a function of workforce structure, professional and systems culture, systemic under resourcing of Aboriginal health and diminished management capacity. These influences allow and encourage an unconscious tendency among health professionals to implement aspects of policy that are most familiar to them rather than according to evidence of population needs. This tendency undermines the effectiveness of policy and the capacity of the health care system to redress inadequate provision of health services. From these work and research experiences, Jane has built up expertise spanning health policy, public health, Aboriginal health and qualitative research methods. Her research interests include equity, health systems effectiveness, and policy implementation issues.

Full Time Scholarship Research Students



JUDIE LANCASTER

Supervisor: Professor Jeffrey Braithwaite

Co-supervisor: Dr David Greenfield

PhD: *The role of the surveyor in leading the way to quality improvement in health care*

This research is a part of the Australian Research Council Linkage Project between the Centre and Industry Partners. It is one of two studies that is exploring the organisational influence of accreditation surveyors that constitute the larger research project.

The project is an ethnographic study of three senior executives of different health services who also serve as external accreditation surveyors. The objective is to firstly identify the factors that motivate these professionals to become surveyors and assume the responsibilities of that role in conjunction with their ongoing professional roles. Secondly, it is to examine how the training and experience of a surveyor interacts with the role of an executive member of an area health service. Finally, it is to explore the extent to which the skills and experience gained from being a surveyor provide a valuable resource that is passed along through organisational networks of influence.

The methodology comprises comprehensive interviews with the three participant surveyors and thirty interviews with colleagues nominated as working closely with each surveyor. The overall aim is to document what a senior executive working in an area health service seeks in becoming an accreditation surveyor and the extent to which those goals are fulfilled by participation in the process. The study will also produce a map of the networks through which the influence of these subject surveyors travels and identify potential benefits for area health services from having a surveyor on staff.

Part-time/Off-campus Research Students



ROBYN CLAY-WILLIAMS

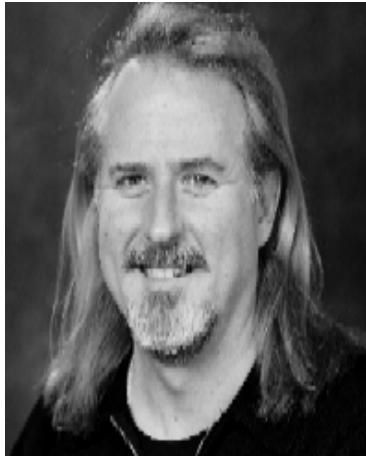
Supervisor: Professor Jeffrey Braithwaite

Co-supervisor: Dr Ross Kerridge

PhD: *Multidisciplinary Teamwork in Public Health*

The study which Robyn is contributing has as its title *Multidisciplinary Teamwork in Public Health – an evaluation of attitude and behavioural changes resulting from a Crew Resource Management (CRM) Intervention*. Although strong teamwork skills appear intuitively to be important in reducing error and achieving high quality clinical and organizational performance in Public Health, few studies have been undertaken to prove this hypothesis. Robyn's PhD investigates the efficacy of aviation-style Crew Resource Management (CRM) training in improving public health safety, by evaluating attitude and behavioural changes in multi-disciplinary teams resulting from implementation of a CRM intervention in the Australian health care field. Robyn spent 24 years in the RAAF prior to starting her PhD. She completed a Bachelor of Engineering Degree in electronic engineering in the early 1980s, and has trained as a military pilot, flight instructor and test pilot. She was the operational specialist on the advisory board for implementation of the latest generation CRM teamwork training into Australian military aviation, and is interested in the applicability of this type of training to other disciplines.

Part-time/Off-campus Research Students



GREG FAIRBROTHER

Supervisor: Professor Jeffrey Braithwaite

Co-supervisor: Professor Mary Chiarella

PhD: *Organising nursing care in the acute environment: Moving from individual to collective care models*

Greg is the Nursing Manager, Research at Prince of Wales Hospital. His brief in this role is to work with nurse practitioners, clinical nurse consultants and other active nurse thinkers on methodology, analysis and writing. He co-publishes widely and researches independently in the drug and alcohol field. He holds a conjoint appointment as Research Fellow with The University of Technology's Faculty of Nursing Midwifery and Health. He gained RN qualifications from the Hornsby & Ku Ring Gai Hospital in 1986 and worked as a medical nurse at Royal Prince Alfred Hospital. From the early 1990s he has worked full time as a nurse researcher in South Eastern Sydney/Illawarra. He was awarded a BA (Applied Communication) from the University of Western Sydney in 1990 and a Master of Public Health from the University of Sydney in 1996.

His PhD topic is concerned with organising nursing care in the acute hospital. Social action and quasi-experimental research designs were employed to trial staff-generated care models at two Sydney hospital campuses. Nursing care models are receiving significant attention contemporarily – this project is particularly focused on the usefulness of collective practice-centred rather than individual practice-centred models of care. Included in Greg's doctoral research program is a post structuralist study – exploring collectivity/individualistic discourses underlying the talk of a sample of senior Sydney nurse executives. A statistical validation study of the author-designed workplace satisfaction questionnaire used as outcome measures in the quasi-experiment is also included.

Part-time/Off-campus Research Students



JACQUELINE MILNE

Research Associate

Jacqueline Milne joined the Centre in May 2007 as a part-time research associate. Her major role was to work on a literature review of tools and methods used in inter-professional learning and inter-professional practice. The Review was completed in December and has provided a source of reference for the Centre's collaborative action research project with ACT Health. Jacqueline plans to commence a PhD through the Centre in 2008. The area of her research will be inter-professional learning and inter-professional practice with a specific focus on International Medical Graduates and quality and safety in health care.

Part-time/Off-campus Research Students



LENA LOW

Supervisor: Professor Jeffery Braithwaite

Co-Supervisor: A/Professor Anna Whelan

PhD: *The schema of complexities that impact on medical clinicians in their role of expert peer surveyors.*

Lena works as Business Manager responsible for Business Services and Business Development at the Australian Council on Healthcare Standards (ACHS). She is also a surveyor for the International Accreditation Program provided by the International Society for Quality in Health Care (ISQua).

Her research topic is related to the accreditation program of health care organisations. As part of the accreditation program, survey teams are selected to review the health care organisations. These survey teams may comprise “expert peer” surveyors still working in the industry or “professional” surveyors who are no longer working in the industry and are paid as consultants for the survey. Medical clinicians have been selected for this study as they represent clearly defined expert peers in surveyor groups.

The research aims to identify the schema of complexities that impact accreditation and their influence on medical clinicians in their role as expert peer surveyors. The intent is also to develop a model based on these complexities to study its impact on surveyors and accreditation and review its effectiveness and application in a practical environment and in line with existing literature. Lena believes that the study will also provide invaluable information on the audit culture and the bureaucratisation of professional-managerial relationships in health.

Part-time/Off-campus Research Students



SALLY NATHAN

Supervisor: Professor Jeffrey Braithwaite

Co-supervisor: Dr Niamh Stephenson

PhD: *Consumer participation: Positioning, discourse and influence in health-care decision-making*

Sally has a Bachelor of Science in Psychology (Honours) and a Masters degree in Public Health. Sally's PhD is part of a wider ARC Linkage study examining the relationship between health service accreditation and clinical and organisational performance. Sally's PhD will specifically examine the dynamics of the interaction between health professionals and consumer representatives in health-care decision-making forums in a sample of health services participating in the larger study.

The study is breaking new ground by examining consumer participation in 'real time', rather than through the examination of case studies retrospectively, allowing a window into the dynamics of the interaction between health professionals and consumer representatives. Very little research has addressed the role of consumer representatives in health-care decision making forums or attempted to directly observe how and in what ways consumer participation influences health care policy and practice. This study will therefore contribute to our understanding of: how the underlying values and ideologies of health professionals, experts and consumers may influence the nature and outcomes of consumer participation in health care decision-making; the role of both internal and external discourse in constraining or supporting the influence of consumer representatives and advocates in health care decision-making fora; and the current capacity and potential of consumer representatives and advocates to influence in existing health care decision-making contexts and how their influence can be maximised.

The aims of the study will be met via a case study design using ethnography as a method to understand how consumer representatives participate at the selected health services and endeavour to represent and advocate the interests of the broader community.

Research Student Projects

In the following we list the names of students and their research topics which are or have recently been under Centre staff supervision.

Candidate	Degree	Research Topic	Supervisor
Sam Sisouvanth Raine	BSc Honours	Lao refugee experiences with health services in Australia	Anna Whelan
Wolfgang Bender	Masters project	Analysing public health management: what do public health managers do?	Jeffrey Braithwaite
David Hill	Masters project	Topic to be defined	Anna Whelan
Sabine Luft	Masters project	Using Textsmart to examine case texts: a validation and evaluation	Jeffrey Braithwaite
Luc Betbeder	MHA project	Management and user perspectives on the use of email by clinical academic staff in a public hospital in New South Wales	Jeffrey Braithwaite
Stephen Brand	MHA project	A study to examine the role and purpose of the Special Care Suite for mental health patients in the Queanbeyan District Hospital, NSW	Jeffrey Braithwaite
Barbara Daly	MHA project	Access block at POW	Rick Iedema
Margaret Fitzgerald	MHA project	A case study of priority setting using program budgeting and marginal analysis in an Australian Division of General Practice	Jeffrey Braithwaite

Research Student Projects

Candidate	Degree	Research Topic	Supervisor
Jim Higgins	MHA project	To close or not to close! What will be the reaction	Anna Whelan
Carol Horbury	MHA project	An empirical examination of the leadership and management perspectives of Nursing Practice Coordinators compared with the leadership framework of Queensland Health	Jeffrey Braithwaite
Steve Isbel	MHA project	Topic to be defined	Anna Whelan
Annette Kay de Mestre	MHA project	Medical Officer's Orientation Program	Anna Whelan
Bonne Lee	MHA project	Spinal plastics outpatient clinic at RNSH: analysis	Jeffrey Braithwaite
Peter Merrett	MHA project	Occupational Health and Safety in Health	Anna Whelan
Jennifer O'Connell	MHA project	An analysis of a major teaching hospital after thirty years: reflections with a mirror	Jeffrey Braithwaite
Gail O'Donnell	MHA project	The future of the hospital: perspectives and themes	Jeffrey Braithwaite
Ye Rong	MHA project	Attitudes, beliefs and barriers towards mental health services amongst Chinese migrants in Sydney	Anna Whelan
Tamsin Waterhouse	MHA project	Policy, practice and the technology imperative	Jeffrey Braithwaite

Research Student Projects

Candidate	Degree	Research Topic	Supervisor
Asmah Bte Mohammed Noor	MHSM project	A study of job satisfaction among staff in intensive care	Jeffrey Braithwaite
Tony Austin	MPH project	Organisational design of a coordinated military health wing: issues of structure and structuring	Jeffrey Braithwaite
William Baguma Mbabazi	MPH project	Knowledge, Attitude and Practice of Male Partners of Postmenopausal Women	Anna Whelan
Graham Barrington	MPH project	Quality at a public hospital – initiatives and responsibilities of the medical directorate	Jeffrey Braithwaite
Wolfgang Bender	MPH project	Refugee clients in a specialised outpatient service: quality assurance analysis of the clinical services provided by the Refugee Health Service	Anna Whelan
Tushar Bhutta	MPH project	Systematic review for the Cochrane database	Jeffrey Braithwaite
Darren Carr	MPH project	An examination of the strategy of a Division of General Practice	Jeffrey Braithwaite
Ekam-bareshwa Mahalakshmi	MPH project	Educational process with IIMS	Mary Chiarella Jeffrey Braithwaite

Research Student Projects

Candidate	Degree	Research Topic	Supervisor
Julie Flood	MPH project	NES workers and understanding of blood borne occupational health risks	Anna Whelan
Jacinta Gallagher	MPH project	Participant observation of an information technology implementation	Jeffrey Braithwaite
Erica Grey	MPH project	Capacity building model in Cancer Care Centre	Anna Whelan
Sabine Luft	MPH project	Immune status in overseas born children of recently arrived refugees and migrants with refugee-like background: analysis of a pilot program at an Intensive English Language Centre	Anna Whelan
Ann Mehaffey	MPH project	Communication strategies and tools used by primary health care/community health care staff in involving consumers and stakeholders	Jeffrey Braithwaite
Shannon Meyerkort	MPH project	Representation of health issues in the media	Rick Iedema
Cecily Michaels	MPH project	Oral Health and Hazara Refugees: Attitudes, Practices and Beliefs	Anna Whelan
Annette Pantle	MPH project	An investigation into the implementation of hospital in the home programs	Jeffrey Braithwaite

Research Student Projects

Candidate	Degree	Research Topic	Supervisor
Zou Pei	MPH project	Postnatal depression in Vietnamese migrant women in Australia and Vietnamese women in Vietnam	Anna Whelan
Susan Priest	MPH project	Mental Health after Childbirth	Anna Whelan
Camille Rayne-Greenow	MPH project	External Cephalic Version trial (RPA)	Anna Whelan
Alison Rutherford	MPH project	Audit of acupuncturists in CSAHS	Anna Whelan
Tomasina Stacey	MPH Project	Describing Postnatal Care: A Qualitative Study	Anna Whelan
Lin Zhang	MPH Project	A c u p u n c t u r e — qualitative study	Anna Whelan
Joanne Callen	PhD	An exploration of the impact of culture and work practices on the use of point of care clinical systems	Jeffrey Braithwaite
Nerida Creswick	PhD	Network analysis of the impact of point of care clinical systems	Johanna Westbrook Jeffrey Braithwaite Rick Iedema
Greg Fairbrother	PhD	Team-based versus patient allocation systems in nursing: a comparative evaluation	Jeffrey Braithwaite Mary Chiarella
Rowena Forsyth	PhD	Clinical work practice change as a result of information and communication technology implementation	Rick Iedema Jeffrey Braithwaite

Research Student Projects

Candidate	Degree	Research Topic	Supervisor
Rod Freyer	PhD	A study of communication in the management of health services	Jeffrey Braithwaite
Andrew Georgiou	PhD	The impact of CPOE on the role of pathology laboratory scientists	Johanna Westbrook Jeffrey Braithwaite Rick ledema
David Greenfield	PhD	Learning and change within a (nursing) community of practice: enacting self governance	Rick ledema
Fleur Hillier	PhD	Managing creative and health production processes: issues, similarities and differences	Jeffrey Braithwaite
Christine Jorm	PhD	Interaction of medical speciality culture with patient safety and quality	Jeffrey Braithwaite
Linda Kurti	PhD	Where science and spirit meet - spiritual assessment in Australian general practice; Social Capital and the role of religious organisations	Anna Whelan
Judie Lancaster	PhD	How surveyors bring ideas back to their host hospital	Jeffrey Braithwaite David Greenfield
Lena Low	PhD	Accreditation surveyors organizational change agents	Jeffrey Braithwaite Anna Whelan

Research Student Projects

Candidate	Degree	Research Topic	Supervisor
Diana McCallum	PhD	The process of planning	Rick Iedema
Sally Nathan	PhD	Consumers as participants	Jeffrey Braithwaite Niamh Stephenson
Peter Nugus	PhD	Research and evaluation into the Institute for Clinical Excellence's programs into Safety and Quality in Health Care	Jeffrey Braithwaite
Rod Perkins	PhD	A study of health services management in New Zealand 1946-2000 – the meanings of managerial effectiveness	Pieter Degeling
Farhad Pourfazi	PhD	Gastro-intestinal cancer: cross cultural research	Anna Whelan
Hasna Razee	PhD	Mental Health of Maldivian Women	Jan Ritchie Maurice Eisenbruch Debbi Long
Shirley Schulz-Robinson	PhD	Community health management and practice	Anna Whelan
Jo Travaglia	PhD	Locating vulnerability in the field of patient safety	Jeffrey Braithwaite

Research Student Projects

Candidate	Degree	Research Topic	Supervisor
Hong Qiu Wang	PhD	Applying the health belief model to predict quitting attempts among male adult smokers in three workplaces in southern China	Anna Whelan
Jael Wolk	PhD	Hospital admission policies – can theory match practice? An evaluation of the impact of government policy on the development of elective admission policies, in New South Wales public hospitals	Jeffrey Braithwaite Peter Baume
Rebecca Vanderheide	PhD	Self-efficacy in the ACT health care system	Ruth Foxwell Jeffrey Braithwaite
Desmond Yen	PhD	Surveyors' influence in accreditation processes	Jeffrey Braithwaite David Greenfield
Kai Zhang	PhD	Clinical performance indicators for continuous clinical quality improvement: clinical pathway-based CPI benchmarking	Jeffrey Braithwaite Marjorie Pawsey
Jacquie Milne	PhD	Overseas trained doctors	Jeffrey Braithwaite David Greenfield

Research Student Projects

Candidate	Degree	Research Topic	Supervisor
Eilean Watson	PhD	Curriculum mapping in medicine - how it is used?	Jeffrey Braithwaite
Robyn Clay-Williams	PhD	Multidisciplinary teamwork in public health-an evaluation of attitude and behavioural changes resulting from a Crew Resource Management (CRM) Intervention.	Jeffrey Braithwaite Ross Kerridge

Centre Projects

A LONGITUDINAL PROGRAM TO CONCEPTUALISE, EMPIRICISE AND EVALUATE CLINICIAN-MANAGERS' ROLES, BEHAVIOURS AND ACTIVITIES

Investigators: Jeffrey Braithwaite, Mary Westbrook, Terry Finnegan, Betsy Graham and Nadine Mallock

Duration: 1996 and ongoing

Description: Clinician managers have been drawn into leadership positions at various levels over the last three decades but most past literature about them has been normative. This program of research has sought to examine clinician-managers' roles and behaviours *in situ*. Key findings include:

- Clinician-managers' work activity can be synthesised under fourteen headings representing their chief interests and concerns; their work is busy, relentless, ad hoc, unpredictable and discontinuous
- While some aspects of health care management have changed with the emergence of clinician-managers, much of what is assumed to have changed remains the same or has intensified, such as the pressures and pace of work
- Management is enacted within professional divides.

The study findings have provided a body of information of relevance to practising clinician-managers, other scholars and management educators. They have helped strengthen our knowledge of clinician-managers and their roles and behaviour.

Outputs: A range of papers in international journals have been published. Educational materials have been incorporated into various teaching programs for Masters by coursework programs.

Selected Publications

Braithwaite J, Finnegan TP, Graham EM, Degeling PJ, **Hindle D**, **Westbrook MT** (2004). How important are quality and safety for clinician-managers? Evidence from triangulated studies. *Clinical Governance: An International Journal*. Vol 9 (1) pp.34-41.

Centre Projects

STREAMS OF CARE AND CLINICAL DIRECTORATES IN LARGE TEACHING HOSPITALS: EFFECTS AND IMPLICATIONS AND RELATIONSHIP TO ORGANISATIONAL PERFORMANCE

Investigators: Jeffrey Braithwaite and Mary Westbrook

Duration: 1999 and ongoing

Description: Current received wisdom about health sector restructuring suggests that streams of care should be designed and institutionalised. Conceived broadly, streams of care are clinical groupings with population health responsibilities for defined sets of patients with relatively homogeneous disease profiles. At this point in time, there are no retrospective or prospective studies nationally or internationally on this phenomena and none so far as we are aware that is in an advanced design phase. We contemplate in this project an ongoing investigation into streams of care across time.

In the meantime however, there is ongoing Centre research into clinical directorates. In many respects, these are precursors to streams of care in that clinical directorates establish clinical streams for management purposes within hospitals whereas streams of care as currently envisaged represent clinical streams for management purposes across populations, ie. across hospitals and in the community.

The Centre's program of work on clinical directorates can therefore shed empirical light on the streaming phenomenon and act as a platform for our future research programs into streams of care. Key findings from the clinical directorate studies include:

- Claimed benefits of clinical directorates such as improved efficiency are not realised in practice
- There is no association between teaching hospital efficiency and clinical directorate type

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- Regardless of whether in any given year a teaching hospital is configured traditionally, in one of the two main clinical directorate types or involved in a major restructuring exercise from one of these models to another, there is no difference in performance efficiency.

This program of research is therefore important in its own right but it is also crucial as a precursor to a future program examining streams of care prospectively.

Outputs: Several papers are in press from the clinical directorate investigation. A range of presentations at conferences, workshops and symposia have been made. A future proposal to evaluate streams of care in real time and prospectively (formative and summative evaluation) is in train.

Selected Publications

Braithwaite J, Westbrook MT (2004). A survey of staff attitudes and comparative managerial and non-managerial views in a clinical directorate. *Journal of Health Services Management Research*. Vol 17, pp.141-166.

Braithwaite J, Westbrook MT (2005). Rethinking clinical organisational structures: an attitude survey of doctors, nurses and allied health staff in clinical directorates. *Journal of Health Services Research and Policy*, Vol 10 (1), pp.10-17.

Centre Projects

RESTRUCTURING OF HEALTH SERVICES

Funding Sources: University of NSW

Investigators: Jeffrey Braithwaite and Johanna Westbrook

Duration: 2004 and ongoing

Description: One of the most prominent health service change methods around the world is restructuring: the attempt to alter the formal or design aspects of health systems, particularly, the roles, responsibilities and reporting arrangements of senior positions. We can observe this happening on a regular basis in the various mergers and acquisitions of private health interests of the United States of America, and also in the public health systems of Canada, Britain and Australia.

Despite its popularity as a managerial activity, little research attention has been paid to this phenomenon. Until now, there have been many advocates of it, and some anecdotal academic commentary for and against it, but almost no evidence about restructuring, mainly because of the complexity of examining a complex social and organisational issue with multiple variables.

We have found that restructuring at the sector level – ie, that of entire health systems (such as the National Health Service, or the New South Wales or Western Australian health sectors, or the Canadian States health systems in Alberta or Saskatchewan) – can lead to disruption, confusion and inefficiencies. In the case of area health services (NHS Trusts in the United Kingdom) and local acute and community health services including teaching hospitals, restructuring can put people back about eighteen months while they recover from the re-organisation, and orchestrating serial restructures over several years, ie. tweaking the organisational structure several times over a decade, can lead to measurable inefficiencies.

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Our data suggests that apart from distraction from the main game of patient care, there are negative outcomes and uncertainties created by restructuring that must be worked through before the next restructuring is considered. Restructuring is often unproductive and keeping on restructuring even worse.

Outputs: Academic papers and a range of conference presentations, as well as including the data in workshops and masters courses are the main outputs.

Selected Publications

Braithwaite J, Westbrook JI, Iedema R (2005). Restructuring as gratification. *Journal of the Royal Society of Medicine*, Vol 98 (12), pp.542-544 [<http://www.irsm.org/current.shtml>].

Braithwaite J (2005). Invest in people, not restructuring. *British Medical Journal*, 331, p.1272 [[doi:10.1136/bmj.331.7527.1272-a](https://doi.org/10.1136/bmj.331.7527.1272-a)].

Braithwaite J, Westbrook M, Hindle D, Iedema R, Black D (2007). Does restructuring hospitals result in greater efficiency? An empirical test using diachronic data. *Health Services Management Research*, in press.

Braithwaite J, Westbrook JI, Iedema R (2007). Health care participants' dualism: are new sub-species evolving? *Journal of the Royal Society of Medicine*, 100(2), pp. 78-80.

Centre Projects

MANAGING CULTURAL DIVERSITY IN THE WORKPLACE SOUTH EAST HEALTH

Funding source: South Eastern Sydney Area Health Service

Investigators: Anna Whelan and Nadine Mallock

Duration: 2003-2008

Description: Health services in New South Wales are seeing increasing numbers of patients from non-English speaking backgrounds. The need for health services to provide culturally and linguistically appropriate care will not diminish, and indeed, will increase over the next decade. South East Health has a large immigrant population (31.2%), the majority of whom were born in a non-English speaking country. Meeting the needs of culturally and linguistically diverse clients, means understanding what is culturally appropriate care, and how to address equality of access and outcomes for all members of the South East Health community.

A more recent phenomenon in the health workplace is the increasing numbers of staff (professional and support) who are bilingual and/or bicultural. As workplaces become increasingly segmented along sociocultural and demographic dimensions, it is important to develop policies and practices aimed at recruitment, retention and effective management of a diverse workforce. Studies in the US have identified that managers at all levels and health professionals need to develop a greater understanding of human diversity and multicultural issues. This needs to go beyond being 'sensitive to' or 'aware of' such issues. Diversity management has been described as the process or path leading to 'culturally competent organisations'.

The aim of Phase 1 of this research was to utilise the US "Racial/Ethnic Diversity Management Survey" with some modification for the Australian system. This tool has been validated and is being used to create a climate of change within the participating hospitals in Pennsylvania.

The survey sought to answer the following questions:

- What are the experiences and attitudes of senior managers in

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- What is the current diversity profile of senior managers in South East Health?
- How effectively do managers feel their facilities operate in relation to diversity issues affecting planning, evaluation, training, human resources, health care delivery and progressiveness towards staff and clients of Aboriginal, Torres Strait Islander people and culturally and linguistically diverse background?
- What type of ethnic diversity management policies and practices exist among hospitals?
- How do management activities of senior staff tie into their strategic orientation?

In Phase II, results and views expressed in the questionnaire were discussed through semi-structured interviews with executive directors and diversity coordinators of the nine facilities involved.

Findings included that diversity management is a strategically driven process with an emphasis on building skills and creating policies that address changing demographics and patient populations. Health care organisations concerned about diversity management need to engage in human resources and health care delivery practices aimed at recruiting, retaining and managing a diverse workforce and developing culturally appropriate systems of care. Each of the nine facilities performed differently, some with highly negative scores.

The study has provided a baseline of management opinions as well as a comparison with other health areas in international context, that will allow the organisation to assess its position. This study will assist South East Health to define its diversity management agenda and focus on key areas requiring action. It is essentially an organisational climate survey of senior staff and will require commitment to implementation through more intensive work with units and facilities.

Centre Projects

AN INTERNATIONAL CROSS-CULTURAL STUDY TO EXAMINE HOW CLINICIAN-MANAGERS AND HEALTH SERVICES MANAGERS USE THEIR TIME

Investigators: Jeffrey Braithwaite, Mary Westbrook and Nadine Mallock

Duration: 2002-2007

Description: While there are many claims about clinician-managers and health services managers in the literature, one recurring theme is that a key resource variable is the way in which managers use their time. Problematised, this issue raises questions about clinician-managers' and health services managers' perceptions of the time they spend on various management activities, the time they believe they should spend on these activities and the relevant importance of them.

A related set of issues concerns perceptions of pressure on clinician-managers and health services managers for them to perform effectively. This project seeks to examine this issue through the administration of a questionnaire in Australia and Singapore.

Outputs: The study is providing information and an evidence base on patterns of time allocation and the effective marshalling of time by managers across various managerial activities. It is proving to be of considerable use to practising managers, and health services and clinician-management educators.

Selected Publications

Braithwaite J (2004). An empirically-based model for clinician-managers' behavioural routines. *Journal of Health Organisation and Management*, 18 (4), pp. 240-261.

Braithwaite J, Westbrook MT, Mallock NA (2007). Pressures exerted on managers by their superior and peer managers: Australian-Singaporean comparisons. *Journal of Managerial Psychology*, 22 (3), pp. 227-256.

Centre Projects

EXAMINATIONS OF THE RELATIONSHIP BETWEEN ACCREDITATION AND CLINICAL AND ORGANISATIONAL PERFORMANCE

Funding Source: The Australian Research Council Partners: Australian Council on Healthcare Standards (ACHS); Affinity Health, Ramsay Health Care, Australian Health Insurance Association

Investigators: Jeffrey Braithwaite, Johanna Westbrook, Bill Runciman, Sally Redman, Marjorie Pawsey and ACHS staff

Duration: 2002 and ongoing

Description:

Although there have been several decades of accreditation development both in Australia and internationally, the relationship between accreditation and clinical and organisational performance remains largely unexamined. The research project consists of four separate studies to examine the association between accreditation and performance, as well as exploring the reliability and validity of the accreditation process. The research is examining the overall question, "What are the relationships between accreditation and clinical and organisational performance?"

Study 1: Examination of the relationship between accreditation and clinical and organisational performance

This study will examine the relationships between the ACHS Evaluation and Quality Improvement Program (EQuIP) outcome and organisational and clinical performance data. From the organisations participating in an EQuIP organisation-wide survey in 2006, a random sample of 21 organisations stratified for size, location and sector was selected. The research team piloted the methods and tools for this study in November 2005 at a health service in Sydney. Data collection for this study is now being analysed.

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Study 2: Comparison of health services participating and not participating in accreditation

This study will compare health services participating in an accreditation program with those not participating in a program. The accreditation program is the ACHS EQUiP. The same methods and tools for study one will be used for study two. That is, each health service in this study will be visited to conduct a cultural assessment and clinical performance data will also be collected.

A major challenge in implementing this study has been the very small number of health services in Australia that are not involved in an accreditation program and that could be matched to the services in the sample in study one.

Study 3: Exploration of inter-rater and intra-rater reliability of accreditation survey teams

This study is examining the intra- and inter-related reliability of surveyors and surveying teams. There are two parts to this study. Firstly, during 2005 the research team conducted focus groups with the ACHS survey workforce. The focus groups utilised open ended questioning to examine two primary issues: Do, and if so how do, surveyors achieve consistency from survey to survey? and, are different surveying teams reliable? That is, if the team surveying an organisation was changed, in whole or part, would the same survey outcome be reached?

The second part of this study is an examination of survey teams *in situ*. Two survey teams will be matched and then simultaneously undertake the periodic review of a health service.

Associated with this study is a doctoral study examining the reliability of surveyors and surveying teams.

Study 4: An examination of the influence of accreditation surveyors on their individual organisations

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This study will examine the influence of surveyors within their own organisations and is being conducted by doctoral students under the direction of the research team. One study is using ethnography to examine surveyors, in their employing organisations. The other study is utilising interviews and a survey to examine surveyors' ideas and displays of leadership within their organisations and analysis their organisational accreditation outcomes.

Selected Publications

Braithwaite J, Westbrook J, **Pawsey M**, **Greenfield D**, Naylor J, **Iedema R**, Runciman B, Redman S, **Jorm C**, Robinson M, **Nathan S**, Gibberd R (2006). A prospective, multi-method, multi-disciplinary, multi-level, collaborative, social-organisational design for researching health sector accreditation [LP0560727]. *BMC Health Services Research*, 6 (113), doi:10.1186/1472-6962-6-113.

Centre Projects

A RESEARCH PROGRAM WITH THE CLINICAL EXCELLENCE COMMISSION, (CEC) NSW TO PROSPECTIVELY STUDY THE COMMISSION'S PROGRAMS TO IMPROVE THE SAFETY AND QUALITY OF HEALTH CARE IN NEW SOUTH WALES: 2004 - 2005

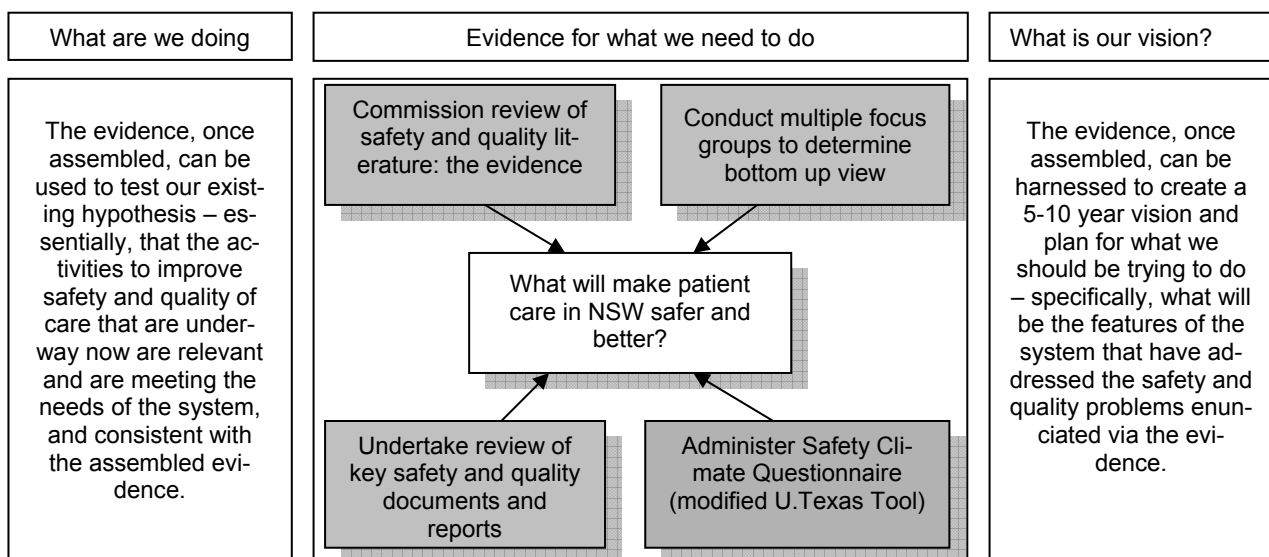
Funding Source: Clinical Excellence Commission, NSW

Investigators: Jeffrey Braithwaite, Mary Westbrook, Nadine Mallock, Joanne Travaglia, Johanna Westbrook and Peter Nugus,

Duration: 2004–2007

Description: We conducted two kinds of research with CEC. First we assembled evidence for what the CEC needed to do prospectively. This was to be conducted via four inter-related studies, including: a literature review; an analysis of major patient safety inquiries; a series of focus groups with health professionals and a safety climate survey. The CEC research framework is presented in Figure 1, with completed studies highlighted in grey:

Figure 1: a framework for research for 2004-2005



Centre Projects

We then tested CEC's existing hypothesis that its current program of work has resulted in (or supported and enabled) improvements in the safety and quality of health care in NSW, through evaluations of two CEC initiatives. The first evaluation was of the patient flow collaborative and the second of the Safety Improvement Program, (described in more detail later in this section). What follows are the key findings from the studies:

A technical review of the safety and quality literature

In this study we sought to assess the patient safety literature and suggest a new approach to safety for clinical teams. The review of the literature had two major aims. The first was to determine the level of avoidable harm currently occurring in health services around the world (as reported in the literature), and to explore the ways in which this harm is manifested. The second was to understand the causes of such harm. These causes appear in the literature under three headings: errors of individual clinicians; errors as a consequence of poor team-work; and errors as a consequence of environmental factors. The study concluded by examining the corrective measures suggested by the literature and by outlining a team-centred process which could be applied by health care services wishing to strengthen their existing safety activities. A monograph of this study, *Patient safety research: a review of the literature* was launched by the CEC early in 2006.

Review of key safety and quality documents and reports

This study is based on a comparative analysis of eight patient safety inquiries into alleged poor health care, in six countries. Three of the inquiries are from Australia: Perth (King Edward Memorial Hospital), Melbourne (Royal Melbourne Hospital) and Sydney (Campbelltown-Camden). The remainder are from Scotland (Glasgow), England (Bristol Royal Infirmary), Slovenia (Celje Hospital), New Zealand (Southland) and Canada (Winnipeg Health Sciences Centre).

Two versions of the final report of this study, a full monograph entitled *Patient safety: a comparative analysis of eight enquiries in six countries* and a summary document, *Patient safety: a summary of findings from major international public enquiries*, were published in 2006. They are available on the CEC and CCGR websites.

Centre Projects

The study provides an analysis of the context, process, key findings and recommendations of the inquiries. In doing so, it identifies common features of the events which led up to inquiries, including: sub-standard health care; deficiencies in quality monitoring processes; individual care providers and patients raising concerns up to a decade before action was taken; the ignoring and at times abuse of critics of the services; deficiencies in team work; and the lack of involvement of patients and families as integral and informed members of the health care team.

Multiple focus groups

The aim of this study was to catalogue a wide range of views and capture the ideas of people across the health system. We gathered qualitative information from a range of stakeholder groups about the state of safety and quality in NSW, and how these might be improved. Twenty-five focus groups were conducted over a number of geographical and service settings in 2004. Participants included: nurses, doctors, allied health and non-clinical staff, GMITT groups, Department of Health policy makers, area health service staff, and academics.

Group discussions were tape recorded and analysed using Nvivo6 and Leximancer. The data gathered constitutes a vital bank of information and provides well-grounded insights into what CEC needs to do in the future to respond to safety concerns. A major report entitled *Giving Voice to Patient Safety* and a 'key points' document was released in 2007.

Safety Climate Questionnaire

The Safety Climate Questionnaire based on the University of Texas tool, has been re-designed. It was subjected to rigorous testing through multiple design phases, and piloted and Australianised. An implementation kit has also been developed. These have been submitted to NSW Health and the CEC for comments. At this point there are questions of timing and utility of the administration of the questionnaire tool which are yet to be resolved.

Centre Projects

Selected Publications and Presentations

Hindle D, Braithwaite J, Iedema R (2005). *Patient safety: a review of technical literature.* Centre for Clinical Governance Research, UNSW: Sydney, pp.101, ISBN 0 7334 2176 8.

Hindle D, Braithwaite J, Iedema R, Travaglia J (2006). *Patient safety: a comparative analysis of eight enquiries in six countries.* Centre for Clinical Governance Research, UNSW: Sydney, pp.177, ISBN 0 7 334 2411 2.

Hindle D, Braithwaite J, Travaglia J, Iedema R (2006). *Patient safety: a summary of findings from major international public enquiries.* Centre for Clinical Governance Research, UNSW: Sydney, pp.35, ISBN TBA.

Centre Projects

AN EVALUATION OF THE NEW SOUTH WALES HEALTH SAFETY IMPROVEMENT PROGRAM

Funding Source: Clinical Excellence Commission, NSW and NSW Department of Health

Investigators: Jeffrey Braithwaite, Mary Westbrook, Nadine Mallock, Jo Travaglia, Peter Nugus, Rowena Forsyth, Debbi Long, Marjorie Pawsey

Duration: 2004-2008

Description: As part of the CEC Research Program and the NSW Department of Health Knowledge Management Project, the CCGR undertook an evaluation of the NSW Health Safety Improvement Program (SIP) late in 2004, and early 2005. The evaluation was conducted using a triangulated, multi-method and multiple study approach. Analysis of data and publication of papers continue.

SIP has various components of which four are the cornerstones of the program: training a cohort of more than 2,500 clinicians in safety improvement techniques and approaches; generating and managing information about incidents; conducting root cause analyses of serious events; and making recommendations and actioning these as appropriate. We found that SIP has made considerable gains in addressing safety. A range of recommendations to further strengthen safety in NSW were made under four headings: monitoring and support for SIP; anchoring and extending the gains made by SIP; further education and training in SIP-related areas; and research, evidence and communication of SIP results.

Selected Publications

Braithwaite J, Travaglia J, Mallock NA, Iedema R, Westbrook MT, Long D, Nugus P, Forsyth R, Jorm C, Pawsey M (2005). *Evaluation of the Safety Improvement Program in New South Wales: overview of studies.* Centre for Clinical Governance Research, UNSW: Sydney, pp.38, ISBN 0 7334 2249 7 (An additional 12 individual study monographs are available on the CCGR website).

Centre Projects

Braithwaite J, Westbrook MT, Travaglia JF, Iedema R, Mallock NA, Long D, Nugus P, Forsyth R, Jorm C, Pawsey M (2007). Are health systems changing in support of patient safety? A multi-methods evaluation of education, attitudes and practice. *International Journal for Health Care Quality Assurance*. 20(7), pp. 585-601.

Westbrook MT, Braithwaite J, Travaglia JF, Long D, Jorm C, Iedema, R (2007). Promoting safety: varied reactions of doctors, nurses and allied health professionals to a safety improvement program. *International Journal for Health Care Quality Assurance*. 20(7), pp. 555-571.

Braithwaite J, Westbrook MT, Mallock NA, Travaglia JF, Iedema R (2006). Experiences of health professionals who conducted root cause analyses after undergoing a safety improvement program. *Quality and Safety in Health Care*. 15, pp. 393-399.

Iedema R, Jorm C, Braithwaite J, Travaglia J, Lum M (2006). A root cause analysis of clinical errors: confronting the disjunction between formal rules and situated clinical activity. *Social Science & Medicine*, 63(5), pp.1201-1212.

Iedema R, Jorm C, Long D, Braithwaite J, Travaglia J, Westbrook M (2006). Turning the medical gaze in upon itself: root cause analysis and the investigation of clinical error. *Social Science & Medicine*, 62 (7), pp.1605-1615.

Centre Projects

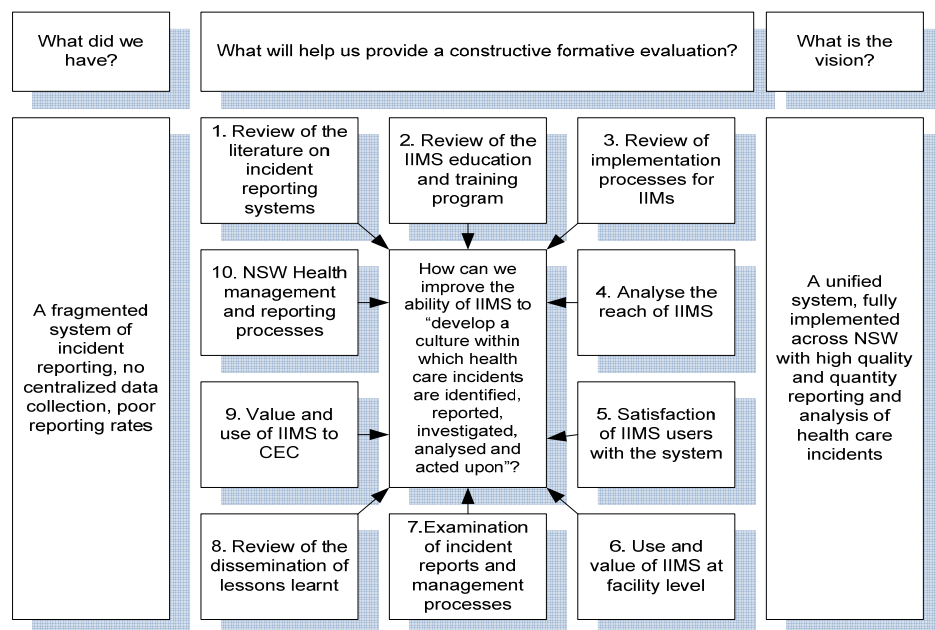
AN EVALUATION OF THE NEW SOUTH WALES HEALTH INCIDENT INFORMATION MANAGEMENT SYSTEM

Funding Source: Clinical Excellence Commission, NSW and NSW Department of Health

Investigators: Jeffrey Braithwaite, Jo Travaglia, Mary Westbrook, Peter Nugus, CCGR staff

Duration: 2006-2008

Description: The NSW Department of Health (the DOH) and the Clinical Excellence Commission (the CEC) commissioned the Centre for Clinical Governance Research (CCGR) to conduct a formal evaluation of the Incident Information Management System (IIMS). The DOH required the evaluation to assess the success of the implementation and effect of the program, against the project objectives and key expected benefits. The CEC was interested in the extent to which the IIMS will make health care in NSW safer and better under CCGR's contract to conduct a Research and Evaluation Program into Safety and Quality. This evaluation continued the multi-method triangulated approach utilised in the evaluation of the SIP. Diagrammed, the evaluation looked like this:



Centre Projects

The evaluation found that IIMS is providing a positive basis for the quality and safety improvement in NSW Health. Its implementation was well executed, and it is beginning to produce useful results at all levels of health services, although further work needs to be done in order for its full benefits to be realized. Analysis of data and publication of papers continue.

Selected Publications

Braithwaite J, Travaglia J, Westbrook MT, Jorm C, Hunter C, Carroll C, Iedema R, Ekambareshwar M (2006). *Evaluation of the Incident Information Management System in New South Wales: overview of studies.* Sydney: Centre for Clinical Governance Research, University of New South Wales. pp.32, ISBN 0 7334 2389 2.

A full set of 10 monographs are available on the CCGR website. These can be downloaded in PDF format.

Centre Projects

IDENTIFY AND EVALUATE A KNOWLEDGE MANAGEMENT PROGRAM FOR THE QUALITY BRANCH OF THE NSW HEALTH DEPARTMENT

Funding Source: NSW Health Department

Investigators: Jeffrey Braithwaite, Joanne Travaglia, Nadine Mallock, Maureen Robinson, Sarah Michael, Charles Pain, Jo Montgomery, Kathleen Ryan, Michelle Wensley and Michael Smith.

Duration: 2003-2008

Description: Knowledge management aims to capture the expertise, and lessons learnt from the experience of teams in the health system in order to disseminate these to other teams across the system. Two streams of work were undertaken as part of this project. The first involved a series of evaluations, including those of the: Clinical Practice Improvement Program; Safety Improvement Program (SIP); and Incident Information Management Systems (IIMS). Details of the SIP and IIMS are provided in this section. At the same time the research team was involved in developing a process for capturing information, and for publicising and disseminating the work of the Quality Branch and other safety and quality initiatives across the state, to various stakeholder groups. The work led in large part to the creation of the Quality and Safety Branch inter and intranet quality and safety portal. This contract was completed in June 2006 and papers are now in press.

Selected Publications

Braithwaite, J et al. (2002) *Report: evaluation of the Clinical Practice Improvement Training Program*. Centre for Clinical Governance Research, UNSW: Sydney, pp.106, ISBN 0 7334 1969 0.

Braithwaite J, Iedema R, Travaglia J (2004). Assessing, planning, writing up and publishing your work. *NSW Health Department, Knowledge Management Seminar*. Sydney, 6 September.

Braithwaite J, Robinson M (2004). Knowledge management forum. *NSW Health, Centre for Clinical Governance Research and the Institute for Clinical Governance*. Sydney, 31 May.

Centre Projects

GIVING VOICE TO PATIENT SAFETY

Funding Source: Clinical Excellence Commission, NSW

Investigators: Jeffrey Braithwaite, Joanne Travaglia, Peter Nugus

Duration: 2005-2008

Description: This project is one of the elements of the first phase of the CEC-CCGR contract. It utilised focus groups methodology to explore the perspectives of health service professionals across NSW as to the causes, consequences and responses to patient safety issues. Professor Braithwaite, Ms Travaglia and Mr Nugus conducted the focus groups, which gathered together policy makers, clinicians, allied health professionals, managers and consumers in 25 groups across Sydney, Newcastle and Wollongong.

Participants were asked about: their concerns relating to patient safety, whether these concerns had changed in recent years; whether certain individuals or groups were at higher risk in the system; incidents or adverse events they had witnessed or experienced; what positives they saw in relation to patient safety, what factors they thought impeded improvements to patient safety; what things they felt could contribute to improvements; and the focus and role of the CEC.

The rich data which these groups produced has been analysed and will result in both a major report and a 'key points' document. This has been released in 2007.

Selected Publications

Braithwaite J, Travaglia J, Nugus P, Giving a Voice to patient safety in New South Wales. *Centre for Clinical Governance Research and the Institute for Clinical Governance*. Sydney, pp. 55, ISBN 978 0 7334 2532 5.

Centre Projects

EVALUATION OF THE IMPACT OF POINT OF CARE CLINICAL INFORMATION SYSTEMS ON STAFF AND CLINICAL WORK

Funding Source: ARC Linkage Projects

Investigators: Johanna Westbrook, Rick Iedema, Jeffrey Braithwaite, Margaret Williamson, Mandy Ampt, Andrew Georgiou, Nadine Mallock, Rowena Forsyth, Nerida Creswick, Geoff McDonnell, Toby Mathieson and Enrico Coiera

Duration: 2003-2008

Description: This research commenced in 2003 and is a joint project between researchers at the Health Informatics Research & Evaluation Unit at the University of Sydney and the Centre for Clinical Governance Research in Health at the University of NSW in partnership with NSW Health. The focus of the project was to investigate the impact of clinical information systems (CIS) on health care organizations. The aims included the development of validated and reliable measurement tools and techniques which would allow individual health care organizations and governing health bodies to monitor the impacts of the introduction of CIS. This project focused on designing and applying these techniques to evaluate the benefits of system implementation on health delivery processes, health professionals' work practices and patient outcomes.

The research used a before and after design to measure a range of indicators before and after the implementation of the CIS, to determine outcomes of system implementation. Data collection techniques included prospective audits of patient charts, analysis of hospital data, observational studies, video observational studies, interviews, focus groups and surveys. Key indicators examined are listed in Box 1 and Box 2.

Centre Projects

Box 1 Computerised Pathology Order Entry System Indicators:

Quantitative

- Turnaround time—time from receipt of test order in the laboratory to time result is available for viewing by a clinician.
- Volume of tests ordered.
- Volume of specimens collected from patients.
- Quality and quantity of clinical information necessary for test processing, received by the laboratories.
- Length of stay of patients in Emergency Departments.

Qualitative

- Users' views, acceptance and use of the system.
- Examination of work processes and work arounds.

Box 2 Electronic Prescribing System Indicators:

Quantitative

- Prescribing error rates (type and severity).
- Nurses' work measurement—ie quantitative measurement of time distribution across all work and communication tasks.
- Doctors' work measurement—ie quantitative measurement of time distribution across all work and communication tasks.
- Network analysis to determine information flow and exchange processes in hospital wards.
- Safety culture survey.

Qualitative

- Clinical, management and IT staff views about the impact of the system on work processes and patient outcomes.

Centre Projects

Results

The project has produced a large body of information regarding the outcomes of CIS implementation including identification of challenges which need to be addressed during and after system implementation. The project has produced many practical benefits, as well as making a significant contribution to the national and international evidence-base regarding the outcomes of CIS implementations. It has placed NSW Health in an enviable position compared to other health systems which lack this evidence-base. In particular, the pre-system implementation benchmark data produced will allow ongoing monitoring of the effects of CIS implementations to continue in the future.

Computerized pathology order entry systems

The project has produced the first published systematic review of indicators which can be used to monitor computerized pathology order entry systems (CPOE). The project demonstrated that introduction of CPOE significantly reduced turnaround times while not adversely affecting test or specimen volumes in the short (two months post system implementation) and long (12 months post) term. The project identified key factors which need to be addressed during the implementation process. These included issues relating to “add on” orders and incomplete orders. Further the project provided examples of the effects of early uses of electronic decision support, such as how structuring order screens can assist in improving test ordering, as well as ways in which the design of test order sets can influence ordering patterns.

The qualitative data derived from observational studies, interviews and focus groups have informed implementation processes at the study sites and beyond the new sites and professional bodies seeking out this information from the researchers and the study site staff. This is being used to develop intelligent implementation plans now and for the future. In the next 12 months the impact of improved turnaround times on patient stays in Emergency Departments will be examined. The results from this work have been widely disseminated through publications and presentations.

Centre Projects

Electronic Prescribing Systems

As no electronic prescribing system has been implemented only pre-system implementation data are available. These data provide important benchmark data against which indicators can be monitored once an electronic prescribing system has been implemented. In the absence of the post-system implementation data these results are still of great value in understanding current clinical work processes and prescribing error rates. Several quality and safety issues have been highlighted. For example, following 250 hours of direct observation of nurses' work the study has produced detailed information regarding the amount of time nurses spend in specific work activities, how frequently they are interrupted in their work and how often they are required to multi-task. Results show that the most frequently interrupted clinical task is during the preparation and administration of medication to patients. One quarter of all interruptions occur during this time. Several reports of these findings were produced in 2007. Analyses of the same data for doctors will also be undertaken and reported. The research team has now secured separate NHMRC funding to continue the research into the impact of electronic prescribing systems on prescribing errors.

Outputs & Impact of the Project

The research to date has resulted in 45 publications and presentations. The next 12 months will generate a number of further documents reporting the outcomes from the research. In addition, the research has developed and tested several data collection tools and survey instruments which are available for use. The project has supported two PhD candidates, one of whom has successfully completed her PhD and the second who has submitted her thesis. In this way the project has supported the training of new experts in the field.

Centre Projects

Selected Publications

Ampt A, Westbrook JI, Creswick N, **Mallock N** (2007) Comparison of self-reported and observational work sampling techniques to measure nurses' work. *Journal of Health Services Research and Policy*. 12 (1): 18-24.

Westbrook JI, Georgiou A, Dimos A, Germanos T (2006) Computerised pathology test order-entry reduces laboratory turnaround times and influences tests ordered by hospital clinicians: A controlled before and after study. *Journal of Clinical Pathology*, 59, 533-536.

Georgiou A, Westbrook JI (2006) Computerised order entry systems and pathology services – a synthesis of the evidence. *Clinical Biochemist Reviews*, 27(2), 79-87.

Centre Projects

AN ACTION RESEARCH PROJECT TO STRENGTHEN INTERPROFESSIONAL LEARNING AND PRACTICE ACROSS THE AUSTRALIAN CAPITAL TERRITORY (ACT) HEALTH SYSTEM.

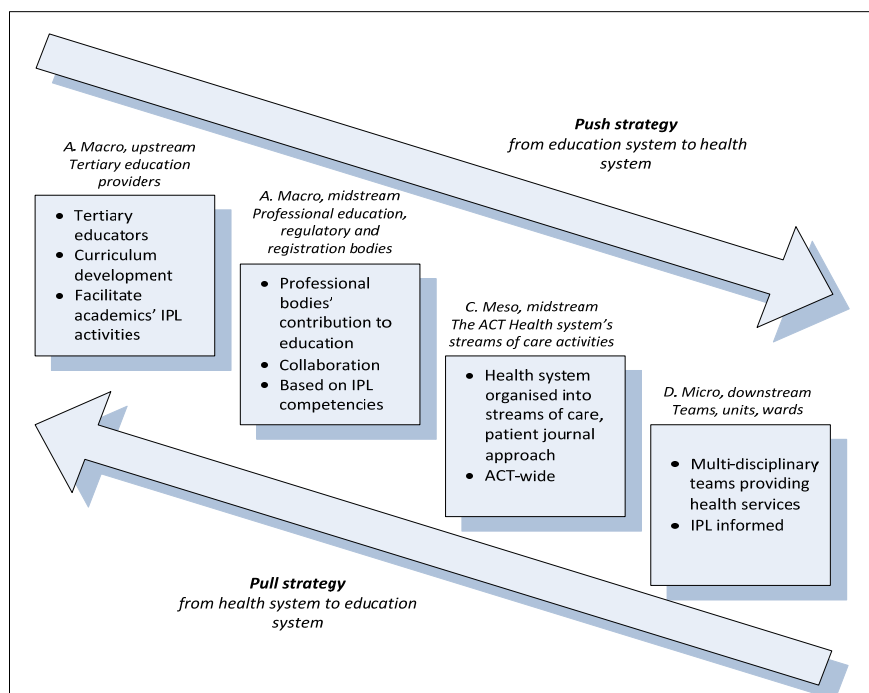
Funding Source: ARC Linkage Grant, ACT Health

Investigators: Jeffrey Braithwaite, Rick Iedema, Johanna Westbrook, Ruth Foxwell, Rosalie Boyce, Timothy Devinney, Marc Budge

Duration: 2007-2010

Description: The aim of this project is to improve the quality of care for, and safety of, patients across ACT Health by designing and testing a new, comprehensive, model of interprofessional learning and practice. The overall objective of the project is to facilitate a deep change in the culture of health services, and in the way in which health professionals work together, by using a qualitative, multi-method, action research approach. The research model is presented in Figure 1.

Figure 1: Four areas of focus for the IPL project



Collaborations

Over the last four years the Centre has established collaborative research projects with other research groups in both Australia and overseas. Within Australia these include projects with:

- The Sydney Children's Hospital
- Simpson Centre for Health Service Innovation
- C-Core Collaboration for Cancer Outcomes Research and Evaluation
- Liverpool Hospital
- Northern Sydney Area Health Service
- Centre for Health Informatics
- The Australian Council on Healthcare Standards
- South Australian Health Department
- The Clinical Excellence Commission
- ACT Health Department
- The Australian Health Care Reform Alliance
- Royal Australian College of Medical Administrators
- The Sax Institute
- Hospital Reform Group
- NSW Health Department
- Prince of Wales/Prince Henry Hospital
- Australian Commission for Safety and Quality in Health Care
- Australian College of Health Service Executives
- The Australian Patient Safety Foundation
- South Eastern Sydney Area Health Service
- Health Informatics Research and Evaluation Unit, University of Sydney

Collaborations

There are multiple international collaborative educational, research or learning exchange projects on topics such as medical subcultures, clinical work process control and hospital reform. These are undertaken with:

- Clinical Effectiveness Unit (HHS Wales) Cardiff, UK
- Department of Community Medicine, Auckland, NZ
- Department of Social Policy, University of Newcastle upon Tyne, UK
- Health Policy Unit, Graduate School of Management, University of Durham, UK
- Intermountain Health Care, Utah, USA
- Shandong Medical University, Jinan, People's Republic of China
- Centre for Communication in Health, University of Wales, Cardiff
- World Health Organization, Kobe Centre
- Clinical Governance Support Team, NHS, UK
- National Health Services (NHS) Confederation, UK
- Shanghai Municipal Health Bureau, People's Republic of China
- Harvard School of Public Health
- International Centre for Research on Organisational Discourse, Strategy and Change, University of Sydney
- Health Communication Research Centre, Cardiff University, UK
- Center for Activity Theory and Development Work Research, Helsinki, Finland
- European Group of Organisation Studies
- European Association of Communication in Healthcare
- Medical Management Centre, Karolinska Institute Sweden

Education and Extension activities

The Centre's involvement extends beyond the limits of any one school or faculty. However, it is associated for teaching purposes with the School of Public Health and Community Medicine, and particularly with both the Graduate Management and Public Health Programs of the University of New South Wales. It also contributes at various times to the University of Sydney's Health Science Management and Public Health Programs.

During the last three years the Centre has maintained its commitment to developing educational materials and programs which draw on research findings into clinical governance. Among other initiatives Centre staff have:

- Taken the lead role in developing and delivering new courses such as Strategy, Policy and Change. The content of these subjects is based on research findings by the Centre, particularly its research on the work of clinician managers in the implementation of health reform
- Conceptualised and delivered workshops on *Changing Organisational Culture* and on *Leading Change in Complex Organisations* in conjunction with the Australian College of Health Service Executives
- Played a leadership role in teaching a range of core and elective courses in the Master of Health Administration and Master of Health Services Management program at University of New South Wales, and also in the Master of Public Health programs at both the University of New South Wales and University of Sydney including *Qualitative Health Research, Health Services Strategic Management and Planning, Management of Health Services, Management of Organisation* and a course in *Management of Change*.

Education and Extension activities

- Conducted invited guest lectures at the Universities of London and Aalborg, and at Conferences in Washington DC, Cardiff, United Kingdom, Germany, Scotland, Boston, USA and Slovenia.
- Made presentations to various conferences in conjunction with or for the Clinical Excellence Commission, NSW, Australian College of Health Service Executives, Royal Australian College of Medical Administrators, the Sax Institute, the ACT Health Department, the South Australian Health Department and the NSW Health Department.

The relevance of these initiatives is evident from the interest that they have generated. For example, student participation in courses and teaching led by Centre staff has been in excess of expectations. Demand for the workshops on organisational culture change and leadership is very high. In summary these initiatives together demonstrate the educational benefits that can derive from the Centre's strong research programs.

Publications and Presentations 2004-2007

PEER REVIEWED JOURNAL ARTICLES

2007

Braithwaite J, Westbrook MT, Mallock N (2007). How subordinates exercise pressure on their managers: Anglo and Confucian-Asian comparisons. *Journal of Managerial Psychology*, 23(1), pp 40-53.

Braithwaite J, Iedema R, Jorm C (2007). Trust, communication, theory of mind and the social brain hypothesis: deep explanations for what goes wrong in health care. *Journal of Health, Organisation and Management*, 21(4), pp 353-367.

Braithwaite J, Westbrook JI, Foxwell RA, Boyce R, Devinney T, Budge M, Murphy K, Ryall MA, Beutel J, Vanderheide R, Renton E, Travaglia JF, Stone J, Barnard A, Greenfield D, Corbett A, Nugus P, Clay-Williams R (2007). An action research protocol to strengthen system-wide inter-professional learning and practice. *BMC Health Services Research*, 7(144).

Braithwaite J (2007). How to restructure-proof your health service. *British Medical Journal*, 355(7610), pp. 99.

Braithwaite J, Westbrook JI, Iedema R (2007). Health care participants' dualism: are new sub-species evolving? *Journal of the Royal Society of Medicine*, 100(2), pp 78-80.

Braithwaite J (2007). An overview of the healthcare system in Australia. *ICU Management*, 7(1), pp 35-36.

Braithwaite J, Westbrook MT, Mallock NA (2007). Pressures exerted on managers by their superior and peer managers: Australian-Singaporean comparisons, *Journal of Managerial Psychology*, 22(3), pp 227-256.

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Braithwaite J, Luft S, Bender W, Callen J, Westbrook JI, Westbrook MT, Travaglia JF, Mallock NA, Iedema R, Hindle D, Jochelson T (2007). The hierarchy of work pursuits or public managers. *Health Services Management Research*, 20(1), pp 71-83.

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Braithwaite J, (2007). The underlying properties of networks. *Clinician Connect*, December, 1,3.

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Greenfield, D (2007). The enactment of dynamic leadership. *Leadership in Health Services*, 20 (3), pp. 159-168.

Iedema R, Forsyth R, Georgiou A, **Braithwaite J**, Westbrook J (2007). Video research in health: visibilizing the normative and affective complexities of contemporary care. *Qualitative Research Journal*, 6(2), pp 15-30.

Lee BB, Iedema R, Jones S, Marial O, **Braithwaite J**, Long D (2007). Recognising and enabling clinician-led quality improvement initiatives; The Spinal Pressure Care Clinical (SPCC). *Asia Pacific Journal of Health Management*, 2(2), pp. 29-38.

Low L, Whelan AK, **Braithwaite J** (2007). What motivates medical staff involved in hospital accreditation surveying and how important are the issues of secondary gain and bias?. *Journal of the Australasian Association for Quality in Health Care*, 17(1), pp. 19.

Nathan S, Greenfield, D (2007). Studying participation in action: researching accreditation. *Health Issues*, 91, Winter, pp. 8-9.

Nugus P, Braithwaite J, Iedema R, Holdgate A, **Travaglia J**, McCarthy S, Fry M, Daly B (2007). El impacto del conocimiento clinic, su estructura e interaccion en la experiencia del paciente: el recorricio organizacional del clinic de emergencias [The impact of clinical knowledge, structure and interaction on the patient journey: the organisational development and identity of emergency clinicians]. *Academic Emergency Medicine*, 14(4), pp 97-98.

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Nugus P (2007). Re-theorising minimalist and maximalist discourse in the Australian monarchy-republican debate. *Australian Journal of Political Science*, 42(1), pp. 111-128.

Westbrook MT, Braithwaite J, Travaglia JF, Long D, Jorm C, Iedema R (2007). Promoting safety: varied reactions of doctors, nurses and allied health professionals to a safety improvement program, *International Journal for Health Care Quality Assurance*, 20(7), pp 555-571.

Westbrook JI, Coiera EW, Gosling AS, **Braithwaite J** (2007). Critical incidents and journey mapping as techniques to evaluate the impact of online evidence retrieval systems on health care delivery and patient outcomes. *International Journal of Medical Informatics*, 76(2-3), pp. 234-245.

Westbrook JI, **Braithwaite J**, Georgiou A, Ampt A, Creswick N, Coiera E, Iedema R (2007). Multi-method evaluation of information and communication technologies in health in the context of wicked problems and socio-technical theory. *Journal of the American Medical Informatics Association*, 14, pp. 746-755.

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Braithwaite J (2006). Analytic riposte: response to Podger's model health system for Australia (Part 1 and Part 2 articles). *Asia Pacific Journal of Health Management*, 1(2), pp. 15-21.

Braithwaite J (2006). An empirical assessment of social structural and cultural change in clinical directorates. *Health Care Analysis*, 14(4), pp. 185-193.

Braithwaite J (2006). Beyond patient safety: managerial perspectives on error. *Asia Pacific Journal of Health Management*, 1(2), pp. 74-75.

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Braithwaite J, **Iedema R**, **Jorm C** (2006). Trust, communication, theory of mind and the social brain hypothesis. *Organisational Behaviour in Health Care Conference*. University of Aberdeen, Scotland, 10-12 April.

Braithwaite J, **Iedema R**, **Westbrook MT** (2006). Health sector organisational restructuring: evidence for its futility. *Organisational Behaviour in Health Care Conference*. University of Aberdeen, Scotland, 10-12 April.

Callen J, **Braithwaite J**, Westbrook JI (2006). Does the clinical environment affect the use of computerized physician order entry? *14th National Health Informatics Conference*. Sydney, 22 August.

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Georgiou A, Westbrook JI, **Braithwaite J, Iedema R**, Dimos A, Gemanos T (2006). The Impact of CPOE on pathology services—a context-mechanism-outcome approach. *Fourteenth Health Informatics Conference*. Melbourne, 31 July-2 August.

Jorm C, Iedema R, Travaglia JF, Braithwaite J, Westbrook MT (2006). An analysis of the implementation of Root Cause Analysis Process in NSW Health. *4th Australasian Conference for Safety and Quality in Care 'Raising the Bar for Quality'*. Melbourne, 21-23 August.

Iedema R (2006). Discourse research as engagement with organizational practice. *International Conference on Organizational Discourse*. Vrije Universiteit of Amsterdam, 28-29 July.

Iedema R, Jorm C, Braithwaite J (2006). Clinical failure, root cause analysis and undecidability. *Organisational Behaviour in Health Care Conference*. University of Aberdeen, Scotland, 10-12 April.

Nugus P, Braithwaite J, Iedema R, Travaglia J, Holgate A, McCarthy S, Fry M, Daly B (2006). Negotiating the patient pathway through the hospital: the clinico-organisational labour of Emergency clinicians. *International Conference on Communication, Medicine and Ethics (COMET)*. Cardiff, Wales, 29 June-2 July.

Nugus P, Braithwaite J, Iedema R, Holdgate A, Travaglia J, McCarthy S, Fry M, Daly B (2006). The impact of clinical knowledge, structure and interaction on the patient pathway: the organizational journey of emergency clinicians. *Inaugural Inter-American Conference on Emergency Medicine*. Buenos Aires, Argentina, 18-21 April.

Travaglia JF, Braithwaite J, Westbrook MT, Ryan K, Michael S (2006). Multidisciplinary safety education for health professionals: a multi-method analysis. *4th Australasian Conference for Safety and Quality in Care 'Raising the Bar for Quality'*. Melbourne, 21-23 August.

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Iedema R, Forsyth R, Long D, Carroll K, Delaney G, Jacob S, Barton M, Braithwaite J, Westbrook J, Lee B, Kerridge R (2005). You have to see it to believe it: video as a tool for facilitating reflexive health care practice. *The Third International Interdisciplinary Conference on Communication, Medicine and Ethics (COMET) Conference*. Sydney, 10 June–2 July.

Long D (2005). Code switching as immaterial labour in multidisciplinary healthcare work. *The Third International Interdisciplinary Conference on Communication, Medicine and Ethics (COMET) Conference*. Sydney, 10 June–2 July.

Long D, Carroll K, Nugus P (2005). 24/7: Team research in an around-the-clock hospital ethnography. *Australian Qualitative Research Biennial conference: The Art and Craft of Qualitative Research: Creativity and Critiques*. Melbourne, 15-16 July.

Long D, Forsyth R, Travaglia J (2005). Preparing for the field: hospital ethnography and social scientists. *Australian Qualitative Research Biennial conference: The Art and Craft of Qualitative Research: Creativity and Critiques*. Melbourne, 15-16 July.

Rhodes C, **Iedema R**, Scheeres H (2005). Being at work: immaterial labor, affectualization and the presencing of identity. *European Academy of Management*. Munchen, Germany, 4-7 May.

Rotem A, **Mallock NA**, Jochelson T, Rotem T, Dewdney J (2005). The demand and supply of the public health labour market - a labour market approach. *International Symposium on Past and Future Trends of Health Workforce*. Barcelona, Spain, 21-23 April.

Westbrook JI, Coeria EW, **Braithwaite J** (2005). Measuring the impact of online evidence retrieval systems using critical incidents and journey mapping. *Conference Proceedings Medical Informatics Europe XIX Conference*. ISO Press: Geneva, Switzerland, pp.533-538

2004

Forsyth R, Iedema R (2004). Video ethnography as a method for studying professional communication in healthcare. *The Australian Sociological Association Annual Conference*. Melbourne, 8-11 December.

Grant D, **Iedema R** (2004). Discourse analysis and the study of organizations. *Organizational Discourse Conference*. Amsterdam, The Netherlands, 28-30 July.

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Grant D, **Iedema R** (2004). Emotive discourse in critical incident reports. *ASFLA Conference*. Brisbane, 30 June–2 July.

Iedema R (2004). Critical incident reporting in acute care: narrativizing medical errors folds concern into the soul. *Standing Conference on Organizational Symbolism (SCOS)*. Brisbane, 2-3 December.

Iedema R (2004). Critical incident reporting as emergent public discourse. *ASFLA Conference*, Keynote address. Brisbane, 30 June – 2 July.

Iedema R, Braithwaite J (2004). Six modalities of resistance. *Resistance in Organizations: Processes, Forms and Discourses*. University of Sydney, 18-19 February.

Iedema R, Braithwaite J, Forsyth R, Nugus P, Jorm CM, Travaglia J, Scheeres H (2004). The intensification of communication in modern health care: where narrative meets accountability. *BMA/BMJ Narrative Research in Health and Illness*. London, UK, 9-10 September.

Iedema R, Forsyth R, Delaney G, Jacob S, Westbrook JI, Braithwaite J, Barton M (2004). Video ethnography as a methodology for studying the technologization of practice. *Proceedings of the 11th World Congress on Medical Informatics (MedInfo) San Francisco, USA, 8-11 September*. ISO Press: Washington DC.

Iedema R, Rhodes C, Scheeres H (2004). Surveillance, resistance, observance: exploring the teleo-affective volatility of identity (at) work. *Organizational Discourse Conference*. Amsterdam, The Netherlands: 28-30 July.

Nugus P, Braithwaite J (2004). Interdisciplinary communication in an Emergency Department. *The Australian Sociological Association Annual Conference Revisioning Institutions: Change in the 21st Century*. Melbourne, 8-11 December.

Westbrook JI, **Braithwaite J, Iedema R, Coiera E** (2004). Evaluating the impact of information communication technologies on complex organisational systems: a multi-disciplinary, multi-method framework. *Proceedings of the 11th World Congress on Medical Informatics (MedInfo) San Francisco, USA, 8-11 September*. ISO Press: Washington DC, pp.1323-1327.

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CONFERENCE, WORKSHOP AND SEMINAR PRESENTATIONS

2007

Braithwaite J (2007). Workshop on changing organizational culture. *RH Penny*. Auckland, New Zealand, 20 November.

Braithwaite J (2007). Workshop on leading change in complex organizations: navigating structures, stakeholders and politics. *RH Penny*. Auckland, New Zealand, 21 November.

Braithwaite J (2007). Workshop on leadership and management for clinicians. *Royal Australian College of Medical Administrators*. Sydney, 6 November.

Travaglia J, Greenfield D, Braithwaite J (2007). Interprofessional learning, interprofessional practice and patient safety. *Keynote address to the Inter-professional Learning Workshop of the National Prescribing Service Working Party on Curriculum and Training*. Sydney, 5 November.

Braithwaite J (2007). Workshop on changing organizational culture. *Australian College of Health Service Executives*. Canberra, 18 October.

Braithwaite J (2007). National Advanced Health Leadership Program, module 4: Leadership and strategic thinking. *Australian College of Health Service Executives and RH Penny*. Canberra, 15 October.

Braithwaite J (2007). Accreditation: assessing the evidence: Transforming patient safety, accreditation and risk in health care in international context. *Keynote address to the 24th International Safety and Quality Conference: Transforming health care in the electronic age*. Boston, USA, 2 October.

Braithwaite J (2007). Natural selection has shaped us against IT Implementation success; can we overcome our evolved nature? *Keynote address to the Third International Technology in Health Care: Socio-technical Approaches*. Sydney, 30 August.

Braithwaite J (2007). Researching health care organizational cultures. *Presentation to the International Technology in Health Care Masterclass*. Sydney, 28 August.

Braithwaite J (2007). Developing quality improvement strategies through clinical governance. *Keynote address to the Patient Safety and Quality Improvement IPQC Conference*. Sydney, 4 December.

Publications and Presentations 2004-2007

Braithwaite J (2007). Communication and tribalism. *Address to the Health-Gov Conference: Effective Governance of Health Professions in Australia*. Brisbane, 11 December

Braithwaite J, Greenfield D, Pawsey M, Westbrook JI, Runciman WB, Redman S, Robinson M, Nathan S, Naylor J, Gibberd R, **Westbrook M**, Johnston B, Yen D, **Lancaster J**, McDonald H, Hennessey D, Jackson M, Corbett A and Low L (2007). Overview of current literature and research. *Address to the Australian Accreditation Research Network Workshop*. Sydney, ACHS, Centre for Clinical Governance Research, UNSW and Commonwealth Department of Health and Ageing, 22 August.

Braithwaite J, Runciman WB, Merry A (2007). Towards safer, better health care: leveraging the strength of networks. *Address to the Think Tank on Translating Evidence into Practice: An Action Plan*. Sydney, Australian Healthcare Association, 10 August.

Greenfield D, Braithwaite J, Pawsey M (2007). Examinations of the relationships between accreditation and organizational and clinical performance. *Presentation to the Australian Council Meeting (WHO Research Fellow—Malaysia)*. Sydney, 9 August.

Pawsey M, Gibberd R, **Braithwaite J**, Westbrook JI, **Greenfield D**, Naylor J. (2007). The relationship between accreditation criteria results and clinical indicators. *Presentation to the Power of Us: The Fifth Australasian Conference on Safety and Quality in Health Care*. Brisbane: Australian Association for Quality in Health Care, 8 August.

Braithwaite J, Greenfield D, Pawsey M, Travaglia J, Westbrook JI, Runciman WB, Redman S, Robinson M, **Nathan S**, Naylor J, Gibberd R, **Westbrook M**, Johnston B, Yen D, **Lancaster J**, McDonald H, Hennessey D, Jackson M, Corbett A and Low L (2007). Between the devil and the deep blue sea: patient safety and risk in hospitals. *Keynote address to the Power of Us: The Fifth Australasian Conference on Safety and Quality in Health Care*. Brisbane: Australian Association for Quality in Health Care, 8 August.

Greenfield D (2007). Leadership and Organisational Change Management Workshop. *Barwon-South Western Aged Care Leadership Project: Workshop 3*. Department of Human Services Victoria, 23-24 July.

Braithwaite J (2007). Examination of the relationships between accreditation and organizational and clinical performance. *Presentation to the Australian Council on Healthcare Standards Council Meeting*. Sydney, 28 June.

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Braithwaite J (2007). Evidence for translating evidence into practice. *Address to the Collaborations for Translating Evidence into Practice Group*. Sydney, 21 June.

Braithwaite J (2007). Leading the lost tribes of health system out of the wilderness: have health care staff and managers become hunters and collectors marauding about the health system? *Keynote address to the Australian College of Health Service Executives South Australia Breakfast Briefing*. Adelaide, 15 June.

Braithwaite J (2007). National Advanced Health Leadership Program, module 4: Leadership and strategic thinking. *Australian College of Health Service Executives and RH Penny*. Brisbane, 18 June.

Braithwaite J (2007). Primary health care development stream 1; chair. *UNSW Research Centres for Primary Health Care and Equity Annual Forum*. Sydney, 31 May.

Braithwaite J, Travaglia JF (2007). The politics, power, policy and practice. *Presentation to the Aged Care Association—NSW Annual Nursing and Management Issues Congress*. Sydney, 3 May.

Braithwaite J (2007). Workshop on changing organisational culture. *Australian College of Health Services Executives*. Sydney, 3 May.

Braithwaite J (2007). Workshop on leading change in complex organisations: navigating structures, stakeholders and politics. *Australian College of Health Services Executives*. Melbourne, 27 April.

Braithwaite J (2007). Engaging clinicians. *Presentation to New Zealand Institute of Health Management Evening Forum*. Auckland, New Zealand, 29 March.

Braithwaite J (2007). Joining the dots ... what's next? *Panel Presentation to the E-Health Conference National Priorities in Accelerating Electronic Communications in the Health Sector*. Sydney, Australia, 20 March.

Greenfield D, Braithwaite J, Pawsey M (2007). Progress Report: Centre for Clinical Governance Research—Australian Council on Healthcare Standards ARC Linkage Research Report. *Presentation to the Australian Council on Healthcare Standards Staff Meeting*. Sydney, 12 March.

Braithwaite J (2007). Workshop on Leading change in Complex Organiza

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tions: navigating structures, stakeholders and politics. *Australian College of Health Service Executives*. Hobart, Australia, 5 March.

Braithwaite J, Ovretveit J (2007). Executive masterclass on leading improvement and leading change. *Australian Council on Healthcare Standards*. Adelaide, Australia, 15-16 February.

Braithwaite J, Ovretveit J (2007). Update on leading change and leading improvement. *Australian Council on Healthcare Standards, Coordinating Surveyors Workshop*. Melbourne, Australia, 14 February

Braithwaite J, Ovretveit J (2007). Executive masterclass on leading change and leading improvement. *Australian Council on Healthcare Standards*. Melbourne, Australia, 12-13 February.

Braithwaite J, Ovretveit J (2007). Update on leading change and leading improvement. *Australian Council on Healthcare Standards, Coordinating Surveyors Workshop*. Brisbane, Australia, 10 February.

Braithwaite J, Ovretveit J (2007). Executive masterclass on leading change and leading improvement. *Australian Council on Healthcare Standards*. Brisbane, Australia, 8-9 February.

Braithwaite J, Ovretveit J (2007). Update on leading change and leading improvement. *Australian Council on Healthcare Standards, Coordinating Surveyors Workshop*. Sydney, Australia, 7 February.

Braithwaite J, Ovretveit J (2007). Executive masterclass on leading change and leading improvement. *Australian Council on Healthcare Standards*. Sydney, Australia, 5-6 February.

Greenfield D, Braithwaite J, Pawsey M (2007). Final Report: Centre for Clinical Governance Research—Australian Council on Healthcare Standards ARC Linkage Research Report. *Presentation to the Australian Council on Healthcare Standards Staff Meeting*. Sydney, 10 December.

Greenfield D, Braithwaite J (2007). Accreditation and its relationship to other organisational variables. *Presentation to the Australian Council on Healthcare Standards May Board Meeting*. Sydney, 24 May.

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2006

Braithwaite J (2006). Workshop on leading change in complex organisations: navigating structures, stakeholders and politics. *IMET*. Sydney, Australia, 30 November.

Braithwaite J, Westbrook MT, Westbrook JI, Iedema RA (2006). On the problem of continuous organisational restructuring: risks and solutions. Keynote Address. *Commonwealth Department of Health and Ageing 2006 Biennial Health Conference: A Measure of Hospital Health*. Sydney, Australia, 15 November.

Braithwaite J (2006). Workshop on leading change in complex organisations: navigating structures, stakeholders and politics. *Australian College of Health Service Executives, Darwin*. Darwin, Australia, 6 November.

Braithwaite J, Travaglia JF, Iedema RA, Westbrook JI, Foxwell R, Boyce R, Deviney T, Budge M, Murphy K, Ryall MA, Beutel J, Stone J (2006). ACT Health inter-professional learning project – key outcomes, learnings and themes. *Keynote address to the think tank on inter-professional learning*. Canberra, 3 November.

Braithwaite J (2006). Workshop on leading change in complex organisations: navigating structures, stakeholders and politics. *Australian College of Health Services Executive*. Canberra, 25 October.

Braithwaite J, Johnston B, Pawsey M, Greenfield D, Naylor J (2006). Addressing the accreditation paradox: a design to examine accreditation's contribution to improvement, *Accreditation for Quality Improvement: Making it Happen ISQua Symposium*. London, 22 October.

Braithwaite J (2006). Safety, quality and clinical governance: research progress. *Presentation to the Australian Commission on Safety and Quality in Health Care*. Sydney, Australia, 28 August.

Braithwaite J (2006). Improving cancer services. *Cancer Institute of NSW*. Sydney, Australia, 22 August.

Braithwaite J (2006). Teaching old dogs new tricks: summing up and lesson learned. *Keynote address to the 2006 National Conference of the New Zealand Institute of Health Management*. Wellington, New Zealand, 1 July.

Braithwaite J (2006). Teaching old dogs new tricks: what does the evidence say and what can we learn from it? *Keynote address to the 2006 National Conference of the New Zealand Institute of Health Management*. Wellington,

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New Zealand, 30 June.

Braithwaite J (2006). The Australian Health care system. *Presentation to the Visitation Program of Staff of the Manchester University Business School*. Sydney, Australia, 23 May.

Braithwaite J, Travaglia JF, Iedema R (2006). Evaluating projects. *Keynote presentation to the 2006 Knowledge Management Workshop Series, Sydney, Clinical Excellence Commission and NSW Health Department*. Sydney Australia, 19 April.

Braithwaite J, Travaglia JF, Iedema R (2006). Chairing sessions and giving presentations. *Keynote presentation to the 2006 Knowledge Management Workshop Series, Sydney, Clinical Excellence Commission and NSW Health Department*. Sydney Australia, 5 April.

Braithwaite J (2006). Leadership in health care: leadership defined. *Australian College of Health Service Executives and RH Penney, Advanced Aged Care Leadership Program*. Sydney, Australia, 3 April.

Braithwaite J, Travaglia JF, Iedema R (2006). Assessing, writing up and publishing your work. *Keynote presentation to the 2006 Knowledge Management Workshop Series, Sydney, Clinical Excellence Commission and NSW Health Department*. Sydney Australia, 29 March.

Braithwaite J (2006). Leadership in health care: leadership defined. *Australian College of Health Service Executives and RH Penney, Advanced Health Leadership Program*. Sydney, Australia, 27 March.

Braithwaite J (2006). Inter-professional learning. *Keynote presentation to the 2006 Breakfast briefing series, Australian College of Health Services Executives ACT*. Canberra, Australia, 31 January.

Carroll K (2006). Incorporating complexity theory and feminism into video ethnography. *Australian Consortium of Social and Political Research Incorporated (ACSPRI) Social Science Methodology Conference*. Sydney, Australia, 10-14 December.

Carroll K, Forsyth R, Long D (2006). The use of video in social science research: panel. *Australian Consortium of Social and Political Research Incorporated (ACSPRI) Social Science Methodology Conference*. Sydney, Australia, 10-14 December.

Carroll K (2006). Complexity Theory as a model for the clinico-organisational dynamics of intensive care. *Australian Sociological Association (TASA)*.

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Perth, 4-7 December.

Carroll K, Iedema R (2006). Enabling clinicians to enhance the ways they conduct clinical handovers in ICU: A video-ethnographic account. Improving clinical handover seminar. *ACQSHC*. Brisbane, 4 December.

Carroll K (2006). Complexity theory for health services research: what are sociologists saying about complexity theory and how am I using it? *School of Sociology Postgraduate Symposium*. UNSW, Sydney, 28 October.

Carroll K (2006). Using complexity theory to conceptualise staffing and system dynamics in a general ICU. *SPHCM Student Conference*, UNSW Sydney, 27 October.

Carroll K (2006). Enhancing clinical reflectivity to enact change: medical ward round communication. *Presentation to the School of Public Health and Community Medicine, UNSW's seminar series, Reinventing Health*. Sydney, Australia, 28 June.

Carroll K (2006). Power, delicacy and muting: editing choices in reflexive feedback. *Presentation to the School of Public Health and Community Medicine, UNSW's seminar series, Reinventing Health*. Sydney, Australia, 28 June.

Crisp R, **Lee B**, Campbell R, Noonan V, Biering F, Sorensen R, Stander J, Wang D, Wing P, **Long D, Iedema R** (2006). International Classification of External Causes of Injuries (ICECI). *The Combined Annual Meetings Of The American Spinal Injury Association (Asia) and The International Spinal Cord Society (ISCOS): A Global Spinal Cord Injury Conference*. Boston, Massachusetts, 24-28 June.

Demirkol A, **Travaglia J, Long D, Carroll K** (2006). Dumping and other discourtesies: peer support among hospital based health care professions. *Annual Australian Anthropological Association Conference*. Cairns, 27-29 September.

Forsyth R (2006). Distance versus dialogue; modes of engagement of two professional groups participating in a video ethnographic study. *Australian Consortium of Social and Political Research Incorporated (ACSPRI) Social Science Methodology Conference*. Sydney, Australia, 10-14 December.

Forsyth R (2006). Health information systems and their perturbation for professionals' work practices and relationships. *Australian Sociological Association (TASA)*. Perth, 4-7 December.

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Forsyth R (2006). Making work visible: impact of doctors' practices on lab officers. *Presentation to the School of Public Health and Community Medicine, UNSW's seminar series, Reinventing Health*. Sydney, Australia, 28 June.

Georgiou A, Westbrook J, **Braithwaite J** (2006). An investigation into the implications of electronic ordering systems for pathology laboratories. *School of Public Health and Community Medicine, Research Student Conference*. Sydney, Australia, 9 September.

Greenfield D, Braithwaite J, Pawsey M, Naylor J (2006). Addressing the accreditation Paradox; a design to examine accreditation's contribution to improvement. *Presentation to the Queen Mary Hospital and the Hong Kong University Delegation*. Sydney, Australia, 22 December.

Hunter C, Iedema R (2006). The emic and the etic in clinical work cascades. *Australian Consortium of Social and Political Research Incorporated (ACSPRI) Social Science Methodology Conference*. Sydney, Australia, 10-14 December.

Hunter C, Long D (2006). Ethnography and the ARC: how Australian research funding structures work against rigour in culture writing. *Australian Consortium of Social and Political Research Incorporated (ACSPRI) Social Science Methodology Conference*. Sydney, Australia, 10-14 December.

Hunter C, Long D (2006). Culture writing: the art and science of ethnography: panel. *Australian Consortium of Social and Political Research Incorporated (ACSPRI) Social Science Methodology Conference*. Sydney, Australia, 10-14 December.

Hunter C (2006). What you do in CPU. *Child Protection Unit Sydney Children's Hospital*. Randwick, 16 November.

Hunter C (2006). Untangling the web of critical incidents': ethnography in a paediatric setting. *Neonatal Intensive Care Unit, Children's Hospital, Westmead*, 6 November.

Hunter C, Iedema R (2006). Untangling the web of critical incidents': ethnography in a paediatric setting. *Rehabilitation Department, Children's Hospital at Westmead, Westmead, NSW*, 12 October.

Hunter C, Iedema R (2006). Anchoring preventive health care to positive

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learning: hospital-based ethnography in a paediatric public hospital. *Presentation to the Nursing and Allied Health Research Seminar, The Children's Hospital, Westmead*. Sydney, Australia, 21 July.

Iedema R (2006). Discourse in/and health. *Introductory statement. Discourse & Health Conference*. University of Western Sydney, Sydney, 23-24 November.

Iedema R, Jorm C, Carroll K (2006). Health services organization and discourse research. *Discourse & Health Conference*. University of Western Sydney, Sydney, 23-24 November.

Iedema R, Long D, Lee B, Nicholls J, Katte L, Braithwaite, J (2006). Mapping the complexity of hospital practice: The case of a spinal pressure area clinic. *Centre for Health Informatics, UNSW*. Sydney, 12 October.

Iedema R, Long D (2006). What ideally should happen: clinical pathways, trajectory mapping, and the value of emic and etic perspectives in organization of clinical practice. *Annual Australian Anthropological Association Conference*. Cairns, 27-29 September.

Iedema R, Long D, Carroll K, Forsyth R, Hunter C, Hor S, Braithwaite J (2006). Governing hospital work: clinical complexity, video-ethnography and the 'clinalyst'. *Presentation to the Medicine, Technology Disease and the State Seminar Series*. Sydney, Australia, 26 September.

Iedema R, Long D, Carroll K, Forsyth R, Hunter C, Braithwaite J (2006). Confronting the complexity of clinical work. *Sydney Linguistics Circle Seminar Series*. University of Sydney, 15 September.

Iedema R (2006). Discourse research as engagement with organizational practice. *Presentation to the 7th International Conference on Organizational Discourse: Identity, Ideology, Idiosyncrasy*. Amsterdam, Netherlands, 26-28 July.

Iedema R, Long D, Lee BSB, Nicholls J, Katte L, Braithwaite J (2006). Confronting the complexity of hospital work: the case of a spinal pressure area clinic. *Presentation to the NHS Institute for Innovation and Improvement*. Coventry, England, 26 July.

Iedema R (2006). Systematization and beyond. *Sydney Children's Hospital Randwick In-House Training Modules*. Randwick, 11 July.

Iedema R (2006). Video Ethnography in the Hospital. *Presentation to the School of Public Health and Community Medicine, UNSW's seminar series, Reinventing Health*. Sydney, Australia, 28 June.

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Iedema R (2006). Health care communication. *Young Anaesthetist Fellows Conference*. Victor Harbour, Adelaide, 10-12 April.

Long D (2006). Wound juice pathways and vectors of infection: using video ethnography to enhance hospital infection control practice. *Australian Consortium of Social and Political Research Incorporated (ACSPRI) Social Science Methodology Conference*. Sydney, Australia, 10-14 December.

Long D (2006). Passionate Research. *ATAX (Australian School of Taxation) Annual Retreat*. UNSW, Sydney, 15 December.

Long D (2006). On being passionately pragmatic: strategically planning a research career. *Mid-career women researchers network*. UNSW, Sydney, 16 November.

Long D, Carroll K, Nugus P (2006). Space over time: "24/7" ethnography in two hospital wards. *Australian Consortium of Social and Political Research Incorporated (ACSPRI) Social Science Methodology Conference*. Sydney, Australia, 10-14 December.

Long D (2006). Clinical cartography: ethnographic mapping of hospital spaces. *Annual Australian Anthropological Association Conference*. Cairns, 27-29 September.

Long D, Hunter C (2006). When the field is a ward or a clinic: hospital ethnography panel. *Annual Australian Anthropological Association Conference*. Cairns, 27-29 September.

Long D (2006). Standard precautions vs schoolyard rules: cultural barriers to infection control compliance. *Presentation to the Infection Control Association of NSW Inc 29th Annual Conference Coughs and harbouring colds – what's come through the door?* Coffs Harbour, 27-28 July.

Long D (2006). Mapping complexity: understanding infection control practice. *Presentation to the School of Public Health and Community Medicine, UNSW's seminar series, Reinventing Health*. Sydney, Australia, 28 June.

Long D, Clezy K, Lee B, Pontovivo G, Iedema R (2006). Preventing health care associated infections: an ethnographic approach. *The Australasian Society for Infectious Diseases Incorporated Annual Scientific Meeting*. Wellington, New Zealand, 1-4 April.

Nugus P, Braithwaite J, Iedema RA (2006). Grounding the inter-action of Australian emergency clinicians. *Australian Consortium of Social and Political*

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Research Incorporated (ACSPRI) Social Science Methodology Conference. Sydney, Australia, 10-14 December.

Nugus P (2006). The interaction, communication and organizational labour of Australian Emergency clinicians. *Presentation to Accident and Emergency Department, St Thomas' Hospital.* London, United Kingdom, 25 July.

Nugus P (2006). Negotiating the patient pathway through the hospital: The clinico-organizational labour of Australian Emergency clinicians. *Presentation to Charité Universitätsmedizin Berlin, Institut für Medizinische Soziologie.* Berlin, Germany, 18 July.

Nugus P (2006). The organizational labour of Australian Emergency clinicians. *Presentation to Centre Hospitalier Universitaire Vaudois (CHUV) Lausanne.* Lausanne, Switzerland, 13 July.

Nugus P (2006). La interacción la comunicación. y el trabajo organizacional del personal clínico de emergencias en Australia. *Presentation to Departamento de Emergencias, Complejo Universitario de San Carlos.* Madrid, Spain, 16 June.

Nugus P (2006). La interacción la comunicación. y el trabajo organizacional del personal clínico de emergencias en Australia. *Presentation to Departamento de Emergencias, Hospital Italiano.* Madrid, Buenos Aires, Argentina, 8 June.

Nugus P (2006). La jornada organizacional del personal clinico de emergencias en Australia. *Presentation to Instituto de Investigacion Gino Germani, Facultad de Ciencias Sociales, Universidad de Buenos Aires.* Buenos Aires, Argentina, 26 May.

Pontivivo G, **Long D**, Clezy K, **Lee BSB**, **Iedema R** (2006). Turning surveillance into self-surveillance: using video ethnography and feedback session to assist clinicians in taking responsibility for infection control. *Presentation to the Infection Control Association of NSW Inc 29th Annual Conference Coughs and harbouring colds – what's come through the door?* Coffs Harbour, 27-28 July.

Scheinberg A, **Hunter CL** (2006). Multidisciplinary teams for children with cerebral palsy how can they help? *12th National Seminar on Cerebral Palsy.* Kuala Lumpur, Malaysia, 8 December.

Travaglia J (2006). Cultural competence in Australia. Invited keynote speaker. *From tolerance to respect: cultural competence to practice.* Homebush, Sydney, 7-8 September.

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Travaglia J (2006). Locational disadvantage: focusing on place to improve health. Invited keynote speaker. *Needle and Syringe Workers Program Annual Conference*. Redfern, Sydney, 7-8 September.

Travaglia J (2006). Locational disadvantage and the public health workforce. Invited keynote speaker. *Locational disadvantage and the public health workforce*. Sydney, Australia, 19 July.

2005

Braithwaite J (2005). Systematicisation and change: culture and systems change as barriers and enablers. Presentation to the *Guidelines Implementation Research Group of the Sax Institute*. Sydney, 27 October.

Braithwaite J (2005). Changing dysfunctional departments into teams. Key-note address to the *Australian Patient Safety Foundation Conference: Innovations in Patient Safety for Clinical Leaders*. Adelaide, 18 May.

Braithwaite J (2005). Culture shift: leadership without easy answers. Key-note address to the *Queensland Divisions of General Practice Forum*. Brisbane, 28 October.

Braithwaite J (2005). For the future: the mix of opportunities for health research and policy: eight key findings. Presentation to the *Health Policy and Research Exchange of the Sax Institute*. Sydney, 3 November.

Braithwaite J (2005). Humans running health care: an evolutionary dead end? Keynote address to the *Australian College of Health Service Executives Queensland Breakfast Briefing*. Brisbane, 21 June.

Braithwaite J (2005). Leadership in health care: leadership defined. *Australian College of Health Service Executives and RH Penney, Advanced Health Leadership Program*. Sydney, 4 April.

Braithwaite J (2005). Reality check in patient safety – past, present and future. Keynote address to the *Australian College of Health Service Executives Queensland State Conference: Reality Check in Health: Looking Forward, Looking Back*. Gold Coast, 20 May.

Braithwaite J (2005). Values and the overall direction and philosophies of the Australian Patient Safety Foundation. *Australian Patient Safety Foundation Annual Strategic Planning Process*. Adelaide, 17 February.

Publications and Presentations 2004-2007

Braithwaite J (2005). Why does human nature keep getting in the way of good health delivery? Keynote address to the *Australian College of Health Service Executives (Western Australia Branch) Breakfast Seminar*. Perth, WA, 7 October.

Braithwaite J (2005). Workforce and the health system of the future: issues, enablers and constraints. Keynote address to the *Combined Change Champions Workshop of the South Australian Health Department*. Adelaide, 4 November.

Braithwaite J, Pawsey M, Westbrook J (2005). The ARC linkage program in accreditation – overview and issues. Presentation to the *Australian Council on Healthcare Standards May Board Meeting*. Sydney, 26 May.

Braithwaite J, Travaglia J, Mallock N, Iedema R (2005). Evaluating projects. *NSW Health Department Knowledge Management Seminar*. Sydney, 15 February.

Braithwaite J, Travaglia J, Mallock N, Iedema R, Westbrook M, Long D, Nugus P, Forsyth R, Jorm C, Pawsey M (2005). Evaluation of the Safety Improvement Program in NSW. Presentation to the *Board of the Clinical Excellence Commission*. Sydney, 11 October.

Braithwaite J, Travaglia J, Mallock N, Iedema R, Westbrook M, Long D, Nugus P, Forsyth R, Jorm C, Pawsey M (2005). Evaluation of the Safety Improvement Program in NSW. Presentation to the *Executive of the Clinical Excellence Commission*, Sydney: 11 October.

Carroll K (2005). Lactation consultants: experts of instinct? Presented to the *Australian Breastfeeding Association Conference for International Breastfeeding*. Hobart, 28-30 September.

Carroll K (2005). Timelessness? The experience of time in an ICU. *School of Public Health and Community Medicine, UNSW, Research Student Conference*. Sydney, 9 September.

Forsyth R (2005). Information use practices and inter-professional relationships of ward doctors and laboratory scientists. *School of Public Health and Community Medicine, UNSW, Research Student Conference*. Sydney, 9 September.

Publications and Presentations 2004-2007

Forsyth R (2005). Technologizing care: implications for laboratory scientists of test order computerization (invited paper). *The Third International Interdisciplinary Conference on Communication, Medicine and Ethics (COMET) Conference, Diversity of discourse communities in health: power, politics and risk*. Sydney, 30 June-2 July.

Forsyth R, Iedema R (2005). Video ethnography as a research tool: unique challenges and insights. *Association for Qualitative Research Conference*. Melbourne, 15-16 July.

Iedema R (2005). Failure, responsibility and communication ethics: the investigation and management of clinical errors in acute care. *The Third International Interdisciplinary Conference on Communication, Medicine and Ethics (COMET) Conference, Diversity of discourse communities in health: power, politics and risk*. University of Sydney, 30 June-2 July.

Iedema R (2005). Hospital communication and clinical interaction. *The Third International Interdisciplinary Conference on Communication, Medicine and Ethics (COMET) Conference, Diversity of discourse communities in health: power, politics and risk*. University of Sydney, 30 June-2 July.

Iedema R (2005). Organisational discourse analysis as critical engagement [keynote]. *International Centre for Organizational Discourse Research, Strategy and Change Conference on Organizational Discourse*. University of Sydney, 8-9 December.

Iedema R, Forsyth, R, Long D, Carroll, K, Delaney G, Jacob S, Barton M, Braithwaite J, Westbrook J, Lee B, Kerridge R (2005). You have to see it to believe it: video as a tool for facilitating reflexive health care practice (paper presented to poster). *The Third International Interdisciplinary Conference on Communication, Medicine and Ethics (COMET) Conference, Diversity of discourse communities in health: power, politics and risk*. Sydney, 30 June-2 July.

Iedema R, Long D, Carroll K, Stenglin M, Braithwaite J (2005). Corridor work: how liminal space becomes a resource for handling complexities of multi-disciplinary health care. *Asia-Pacific Region Organisation Studies Conference*. Victoria University, Melbourne, 5-7 December.

Publications and Presentations 2004-2007

Iedema R, Scheeres H (2005). Recontextualising theory through case studies: an exploration of student engagement with research-derived classroom materials. *International Systemic-Functional Linguistics Association Conference*. University of Sydney, 17-20 July.

Lee B, Iedema R, Long D, Marial O, Braithwaite J (2005). Spinal pressure care initiatives at POW. Looking in the mirror from research to clinical practice and back again. *Grand Round, Prince of Wales Hospital*. Randwick, June.

Long D (2005). Applying ethnography to infection control. *Southern Metropolitan Infection Control Association, monthly seminar*. Randwick, 5 July.

Long D (2005). Enculturating health: medical anthropology, ethnography and health research. *School of Public Health and Community Medicine seminar series*. University of NSW, Kensington, 8 March.

Long D (2005). Ethnography as an infection control tool. *South East Sydney Area Health Service Infection Control Group*. Sydney, July.

Long D (2005). Undertaking interviews. *Paraquad NSW*. Sydney, 5 August.

Long D, Forsyth R, Carroll K, Iedema R. (2005). Video ethnography in hospital spaces. *School of Public Health and Community Medicine seminar series*. University of NSW, Kensington, 16 November.

Long D, Travaglia J, Iedema R, Westbrook M (2005). Analysing qualitative research. Seminar for *Centre for Clinical Governance Research in Health*. University of NSW, Kensington, June.

Long D, Forsyth R, Carroll K, Iedema R. (2005). Video ethnography in hospital spaces. *School of Public Health and Community Medicine seminar series*. University of NSW, Kensington, 16 November.

Long D, Travaglia J, Iedema R, Westbrook M (2005). Analysing qualitative research. Seminar for *Centre for Clinical Governance Research in Health*. University of NSW, Kensington, June.

Publications and Presentations 2004-2007

Long D, Forsyth R, Travaglia J (2005). Preparing for the field: hospital ethnography and social scientists. *Association for Qualitative Research Conference*. Melbourne, 15-16 July.

Nathan S, Braithwaite J (2005). Consumer participation: positioning, discourse and influence in health care decision-making. *School of Public Health and Community Medicine, UNSW, Research Student Conference*. Sydney, 9 September.

Nugus P, Braithwaite J (2005). Life in the fast lane: the organisational identity of Emergency clinicians. *School of Public Health and Community Medicine, UNSW, Research Student Conference*. Sydney, 9 September.

Travaglia J, Braithwaite J (2005). Evaluation in patient safety research: triangulation as a philosophy, design template and empirical tool. *Institute for Health Research Seminar on Patient Safety: the size of the problem and effective interventions*. Sydney, 22 February.

Travaglia J, Braithwaite J (2005). Placing patient safety. *The Third International Interdisciplinary Conference on Communication, Medicine and Ethics (COMET) Conference, Diversity of discourse communities in health: power, politics and risk*. Sydney, 30 June-2 July.

Westbrook JI, Georgiou A, **Iedema R, Braithwaite J, Forsyth R** (2005). Evaluating the impact of electronic ordering systems. Presentation to *Royal Prince Alfred Hospital*. Sydney, 2 May.

2004

Braithwaite J (2004). Chairing sessions and giving presentations. *Senior Partners of Bentleys MRI*. Sydney, 17 February.

Braithwaite J (2004). Changing organisational culture workshop. *Australian College of Health Service Executives*. North Ryde, 1 April.

Braithwaite J (2004). Changing organisational culture workshop. *Australian College of Health Service Executives*. North Ryde, 8 July.

Braithwaite J (2004). Changing organisational culture: learning sets. *Australian College of Health Service Executives*. North Ryde, 25 June, 27 August, 29 October, 10 December.

Publications and Presentations 2004-2007

Braithwaite J (2004). Does our evolved nature mean that quality and safety problems can never really be solved? Beyond the Bristol, King Edward Memorial Hospital and Campbelltown and Camden Inquiries. *Centre for Health Services Research, Western Sydney Area Health Service*. Parramatta, 7 September.

Braithwaite J (2004). Doing management and leadership: organisational issues, strategic issues. *Management for Clinicians, Royal Australasian College of Medical Administrators*. Sydney, 2 November.

Braithwaite J (2004). Evolution, tribalism and contemporary behaviour: beyond the Inquiries. *Physicians' Grand Rounds of the St. George Hospital*. Sydney, 18 November.

Braithwaite J (2004). Hospital inquiries reviewed – Bristol, King Edward Memorial Hospital and South Western Sydney Area Health Service: what are the potential organisational and cultural outcomes from these inquiries? *Australian College of Health Service Executives and Northern Sydney Area Health Service*. Sydney, 18 March.

Braithwaite J (2004). Management skills for rehabilitation clinicians. *Australian Faculty of Rehabilitation Medicine, Royal Australasian College of Physicians*. North Ryde, 30 June.

Braithwaite J (2004). Minimising risks – applying the lessons learnt from hospital inquiries. *Australian Council on Healthcare Standards*. Ultimo, Sydney, 10 June.

Braithwaite J (2004). Presenting and chairing: tips and traps. *Australian Council on Healthcare Standards*. Ultimo, Sydney, 13 May.

Braithwaite J (2004). Restructuring: why do it when it doesn't seem to get you anywhere? A management puzzle, enigma and paradox all rolled up. *Australian College of Health Service Executives, Evening Seminar for Emerging Managers*. North Ryde, 7 October.

Braithwaite J (2004). Step up to the mark – challenges for managers: changing organisational culture in aged care. *Benchmarking against the Best in Aged Care Conference*. Sydney, 19 November.

Braithwaite J (2004). Understanding lessons learned from hospital inquiries. *Australian Council on Healthcare Standards*. Ultimo, Sydney, 3 June.

Publications and Presentations 2004-2007

Braithwaite J (2004). Writing a paper for publication. *Australian Council on Healthcare Standards*. Ultimo, Sydney, 20 May.

Braithwaite J (2004). Evolution, tribalism and contemporary behaviour: beyond the Inquiries. *Surgeons' Grand Rounds of the St. George Hospital*. Sydney, 30 November.

Braithwaite J (2004). Making the most out of changes and restructures. *Australian College of Health Service Executives, Managing Success in a Changing Business Environment*. North Ryde, 22 October.

Braithwaite J (2004). Patient safety: what's next? Keynote address to the *Quality Expo 2004 – Safety and Beyond Conference*. Sydney, 17 November.

Braithwaite J, Iedema R (2004). Governance and the place of safety and quality in international health reform. *Study Tour of the Canadian Government's Scoping of Safety and Quality in International Context*. Sydney, 11 November.

Braithwaite J, Iedema R, Long D, Ulmer B (2004). Research evidence for systems redesign, governance, and clinicians in management. *Study Tour of the Canadian College of Health Service Executives, Australian College of Health Service Executives and The Change Foundation of Canada*. Sydney, 3 November.

Braithwaite J, Iedema R, Travaglia J (2004). Assessing, planning, writing up and publishing your work. *NSW Health Department Knowledge Management Seminar*. Sydney, 6 September.

Braithwaite J, Travaglia J, Iedema R, Mallock N (2004). An educational primer on chairing sessions and giving presentations. *NSW Health Department Knowledge Management Seminar*. Sydney, 6 October.

Braithwaite J, Westbrook JI (2004). The safety climate survey: implementation issue. *NSW Health Department, Quality Executives*. Sydney, 12 May.

Braithwaite J, Westbrook JI (2004). The safety climate survey: implementation issues. *NSW Health Department Quality Executives*. Sydney, 12 May.

Publications and Presentations 2004-2007

Grant D, **Iedema R** (2004). Discourse analysis and the study of organizations. Workshop. *University of Queensland Business School*, 7 May.

Iedema R (2004). An introduction to (critical) discourse analysis in health. *School of Public Health and Community Medicine and the Qualitative Research Network in Health*. University of New South Wales, Sydney, 18 November.

Iedema R (2004). Collaborative research across social science and health. *Department of Critical and Cultural Studies. Macquarie University*, Sydney, 28 October.

Iedema R (2004). Revisiting appraisal in light of public organizational discourse, or the institutionalization of emotive meaning. *Sydney Linguistics Seminar Series, University of Sydney*. Sydney, 13 August.

Nugus P, Braithwaite J (2004). Interdisciplinary communication in an Emergency Department. *The Australian Sociological Association Annual Conference Revisioning Institutions: Change in the 21st Century*. Melbourne, 8 December.

CONFERENCES CONVENED AND SESSIONS CHAIRED

Braithwaite J (2007). *Australian College of Health Administrators' Nursing Managers Conference. Address the issues: putting thoughts into action. Workforce Issues*. Sydney, 23 November. Session: Turning thoughts into action.

Braithwaite J (2007). *Australian College of Health Administrators' Nursing Managers Conference. Address the issues: putting thoughts into action. Workforce Issues*. Sydney, 23 November. Session: Thinking about the key issues.

Braithwaite J (2007). *Clinical Governance Congress 2007—IIR Conference—Professor Bill Runciman, Ms Stephanie Newell, Professor Megan-Jane Johnstone*. Brisbane, 23 October. Session: Moderated think tank—public reporting on safety and quality.

Braithwaite J (2007). *Clinical Governance Congress 2007—IIR Conference—Dr Craig Margetts*. Brisbane, 23 October. Chaired Session: Managing performance concerns: safe doctors, fair system.

Publications and Presentations 2004-2007

Braithwaite J (2007). *Clinical Governance Congress 2007—IIR Conference*. Brisbane, 23 October. Chaired session: Promises and perils: engaging patients of diverse cultural and language backgrounds in advancing patient safety and quality care.

Braithwaite J (2007). *Clinical Governance Congress 2007—IIR Conference—Dr Tony Giddings*. Brisbane, 23 October. Chaired session: Changing cultures, shifting paradigms; evidence turned into action.

Braithwaite J (2007). *Clinical Governance Congress 2007—IIR Conference—Mr Brian Johnston, Professor Bill Runciman, Mr Steve Einfield*. Brisbane, 22 October. Session: Moderated think tank—the future of accreditation in Australia.

Braithwaite J (2007). *Clinical Governance Congress 2007—IIR Conference—Ms Jill Rayment*. Brisbane, 22 October. Chaired Session: Case study—Patient central focus, caring for families of sentinel events.

Braithwaite J (2007). *Clinical Governance Congress 2007—IIR Conference—Dr Craig Margetts*. Brisbane, 22 October. Chaired session: Case study—Patient safety: from learning to action. A model for systemwide patient safety reform.

Braithwaite J (2007). *Clinical Governance Congress 2007- IIR Conference—Dr Humsha Naidoo*. Brisbane, 22 October. Chaired session: Four pillars for clinical governance leading to clinical excellence: Northern Health's (Victoria's) dynamic approach into demystifying clinical governance and standardizing processes.

Braithwaite J (2007). *Clinical Governance Congress 2007 – IIR Conference—Mr Bruce Levy*. Brisbane, 22 October. Chaired session: Clinical governance and financial incentives: a private health insurer's perspective.

Braithwaite J, Phillips S, Cameron P, Semmens J [Ward M Chair] (2007). *The power of research and evidence*. Brisbane: Australian Association for Quality in Health Care, 8 August [<http://www.aaqhc.org.au/pdf/ConfPrograj2007.pdf>]. Panel discussion at the Power of Us: The Fifth Australasian Conference on Safety and Quality in Health Care.

Braithwaite J (2007). *Australian College of Health Service Executives (South Australia Branch) State Conference: The never ending journey: a lonely planet guide to health care*. Adelaide, 15 June.

Publications and Presentations 2004-2007

Braithwaite J (2007). *Australian College of Health Service Executives (NSW Branch) State Conference: Looking forward, looking back—evaluating reforms and predicting trends*. Sydney, 4 May.

2006

Braithwaite J (2006) *School of Public Health and Community Medicine Annual Strategic Planning Retreat*, Brighton Le Sands, December 1. Session: Group findings, identification of inhibitors and leavers to change and discussion about the way forward.

Braithwaite J (2006) *School of Public Health and Community Medicine Annual Strategic Planning Retreat*, Brighton Le Sands, December 1. Session: Group findings, identification of inhibitors and leavers to change and discussion about the way forward.

Braithwaite J (2006) *Australian College of Health Services Executives (NSW Branch): Aged Care Conference*, Sydney, November 24. Session: Digesting the conference information, summing up and take home value.

Braithwaite J (2006) *Australian College of Health Services Executives (NSW Branch) State Conference*, Sydney, April 7. Session: Quality and Safety.

Braithwaite J (2006) *Centre for Clinical Governance Research Seminar Series*, Sydney, February 16. Session: John Øvretveit on scientific research methods.

2005

Braithwaite J (2005). *Change Champions Workshop on the Workforce of the Future*, Session: Think Tank: The Change Champions Workshop Participants on the Challenge of Workforce Reform. *South Australian Government*. Adelaide, November 4.

Braithwaite J (2005). Debra Humphris Seminar on the New Generation Project: inter-professional learning and clinical education. *ACT Health Department; Australian College of Health Service Executives; University of Southampton, UK*. Canberra, November 15.

Braithwaite J (2005). National Advanced Health Leadership Program, module 4: leadership and strategic thinking. *Australian College of Health Service Executives and RH Penney*. Canberra, October 17-18.

Publications and Presentations 2004-2007

Braithwaite J (2005). *Change Champions Workshop on the Workforce of the Future*, Session: Professor Justin Beilby [Executive Dean, Faculty of Health Sciences, University of Adelaide], Professor Robyn McDermott [Pro Vice Chancellor, Division of Health Sciences, University of South Australia], Dana Shen [Executive Director, Aboriginal and Torres Strait Islander Health, Central Northern Adelaide Health Service], Less Thomas [State Secretary, Australian Nurses Federation], Annette Wright [Executive Director, Employee Relations and Organisational Development, Southern Adelaide Health Service], Heather Parkes [Executive Consultant, Office of Health Reform, South Australian Department of Health], Martin Dooland, Chief Executive Officer, South Australian Dental Service], Cathy Miller [General Manager, North West Adelaide Health Service], Helen Chalmers [Regional General Manager, South East Regional Health Service, South Australia], Lyn English [Consumer], Michael Rice [Consultant Paediatrician and Chair of the Clinical Senate, South Australia] and Mark Waters [Chair, Health Reform South Australia]: Hypothetical: How in building the workforce of the future, do we *create a place people want to work?* South Australian Government. Adelaide, November 4.

Braithwaite J (2005). National Advanced Health Leadership Program, module 3: leadership, culture and performance improvement. *Australian College of Health Service Executives and RH Penney*. Melbourne, August 15-16.

Braithwaite J (2005). National Advanced Health Leadership Program, module 2: leadership and change management. *Australian College of Health Service Executives and RH Penney*. Brisbane, June 6-7.

Braithwaite J (2005). National Advanced Health Leadership Program, module 1: leadership and personal style. *Australian College of Health Service Executives and RH Penney*. Sydney, April 4-6.

Braithwaite J (2005). One system – three sectors? Cooperation or indifference, Session: Katherine McGrath, Paul Sadler, John Pitsonis: cooperation or indifference? *Australian College of Health Service Executives Conference*. Sydney, April 8.

Braithwaite J (2005). Partnerships: the synergy of reform, Session: The Hon Iris Evans [Minister for Health and Wellness, Alberta, Canada], Dr Lester Russell [Fujitsu, UK], Professor Stephen Leeder [Australian Health Policy Institute]: Dialogue about international health reform issues. *Australian College of Health Services Executives National Congress*. Adelaide, August 11.

Publications and Presentations 2004-2007

Braithwaite J (2005). Partnerships: the synergy of reform, Session: Steven DeLaurier [Fujitsu, Asia Pacific], The Hon Iris Evans [Minister for Health and Wellness, Alberta, Canada], Dr Lester Russell [Fujitsu, UK], Professor Stephen Leeder [Australian Health Policy Institute], Professor Katherine McGrath [NSW Health], Mr Michael Moodie [WA Health], Dr John O'Donnell [Mater Health, Brisbane]: Pre-Congress think tank of International and Australian leaders. *Australian College of Health Services Executives National Congress*. Adelaide, August 10.

Braithwaite J (2005). Reality check in health – looking forward, looking back, Session: Steven Boyages, Stephen Duckett, Ian Reinecke: panel discussion: what have we learned about health and patient safety? *Australian College of Health Service Executives Conference*. Gold Coast, Queensland, May 20.

Braithwaite J (2005). Reforming the Health System, Session: Primary Health Care: Discussion of Recommendations and Finalisation of AHCRA Position. Australian Health Care Reform Alliance. Adelaide, November 17.

Braithwaite J (2005). Research into patient safety: the size of the problem and effective interventions, Sessions: Welcome and introduction; Research into patient safety; How can we develop better methods of evaluating patient safety – presentations; how can we develop better methods of evaluating patient safety – discussions. *Institute for Health Research, NSW*. Sydney, February 22.

Braithwaite J (2005). Seminar on research into patient safety – the size and nature of the problem and effective interventions. *Institute for Health Research*. Sydney, February 22.

Braithwaite J (2005). Workshop and focus group on the allied health clinician-management connect in greater metropolitan public hospitals in Sydney. *Greater Metropolitan Clinicians Taskforce*. Sydney, August 17.

Braithwaite J (2005). Workshop on changing organisational culture. *Queensland Divisions of General Practice*. Brisbane, October 28.

Braithwaite J (2005). Workshop on changing organisational culture. *Australian College of Health Services Executives*. Fremantle, Western Australia, October 7.

Publications and Presentations 2004-2007

Braithwaite J (2005). Workshop on changing organisational culture. *Australian College of Health Services Executives*. Perth, Western Australia, October 6.

Braithwaite J (2005). Workshop on changing organisational culture. *Australian College of Health Services Executives*. Adelaide, March 21-22.

Braithwaite J (2005). Workshop on changing organisational culture. *Australian College of Health Services Executives*. Townsville, March 10-11.

Braithwaite J (2005). Workshop on changing organisational culture. *Australian College of Health Services Executives*. Darwin, March 7-8.

Braithwaite J (2005). Workshop on doing management and leadership for clinicians. *Royal Australian College of Medical Administrators*. Sydney, November 8.

Braithwaite J (2005). Workshop on leadership and management for clinicians. *Royal Australian College of Medical Administrators*. Sydney, July 5.

Braithwaite J (2005). Workshop on leading change in complex organisations: navigating structures, stakeholders and politics. *Australian College of Health Services Executives*. Sydney, April 7.

Braithwaite J (2005). Workshop on the workforce of the future. *South Australian Government*. Adelaide, November 4.

Braithwaite J (2005). Visit of Professor John Øvretveit to the Australian Council on Healthcare Standards and Centre for Clinical Governance Research, Session: The leader's role in quality and safety improvement. *Australian Council on Healthcare Standards and Centre for Clinical Governance Research*. UNSW, Sydney, February 23.

2004

Braithwaite J (2004). Advanced health leadership program, module 4: leadership, culture and performance improvement. *Australian College of Health Service Executives and RH Penney*. Melbourne, 11-12 October.

Braithwaite J (2004). Advanced health leadership program, module 3: leadership and the management of change. *Australian College of Health Service Executives and RH Penney*. Brisbane, 9-10 August.

Publications and Presentations 2004-2007

Braithwaite J (2004). Aggression and violence in the health care workplace, Session: Regulation, Solutions and Coping Strategies. *Australian Patient Safety Foundation Summit*. Adelaide, May 21.

Braithwaite J (2004). Linking the silos – achieving change, session: panel discussion: integrating health and aged care. *Australian College of Health Service Executives Conference*. Sydney, April 1.

Braithwaite J (2004). Linking the silos – achieving change, session: concluding and summing up. *Australian College of Health Service Executives Conference*. Sydney, April 1.

Braithwaite J (2004). Seminar on chairing sessions and giving presentations. *Partners at Bentley's MRI*. Sydney, 24 February.

Braithwaite J (2004). Seminar on knowledge management. *NSW Health Department*. North Sydney, 6 September.

Braithwaite J (2004). Study Tour of Senior Executives from University of Manchester, Session: Australia's Health Information Management and Information and Communications Technology. *UK Study Tour: Use of Information, Informatics and Technology in Healthcare Modernisation and Reform*. Sydney, November 29.

Braithwaite J (2004). Workshop on changing organisational culture. *Australian College of Health Services Executives*. Sydney, 1 April.

Braithwaite J (2004). Workshop on women's health services – future directions. Staff of the Women's and Children's SMT, Strategic Planning Workshop. *ACT Health Department*. Canberra, 9 February.

Braithwaite J (2004). Workshop to develop a learning and development framework. *Senior Staff of ACT Health, ACT Health Department*. Canberra, 13 February.

Braithwaite J (2004). Workshops and focus groups on the medical clinician-management connect in greater metropolitan public hospitals in Sydney. *Greater Metropolitan Clinicians Taskforce*. Sydney, 18, 20, 27 October.

Braithwaite J, Robinson M (2004). Knowledge management forum. *NSW Health, Centre for Clinical Governance Research and the Institute for Clinical Excellence*. Sydney, 31 May.

Financial Overview

CENTRE FOR CLINICAL GOVERNANCE RESEARCH IN HEALTH

Statement of Financial Performance

for the Year Ended 31 December 2007

	2007	2006
	\$	\$
Income		
External Funds see note (i)	456,406.03	701,836.85
UNSW Contribution	<u>100,000.00</u>	<u>34,394.00</u>
Total Income	556,406.03	736,230.85
Expenses		
Payroll	386,364.39	548,842.96
Equipment	6,495.69	460.11
Materials	106,476.71	147,352.59
Travel	<u>24,798.56</u>	<u>76,361.09</u>
Total Expenses	524,135.35	773,016.75
Operating result	32,270.68	-36,785.90
Surplus (Deficit) Bfwd from Prior Year (ii)	476,093.34	512,879.24
Accumulated Funds Surplus (Deficit)	<u>**508,364.02</u>	<u>476,093.34</u>

****Please note surplus due to late receipt of funds and late start of personnel for grants.**

(i) Excludes debtors (unpaid invoices)

Notes to the Statement of Financial Performance

1. The Centre acknowledges the University's in-kind contributions in rental, heat, light & power and two positions, which also contribute to its teaching commitments.
2. In-kind contributions from various grants, including ARC Linkage programs, are not brought to account in this statement.
3. The value of visiting staff, and various contributions from staff who support the Centre, are acknowledged but are also not brought into account in this statement.

Financial Overview

CENTRE FOR CLINICAL GOVERNANCE RESEARCH IN HEALTH

GENERAL FUND

Statement of Financial Performance

for the Year Ended 31 December 2007

	2007
	\$
Income	
External Funds (i)	0.00
UNSW Contribution	100,000
Total Income	<u>100,000</u>
Expenses	
Payroll	24387.68
Equipment	357.27
Materials	262.00
Travel	1512.42
Total Expenses	<u>26,519.37</u>
Operating result	73,480.63
Surplus (Deficit) Bfwd from Prior Year	9,073.81
Accumulated Funds Surplus (Deficit)	<u><u>82,554.44</u></u>
(i) Excludes debtors (unpaid invoices)	0.00

Notes to the Statement of Financial Performance

1. The Centre acknowledges the University's in-kind contributions in rental, heat, light & power and two positions, which also contribute to its teaching commitments.
2. In-kind contributions from various grants, including ARC Linkage programs, are not brought to account in this statement.
3. The value of visiting staff, and various contributions from staff who support the Centre, are acknowledged but are also not brought into account in this statement.

**CENTRE FOR CLINICAL GOVERNANCE
RESEARCH IN HEALTH**

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