# **Case Stories**

Creating a shared understanding and approach to what is a complex organizational and logistical challenge among a number of healthcare entities.

#### COMPLEX PROBLEM SOLVING

### Situation

With an ageing population, Australia is experiencing an inevitable and continuing rise in the incidence of strokes. The treatment of stroke victims has seen some major advances in the last decade. Healthcare systems around the world are readjusting their strategic approaches and treatment protocols. There are special hurdles for stroke reperfusion therapies (in particular, endovascular clot retrieval) in the larger states of Australia where travel times and distances are often abnormally large.

#### Challenge

Many different healthcare entities (e.g. local doctors, tertiary hospitals, ambulance services, stroke rehabilitation units) All need to work together seamlessly to ensure a stroke victim experiences the minimum time from attack to resolution. In a very large state of Australia, the resources for providing these victims fast and advanced care, built on new approaches developed in the last decade, Are concentrated in the capital city. Consequently, stroke victims Living in some cases thousands of kilometres from this capital city are at a distinct disadvantage in their access to such life-saving recent treatment developments. The challenge was to provide equity of access to all people across the state through more integrated and seamless services from all relevant healthcare entities.

#### **Our Approach**

Dalmau Consulting partnered with the Deputy Director General (and a few of his colleagues) of the state health department concerned and ....

> Identified the key relevant health service entities from across the state and enrolled them in three meetings occurred at the end of daily work on three separate occasions over three months. The first of these involved some key actors from remote locations via video link.

> Using processes that fostered both dialogue and whole-of-system understandings, the group established goals and benefits of the new treatment approaches, requirements to be met for an integrated state-wide system, the real benefits to be accrued to patients, their families and the government.

> The system and its processes were mapped in great detail, and points in the whole process identified where significant improvements were either required or possible. Non-linear problem solving processes were used.

## **Outcomes**

This work is never ending. The meetings represented a pinch point in the whole evolution of these stroke response processes. In particular the work done by this group from across the various entities led to ...

> Improvements in key decisions steps in the early identification and treatment of victims, including better assessment of who could most benefit from the treatment immediately after a stroke

> More efficient transport of patients across cast distances

> A much better appreciation across all entities of their own part in a state-wide problem

> Repurposing some key decision making roles in the department to enhance the overall response.



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