

Flagship Project 2: Empowering Data Literacy and Capability to Drive Quality Care

Appendix A: Proposed Project Implementation Plan

V1.0 (17 March 2025)

Project Summary

This Flagship Project aims to empower aged care providers with the knowledge and capability to leverage their existing rich data sources to improve outcomes for aged care clients. This project will develop and embed data capabilities among aged care staff by enhancing the use of routinely collected data for pressure injuries and wound care. In the context of residential aged care, this will include the National Aged Care Mandatory Quality Indicator for pressure injuries, and in the context of home care this will include routinely collected data related to wound prevention, identification and care.

Participants in this Flagship Project will be supported by Aged Care Research & Industry Innovation (ARIIA) and Subject Matter Experts (SMEs) to identify, leverage and enhance routinely collected data regarding pressure injury and wound prevention, identification, management, and reporting. They will use data-driven insights to identify an opportunity to address a relevant problem and will be supported to develop and implement an evidence-based intervention specific to their organisation's Implementation Site context. These interventions intend to reduce both the incidence and severity of pressure injuries and wounds in a variety of aged care settings.

While this project will focus on pressure injuries and wound care, learnings are intended to be transferable to any other data that is collected within the organisation.

Beyond scaling an intervention and testing of the immediate outcomes, this project as part of the broader Flagship program will also test its feasibility and transferability across different aged care settings. It will also foster collaboration within the sector, helping providers address workforce challenges that are difficult to tackle in isolation. On completion, it is intended that the project's findings will provide the sector with valuable evidence and insights that can be translated across a variety of aged care contexts, ultimately contributing to a more responsive, workforce-ready aged care system that aligns with the evolving needs of older Australians.

Outcomes

Project Outcomes

Data literacy and capability	Data driven quality improvement
<p>Primary project outcome:</p> <p>Participants will demonstrate increased knowledge, capability and confidence in identifying, collecting and interrogating data to inform evidence-based approaches that improve quality of care at a client and Implementation Site level.</p>	<p>Primary project outcome:</p> <p>Improvement in data quality and consumer outcomes. Participants will implement and evaluate a data-driven, evidence-based intervention in one or more of the following areas for pressure injury: prevention, monitoring and/or management of pressure injury.</p>

Data literacy and capability	Data driven quality improvement
<p>Secondary project outcome:</p> <p>Participants will demonstrate how learnings from this project will be applied across other quality indicators and/or routinely captured quality of care data where relevant.</p>	<p>Secondary project outcome:</p> <p>Participants will build their network and confidence in data-driven quality of care by collaborating with other project participants from across the aged care sector, supported by industry and SMEs. Participants will demonstrate how learnings from this project on successful pressure injury interventions are disseminated and communicated to key stakeholders identified in the individual project plans (e.g. site and organisational governance bodies, care recipients/families) and external stakeholders in the broader sector to improve promotion of best-practice activities to improve care.</p>

Each implementation site will be responsible for collecting and reporting on measures to inform project outcomes. Project outcome data will be collated and analysed by the ARIIA project team in collaboration with the project SMEs and the collaborative consortia.

Aged Care Collaborative Program Outcomes

ARIIA will coordinate the evaluation of high-level Flagship and Aged Care Collaborative program outcomes to measure outcomes related to organisational readiness, participation, collaboration, acceptability, transferability, scalability and impact. Implementation Sites will be asked to participate in and record data at baseline, interim and final project timepoints to contribute towards the data collection for these measures. ARIIA is aware that these evaluation activities need to be streamlined so as not to impact an organisation's capacity to undertake their implementation project, in addition to the provision of usual care.

Project Roles

The table below outlines the anticipated roles required and approximate FTE commitment that the Participating Organisations will be expected to commit to the project for Phases 1-3 (approximately six months). These roles will need to be funded by the grant funding (up to \$50,000 ex GST) and matched co-contribution.

The FTE commitment for Phase 4 will be determined during Phase 3 through approval of the submitted implementation plan.

Key Personnel	Anticipated FTE Phases 1, 2 & 3	Description
Leadership Sponsor	0.1 FTE	Site or Organisation Senior Leader with governance and reporting duties. Their main role for this project will be to ensure project personnel have the necessary resources to successfully meet project deadlines and participate in collaborative and capability building opportunities. This role will also support the team to embed learnings into reporting frameworks for long-term sustainability and lead the development of the Phase 4 Implementation Plan.

Key Personnel (continued)	Anticipated FTE Phases 1, 2 & 3	Description
Clinical Lead (RN)	0.2 FTE	This role will provide clinical advisory to the project, participate in a selection of workshops and contribute to data analysis.
Project Lead	1.0 FTE	These roles will be the key project participants and will be responsible for the day-to-day success of the project, attending workshops, undertaking online training, developing the implementation plan for Phase 4, and ensuring deadlines and activities are completed in a timely manner. The internal data role should be a person responsible for oversight and/or delivery of the usual data collation and reporting for QI or routinely collected data (e.g. Business Analyst, QI Data Lead).
Internal Data Role	0.6 FTE	
Specific Expertise	0.2 FTE	Other expertise within the organisation, such as IT, HR, Allied Health.
Other backfill frontline staffing costs	0.2 FTE	Costs associated with time required for co-design with frontline staff.

Participating organisations will be supported throughout each stage of their project by ARIIA, who will facilitate the project as the evaluation and project implementation partner to enable consistent, centralised and collaborative project and implementation management and evaluation. In addition, the participants of each Flagship project will be supported at an operational project level by ARIIA staff and embedded Data and Clinical SMEs who will provide advice and project mentoring across the entire project lifespan as needed. These SMEs are funded by ARIIA separately to the project funds.

An Independent Advisory Group will provide high level advice to the Aged Care Collaborative's two Flagship Projects, and its members will provide high-level feedback, advice and recommendations throughout the 12-month program.

Project Phases

*This is an indicative schedule only, recognising that based on organisational readiness and capacity, participants will be supported by ARIIA and the SMEs to move through the project at different paces within the 12-month total timeframe.

To deliver Project Phases 1-3, participating organisations will receive up to \$50,000 ex GST in ARIIA grant funding. 1:1 matched funds will be required in addition to the ARIIA grant amount (includes cash and in-kind contribution).

Collaboration, evaluation, project management and knowledge sharing (across the 12 months)

- Participation in the Flagship Project Collaborative Consortia will comprise facilitated workshops, drop-in discussions and online sessions with the broader Flagship team.
- ARIIA will provide the Collaborative Consortia with project management, risk management and evaluation support throughout the entire project.
- Throughout the process, communicate findings/learnings to internal and external stakeholders in accordance with the implementation plan.

Phase 1: Project Initiation (indicative July - August 2025)

Participants will be supported through the Project Initiation Phase to:

- Establish project team, roles and responsibilities including governance structure.
- Confirm budget allocation (FTE assigned and other resources).
- Identify high-level known and potential risks to the project and how these will be addressed.
- Develop high-level implementation plan which includes identification of, and communication planning for key stakeholders from beginning to end of the project.
- Describe existing data and guidelines which inform organisation practice with respect to prevention, identification, management and/or reporting of incidence and severity of pressure injuries and wounds.
- Finalise report on past data performance that was submitted with application.
- Confirm timelines and deliverables with the ARIIA project team.

Phase 2: Data Interrogation (indicative September - October 2025)

- Participants will attend online workshops facilitated by a Data SME to develop their data literacy, knowledge and capability, on topics including but not limited to:
 - An introduction to data and data analysis.
 - Understanding data systems and collection.
 - Understanding data in its context and its limitations and value.
 - Using data for decision-making.
- ARIIA and the Data and Clinical SMEs will support participants to:
 - Identify, interpret and analyse data that identifies opportunities for improvement in data processes.
 - Identify, interpret and analyse data that uncovers an opportunity for improvement or problem to address.
 - Undertake root cause analysis on the problem.
 - Undertake a SWOT analysis of current approach.
 - Contribute to the planning for implementation of an evidence-based project (Phase 3).

Phase 3: Develop an evidence-based solution (indicative November – December 2025)

- ARIIA and Data and Clinical SMEs will provide project and data mentoring support throughout.
- Based on ARIIA's evidence-based [Innovation Capability Program](#) (ICP), participants will engage in online learning modules, workshops and coaching sessions with ARIIA to:
 - Understand evidence-based practice and find and adapt evidence to inform their solution.
 - Undertake co-design, stakeholder engagement and change planning.
 - Develop a project plan for implementation, guided by a validated approach for process, behavioural or culture change.
 - Develop an appropriate data capture and analysis plan with support from the ARIIA research team.
- Participants will develop a small evidence-based solution and a six-month implementation plan to improve one area of pressure injury or wound care.
- Obtain local governance approval including ethics or ethics exemption if required.

At the end of Phase 3, each participating organisation will prepare an implementation plan to submit to ARIIA for approval outlining their proposed evidence-based solution and requested funding to implement the solution in Phase 4 (up to \$70,000 ex GST). 1:1 matched funds will be required in addition to the ARIIA grant amount (includes cash and in-kind contribution).

Phase 4: Implement and evaluate solution (indicative January - June 2026)

- Participating organisations will implement their evidence-based solution using the ARIIA ICP tools and resources, with mentoring support from ARIIA and the Data and Clinical SMEs.
- Organisations will prepare a progress report at three months post implementation, which will briefly highlight successes and risks and include local risk mitigation strategies to address ongoing challenges with the short-, medium- and long-term goals of the project.
- Organisations will prepare a final report to build on the progress report with a deeper dive into successes, and approaches to risk mitigation. It will also include final outcome data aligned with the primary and secondary outcomes, reporting against the knowledge translation plan and recommendations for long-term sustainability.

Over the 12-month period, the project will generate evidence-based insights to inform broader workforce strategies, supporting scalability and sustainability across the aged care sector.