



East Grampians  
Health Service



# COMMUNITY MATTERS

**2016-17** VICTORIAN QUALITY ACCOUNT

# VALUE STATEMENTS



## INTEGRITY

We value integrity, honesty and respect in all relationships



## EXCELLENCE

We value excellence as the appropriate standard for all services and practices



## COMMUNITY

We respect the dignity and rights of our community and acknowledge their beliefs, regardless of their cultural, spiritual or socioeconomic background



## WORKING TOGETHER

We value equally all people who make a contribution to EGHS to achieve shared goals



## LEARNING CULTURE

We strive to continually learn and develop through education, training, mentoring and by teaching others

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# CHIEF EXECUTIVE'S WELCOME

**The Quality Account – Our Community Matters, demonstrates how East Grampians Health Service continues to aim to provide safe, high-quality care to our community. Safer Care Victoria was established in January 2017 to address the Government's response to Targeting Zero, the review of hospital safety and quality assurance.**

Our Community Matters provides us with the opportunity to share important information that demonstrates how we deliver quality health services. The publication includes statistical information, clinical indicators and Standards to compare our performance from previous years, as well as against other similar sized health services.

Last year I made the commitment that we would continue to improve on our health services through effective communication with our consumers and stakeholders, including our patients, clients, residents, carers and families, and importantly our staff.

**This commitment to ongoing quality care has again been recognised by the State Government awarding your Health Service the Premier's Medium Sized Health Service of the Year 2016 in the Victorian Public Healthcare Awards.**

This is an outstanding achievement of which the whole community can be justifiably proud. The award acknowledges the trust you place in us and the commitment we make to you to provide quality, safe health care.

Our organisational Values continue to be our guiding principles in our delivery of care, from respecting individuals whether staff or recipients of care, engaging in sound governance practices, continuing to strive for excellence through education and service delivery, and working with health partners and members of our community.



L-R Katherine Cooper, Dr Debra Schulz, Tanya Haslett, Matthew Wood, Maree Fraser, Peter Armstrong

I was appointed to the position of Chief Executive in 2011 and this rural, diverse, vibrant community has never disappointed me in its response to some challenging health issues. Rather than looking at the negatives, together we have explored what works well and how we can make it work better.

For example, this year the Health Service participated in the following, some of which we will report on within the Quality Account:

- Research of the Montessori Model of Care, with staff feedback indicating that our residents' lives have been enriched, providing a sense of purpose to their daily living; (page 09)
- Increasing access to dental services with visits to kindergartens and primary schools across our catchment area. (page 16)
- Healthy Together Achievement Program, with a total of 12 schools focusing on suicide prevention and a whole of population approach tackling multiple risk factors of poor health; (page 14)
- A review of Ararat Rural City's Municipal Health and Wellbeing Plan with 260 people taking part in the Big Ararat Health Study; (page 14)
- Collaborating with the Australian Catholic University to deliver the Diploma of Nursing from Ararat in January 2017 (page 19)
- The introduction of policies and reporting to reflect Targeting Zero to ensure our community will continue to receive quality safe health care; (page 06)
- The implementation of Western Victoria Primary Health Network Chronic Conditions Model of Care with Stawell Regional Health; (page 14)

- Providing community members with greater awareness and education to enable them to understand better their own health issues; (page 14)
- Investigation of areas of cultural need, consulting with key stakeholders, the outcomes of which have been included in our Partnering with Consumers Action Plan; (page 15)
- Cultural awareness training for staff who interact with members of the Aboriginal and Torres Strait Island community; (page 15)
- Coordination of education to staff around child safety and family violence; (page 15)
- Accreditation. (page 19)

The Executive Team and I are very responsive to the feedback you provide. It is a true indication of how we are delivering care and, informal is as important as formal feedback – though sometimes more difficult to address. I sincerely hope that we never take for granted our community and I thank you again for taking a real interest in the care you receive.

Both the Annual Report and the Quality Account: Our Community Matters can be downloaded from our website [www.eghs.net.au](http://www.eghs.net.au)

**Nick Bush**  
Chief Executive

## THE QUALITY ACCOUNT

This year we have organised the layout of our Quality Account in a similar way to the Annual Report. Mandatory reporting, graphs and stories will come under each Division that they refer to.

# EXECUTIVE SERVICES

It's been a busy year at Your Health Service:



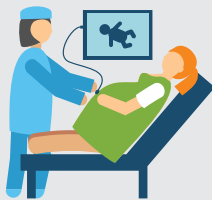
The Health Service's catchment area covers **4,230** sq kms



**11,183** people live within the catchment area (ref. Ararat Rural City)



A diverse workforce from over **14** different countries



**116** babies born in 2016-2017



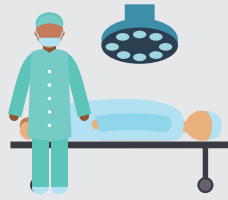
**4,231** Urgent Care presentations



**12,845** Community Nursing occasions of service



**5,395** total admissions



**2,187** operations conducted



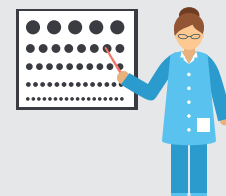
**5,109** Dental treatments (2,282 people seen)



**14,497** Community Health occasions of service



**28,474** Aged Care bed days



Number of staff upskilled **50**

## DEVELOPMENT AND DISTRIBUTION OF OUR COMMUNITY MATTERS

In developing our *Community Matters* we have used feedback from previous reports and worked with staff and the community to provide advice, content and feedback for this year's. In distributing the report our challenge is to make sure as many people receive a copy while keeping within a realistic budget. This year notifications of its availability will be made through local and social media. Consumers can obtain a copy:

- At reception at each campus and facility
- On our Website [www.eghs.net.au](http://www.eghs.net.au), Twitter and Facebook
- Medical Centres and Shire offices

## YOUR OPINION MATTERS

We care very much about what you think and hope that we provide an environment where you can comfortably have your say.

In planning for the future health needs of our community we need to understand what programs and services work for you, what changes you would like to see and whether you would like to be actively involved in shaping the health future of our community.

### We gather information in a number of ways:

- Informally, through talking with the Chief Executive, members of the Executive Team or relevant staff members
- Formally, through the Compliments and Concerns mechanism
- Through the Victorian Health Experience Survey
- Community forums
- Accreditation, where surveyors meet with a wide range of community members including patients, residents and staff to ascertain the performance of the Health Service
- And through this publication. There is an opportunity on the back page to have your say – please take a moment to fill in the questionnaire.

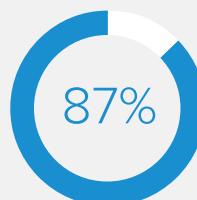
Each of these avenues provides us with significant information that we evaluate and address. Never underestimate the value of your contribution.

Our aim is to demonstrate that you can always feel confident that if you, or a family need safe, quality health care, we will continue to be your Health Service of choice.

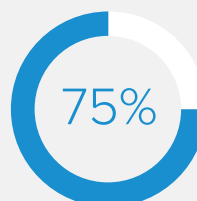
## INCREASING SOCIAL MEDIA

There's a common myth that social media is only used by the young! Nothing could be further from the truth!

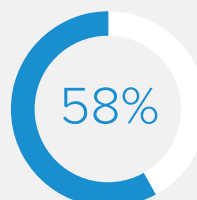
### In 2016 the Sensis Social Media Report 2016 indicated that:



of Australians access the internet daily and are spending half a day a week on Facebook.



of people aged between 18 – 29 years of old age access social media once a day.



of people aged between 50 and 65+ access social media once a day.

Social media is a most effective way of communicating with our consumers and we are continuing to develop our own social media networks. We hope that by using social media more we will encourage a wider group of people to become involved in the Health Service. We have updated our website with consumers invited to trial the site before it goes live.

### Social media is used to:

- Inform consumers of new programs and services
- Consumer appointments

## PEOPLE MATTER SURVEY

The People Matter Survey is a voluntary staff opinion survey administered annually by the Victorian Public Sector Commission. The information gathered on a broad range of issues assists the Executive Team to plan strategies to address key findings of the survey.

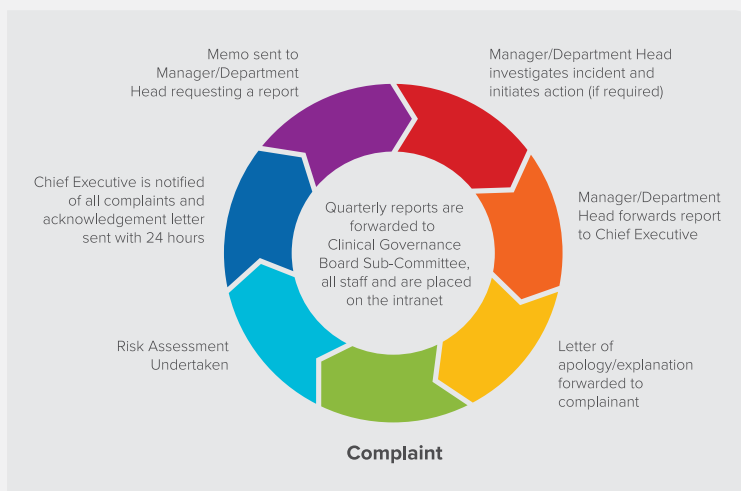


## COMPLIMENTS AND CONCERNS

Responding to compliments and concerns is a major component of our overall improvement process. This year we received 555 compliments and 103 concerns, all of which were satisfactorily addressed.

### The process for registering either is by:

- Completing a Compliments or Concerns form
- Telephone                      → Letter
- In person                        → Via email
- Website: [www.eghs.net.au](http://www.eghs.net.au)



All complaints are confidential and information only shared with the relevant Managers and Department heads. However, we can share a concern that was satisfactorily resolved. It was suggested that the Health Service purchase higher chairs in the medical imaging waiting room, for patients who have undergone hip replacements.

Clients found the chairs too low and difficult to get in and out of. The chairs were ordered and are now in the waiting room, much to the pleasure of clients.



*Bart Rutley trying out the new higher chairs*

## TARGETING ZERO

This year we are working diligently with the government in its endeavour to ensure that all members of the community receive safe, quality health care. Targeting Zero is a State Government review of hospital safety and quality assurance in Victoria.

The Board takes its responsibilities seriously and its organisational approach to clinical and corporate governance, education and training, quality and risk management is extremely thorough. Throughout the year policies and procedures have been reviewed in order to ensure they reflect our focus on Targeting Zero.

An adverse event is defined as an incident that harms a person receiving health care. This may include infections, falls resulting in injury, or problems with medication and medical devices.

- No reported high level adverse events
- Board and relevant committees continue to be provided with information on incidents that occur
- The Victorian Hospital Incident Management System is used to record, investigate and review adverse events and, where appropriate, seek external clinical expertise to review cases independently.

## SAFETY CULTURE

Our Health Service scored 72% positive agreement that Trainees are adequately supervised. Even though this was the highest rating in our peer group it has been a focus of the Education Department to ensure that our educators and clinical teachers are appropriately rostered and placed in areas where trainees work. Since the outcome of the survey was released, we have now rostered staff across both morning and afternoon shifts, where previously it was only morning shifts. This has provided greater access for trainees to clinical teachers and more support for staff working with trainees on a day to day basis. Anecdotal reports have been received that staff and trainees are satisfied with this new arrangement.

The average agreement with the following positive questions that measure Patient safety

	Group Average	Our score	Highest score	Change from 2016
Patient care errors are handled appropriately in my work area	74	85	85	-1
This health service does a good job of training new and existing staff	64	80	80	+1
I am encouraged by my colleagues to report any patient safety concerns I may have	85	90	93	-1
The culture in my work area makes it easy to learn from the errors of others	69	83	83	+3
Trainees in my discipline are adequately supervised	63	72	72	-3
My suggestions about patient safety would be acted upon if I expressed them to my manager	78	87	87	-3
Management is driving us to be a safety-centred organisation	78	87	91	-1
I would recommend a friend or relative to be treated as a patient here	79	91	92	0



Kara Smith Graduate Nurse and Kathy Fitzpatrick Clinical Support nurse

## PARTNERING WITH CONSUMERS

In health we often use the word consumer or stakeholder. A consumer is a person accessing health care, and a stakeholder is a person with an interest or concern in our Organisation. They are similar and sometimes a consumer can also be a stakeholder. As has been described elsewhere (page xx) a number of consumers have become involved in helping to shape our health service.

**This has been achieved through participation in:**

- Board sub-committees, for example Community Consultative Committee and Clinical Governance Committee
- Community Forums
- Reviewing publications

Community participation into one of the Board sub-committees provides a different, important perspective to our decision-making. We are delighted that the community will have greater input into the strategic planning of the Health Service. If you are interested in participating in a meaningful way, we would love to hear from you. Please contact us at the Health Service by ringing 5352 9300 and leaving your name and contact details, or by dropping in. We will make contact with you to discuss your involvement.

## COMMUNITY SERVICE FORUM

Following discussions with the Chief Executive of Budja Budja Aboriginal cooperative it was decided that individual conversations with consumers would be more appropriate than community forums as this provided a more informal opportunity for consumers to have their say in service delivery. Through these discussions we have made really positive inroads into promoting oral health within the Indigenous community.

# CLINICAL SERVICES

## MATERNITY SERVICES

While we try not to use jargon, sometimes it can't be helped! The Apgar score is a method to measure the health of a new baby and was developed by an American Anaesthetist. It is just one indicator the Health Service reports on to government.

In the 2014-2015 Victorian Perinatal Service Performance Indicator, our Health Service had no significant declining trends for its performance against the Statewide information. However, it did report a less favourable response for the Indicator that collects information about the number of term infants without congenital abnormalities that have an Apgar score less than 7 at the five-minute mark after birth.

This equates to about three of the 100 births. This result was not repeated in the 2015-2016 report, which recorded no occasions where infants recorded a less favourable result in the Apgar score.

Number of Babies Born at the Health Service over the past three years:

2014-2015	<b>110</b>
2015-2016	<b>115</b>
2016-2017	<b>116</b>



## ESCALATION OF CARE

Our catchphrase is:

**"if you are worried, we are worried  
- let us know".**

This is what we mean by escalation of care. We want patients and their families to know that it is their right to inform us when they are worried about their health.

**On admittance to hospital patients, with their carers, receive:**

- Education on escalation of care;
- A brochure in the patient folder explaining the process;
- And posters have been developed to place at strategic locations around the Health Service.

Escalation of Care training is now a component of mandatory training for both clinical and non-clinical staff.



**IF YOU ARE WORRIED.  
WE ARE WORRIED.**

LET US KNOW.



[www.eghs.net.au](http://www.eghs.net.au)

**We would like to share the experience of Mr Samuel, who has given his permission (though we have changed his name).**

Mr Samuel, an 82-year old gentleman, presented to the Urgent Care Centre. For a number of weeks his family had been concerned about his general wellbeing as he appeared lethargic, dizzy and was losing weight. Before being admitted to the Inpatient Unit a range of tests were undertaken, much to the relief of the family who were most appreciative of the care and attention given to their father. During the night the on-call Doctor came to see Mr Samuel as the nursing staff were concerned about his condition.

The Doctor discussed with Mr Samuel and his family if his Care Plan included active treatment. They agreed that it did and as a result care was escalated and he was immediately transferred to Ballarat Health Services'. The family were very pleased at the level of discussion and intervention, with an excellent outcome for Mr Samuel who underwent bowel surgery and returned to our Health Service two weeks later. Mr Samuel is in remarkable health and after a period of respite care, will be discharged home.

Careful monitoring by nursing staff, timely notification and escalation to the on-call Doctor resulted in Mr Samuel having surgery in a satisfactory and timely manner to assist with his excellent recovery.



## ADVANCE CARE PLAN

As is common practice, Doctors and Nurses help women plan for a good birth, a Physiotherapist helps plan for a good recovery post injury/surgery, and an Advance Care Plan (ACP) can assist us to help people plan for, as much as possible, a good death. An ACP helps residents and patients in our care, and their families, retain some control of situations that may arise during end of life care. It provides the opportunity to have their choices for future health care and personal care recorded and followed when the need arises.

On admission to either acute or residential care all patients and residents of an appropriate age, or with existing co-morbidities, are asked if they have an ACP or Substitute Decision Maker. If not we offer written information that outlines the purpose of an ACP in clear and simple terms. An ACP can be completed with the assistance of the General Practitioner, trained Advance Care Planner, resident and family or carer. It takes away ambiguity, stress and family conflict. 95% of all our residents have completed an ACP and, as is their right, some residents have chosen not to.



Tracey Walters

## AN ADVANCE CARE PLAN FROM A NURSE'S PERSPECTIVE

An Advance Care Plan is a really important document that provides reliable and helpful information to clinicians on how patients choose to be cared for at end of life, when not able to communicate directly themselves. We work with colleagues at other health care facilities who can provide us with patients' ACP so that we are able to refer to the document when the patient is transferred to us.

Over the past three years ACPs have become more common and have been a valuable tool in treating patients with chronic conditions during their palliative or end of life period.

An ACP can guide the multidisciplinary care team thereby ensuring that we continue to provide patient centred care that involves the patient and families in medical, nursing and personal care decisions. We have also observed that end of life care is less stressful once an ACP is in place.

### Tracey Walters

*Associate Nurse Unit Manager*

The Health Information Management Team are working closely with our Acute Care staff to identify all incidences where an ACP, or Substitute Decision Maker, is required. Staff are being encouraged to complete all documentation of each individual consumer's position in regard to this requirement. We have increased our compliance over the last quarter of the financial year from 30% to 42%. This is one of the highest percentages in this quarter.

## MONTESSORI MODEL OF CARE

Federation University Ballarat and our Health Service conducted a research project to ascertain the effectiveness of the recently introduced Montessori Model of Care at 70 Lowe Street.

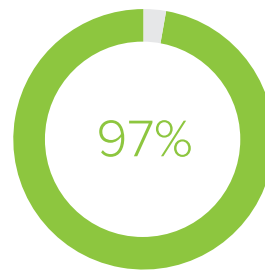
### The outcomes indicated:

- staff have embraced the model of care as it enhances residents' lives
- residents' lives have been enriched by a more meaningful involvement and sense of purpose to their daily living:
- Residents have taken on roles that suit their abilities
- Buffet breakfast now provides greater choice in a home like environment
- Residents involved in aspects of the development of their care
- Staff education promotes greater attention to quality and safety within the work environment,

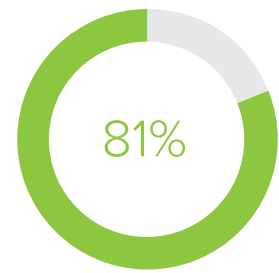
## ENHANCING THE DISCHARGE PROCESS

An overall positive response of 97% was received on how consumers rated the discharge process. This is a consistent result with our peer group and significantly better than the statewide average.

Following a lower than expected response to managing health and care at home once a patient leaves hospital of 81%, we have reviewed the information. Strategies have now been implemented that we are optimistic will improve the way in which staff work with patients to ensure that this service is better delivered.



Overall positive response on how consumers rated the discharge process



Overall response to managing health and care at home once a patient leaves hospital

1	Was length of stay appropriate	99% positive	92 respondents
2	Was there enough notice of discharge	90% positive	91 respondents
3	Were you involved in decisions about discharge	77% positive	90 respondents
4	Were there no delays in your discharge	87% positive	92 respondents
5	If there was a delay in discharge did staff members explain why	95% positive	7 respondents
6	At discharge were you provided enough information about managing at home from your doctors and nurses	81% positive	92 respondents
7	Was your family and home life taken into consideration when planning discharge	96% positive	90 respondents
8	Did the hospital make adequate arrangements for services needed at home	93% positive	91 respondents
9	Was your GP provided with information about treatment or advice you received in hospital	91% positive	89 respondents
10	Did you receive copies of communications between hospital doctors and you GP	29% positive	86 respondents
11	Overall how would you rate your discharge process	97% positive	92 respondents

As a consequence of the outcome of the survey, a program has been developed to ensure staff engage and involve patients in their discharge.

Of the 90 who responded to the question in regard to involvement of discharge, only five (6%) people were not involved in decisions about discharge, with 71% definitely involved, 15% involved to some extent and 8% choosing not to be involved.



# INFECTION CONTROL

While you are in our care, it's important that the hospital is a safe environment, free from infection. Regular audits are carried out against National and Statewide benchmarks.

## HEALTH CARE ASSOCIATED STAPHYLOCOCCUS AUREUS BLOOD STREAM INFECTIONS

Health care associated Staphylococcus aureus blood (SAB) stream infections are required to be reported to VICNISS every month. The Health Service recorded one SAB for the year from a patient with a chronic condition and low immunity. This incident was seen as an anomaly. However, a thorough investigation of the case ensured that all policies were implemented effectively.

## SAFE AND APPROPRIATE USE OF BLOOD AND BLOOD PRODUCTS

In accordance with sound clinical governance practice, the Health Service has structures and systems in place to ensure the safe, appropriate, efficient and effective use of blood and blood products.

Clinicians and other members of the workforce use and participate in blood and blood product safety systems.

Blood and blood products continue to be used in an appropriate and safe manner at the Health Service. All staff who are involved in the administration of blood and blood products complete Bloodsafe Elearning on Clinical Transfusion Practice every two years, and our midwives also complete the module on Post Partum Haemorrhage every two years.

The Health Service also adheres to a zero tolerance position in relation to consent. A transfusion cannot take place if a doctor and patient have not signed the consent section on the Blood Product Prescription Form.

The Blood Matters Nurse conducts an annual audit on our policies and procedures, the results of which are reviewed at the appropriate committee level. Any actions undertaken are reported bi-monthly to the Medication Advisory committee.

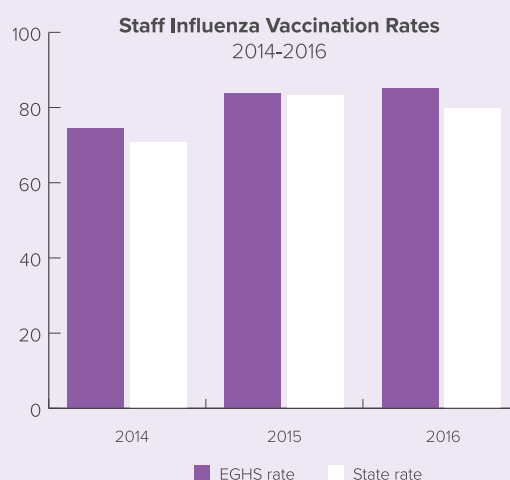


Hannah Reid Nurse immunizer and Cate Manton Nurse receiving flu vaccination

## INFLUENZA VACCINATION UPTAKE

As most people are aware, 2017 has been a particularly bad year for influenza in vulnerable people in our community so it is pleasing to report that we have had an excellent influenza vaccination uptake by staff.

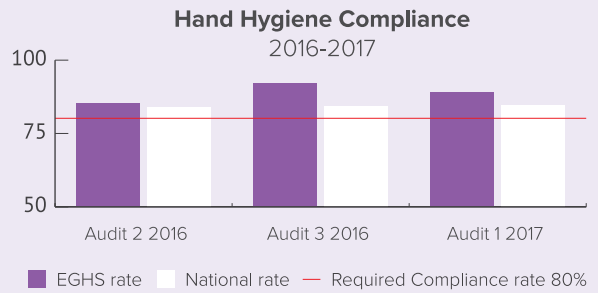
- 85.2% of staff received their annual flu vaccination.
- This is compared with the state percentage of 79.9% and above the Department of Health and Human Services required 70%.



## HAND HYGIENE

Effective hand hygiene is one of the most successful ways to counter infections. In place at each entrance to facilities, wards and communal areas are alcohol based hand rubs.

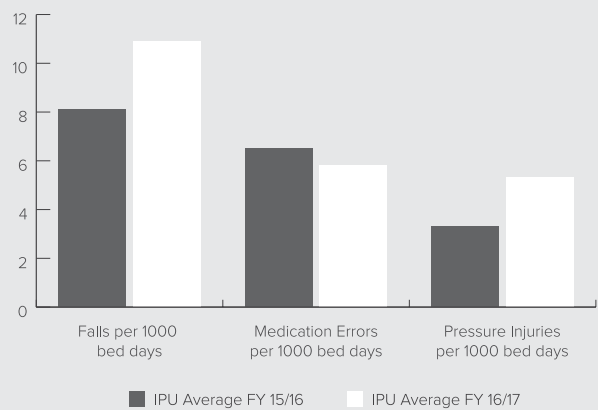
**Our Health Service has consistently achieved above the National and state benchmarks of 80% in hand hygiene audits.** These audits are conducted three times a year and reported to Hand Hygiene Australia.



## ACUTE INPATIENT UNIT INDICATORS

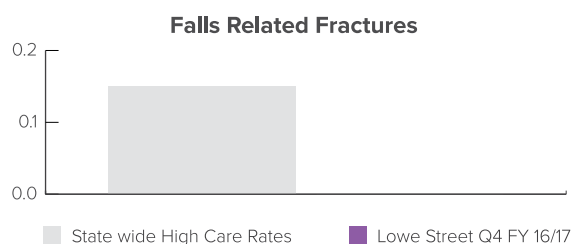
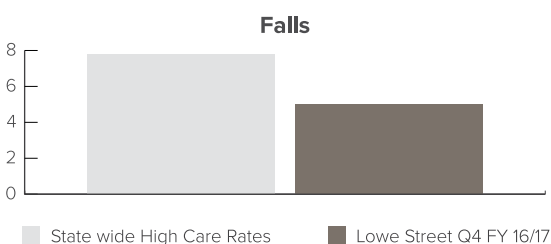
The organisation continues to monitor its safe quality healthcare in our acute inpatient unit. It is of interest to note that falls have increased. This is a direct correlation with the types of admissions that we are experiencing and all measures, including falls risk assessments, are in place to minimise risk for each patient. In the area of medication errors it is pleasing to note this has reduced.

There have been no errors that have led to significant harm to any patient. Staff recognise the importance of maintaining appropriate skin integrity as such they are very vigilant in assessing patients as they are admitted to the acute ward and through their stay. As a result we have been able to pick up pressure injuries at an early stage and treat them appropriately.



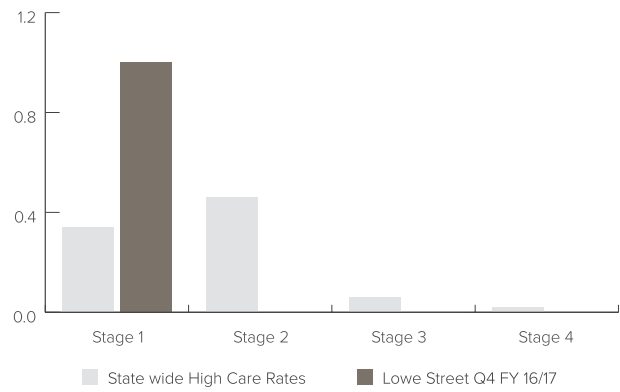
### Falls and fractures (per 1,000 bed days)

It is pleasing to see that falls for this year are less than the previous year and are also under the statewide rate. It is also pleasing that no fractures have been recorded because of falls.



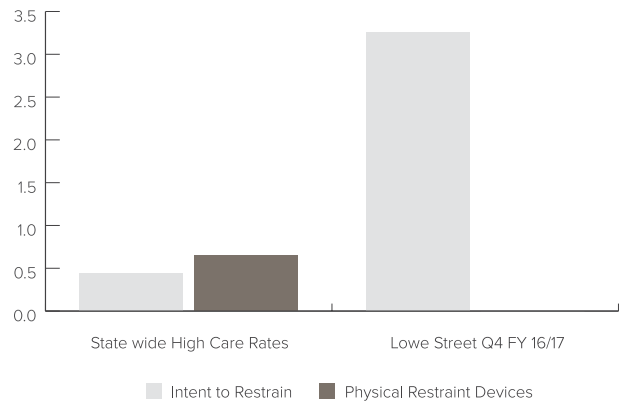
### Pressure injuries (per 1,000 bed days)

While we hope never to see residents with a pressure injury there has been a shift in the types of injuries being identified between last year and this year. This year we have had an increase in the number of Stage 1 pressure injuries (the least severe) and no recorded stage 2, 3 or 4 injuries. This is due to better surveillance by our nursing staff. Addressing pressure injuries in the early stages leads to less invasive actions being required and less distress for our residents.



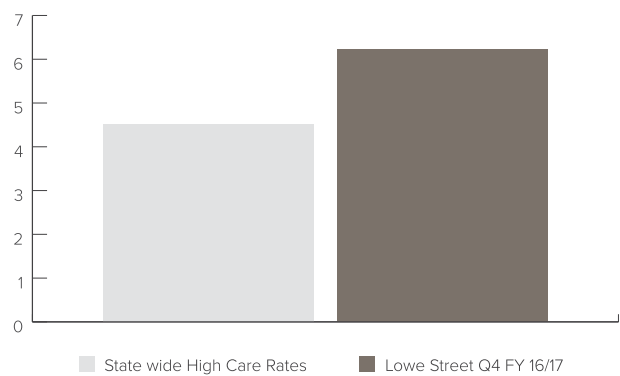
### Use of physical restraint (per 1,000 bed days)

It is important that while our residents are in our care they are safe from harm. However, this should not come as an obstruction to their freedom. As our duty of care we have a responsibility to use equipment that reduces the possibility of exposure to adverse outcomes for our residents. This is achieved by using specially designed furniture and other equipment that prevents harm from occurring. The decision to use specialist equipment is done with the utmost respect to the residents and forms part of a care plan that is communicated to all.



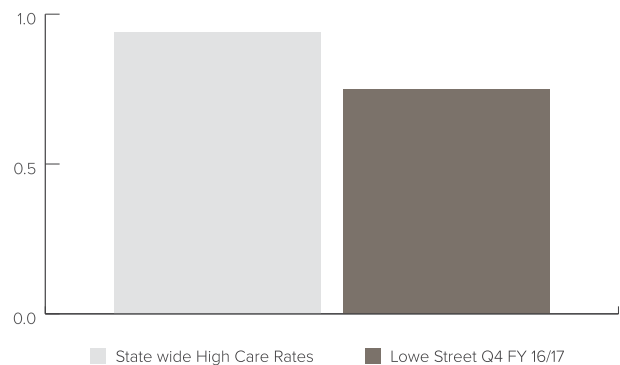
### Use of nine or more medications (per 1,000 bed days)

The number of residents on nine or more medications in 70 Lowe Street is less this year as compared to the same time point last year. However it is still above the Statewide Rate for High Care residential services. We work hard to ensure that only necessary medicines are given and each residents' medication is periodically reviewed by a pharmacist to identify medicines that can be reduced or removed.



### Unplanned weight loss (per 1,000 bed days)

Unplanned weight loss compared to the statewide rates is compatible, but compared to the same time point last year there has been an increase. Having identified this there has been more input and follow up from our Dietitians to assist nursing staff where possible to reverse this trend.





# COMMUNITY SERVICES

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## COMMUNITY PARTICIPATION

Working with our colleagues from Ararat Rural City, the University of New South Wales Rural Clinical School, Stawell Regional Health and other local health agencies, we have achieved some remarkable results for the overall health of our community.

- Healthy Together Victoria Achievement Program, working with and supporting 12 schools to achieve their goals
- Big Ararat Health Study with the University of New South Wales. 260 people participated in the study
- Activ8 Program with Ararat Rural City
- Life! Chronic Disease Prevention Program
- Implementing Western Victoria Primary Health Network Chronic Conditions Model of Care to address higher levels of chronic disease in our catchment area.

## COMMUNITY ENGAGEMENT

Our aim is to continue to improve the health, wellbeing and care experience of our community. To be responsive to their health needs we engage with our community to fully understand their expectations.

- We invite participation from the community to provide opinions from a diverse range of people within a targeted area
- This information provides us with pathways to build services and programs that reflect the changing and growing community in which we live and work
- Effective engagement is vital to the continuous improvement of our services
- We encourage consumer representatives to be involved throughout a project
- It is an ongoing challenge to encourage people to have their say
- This year a number of consumers have made the commitment to participate in community engagement. A very encouraging sign.

## FIRST IMPRESSIONS ACTIVITY, ENVIRONMENTAL AUDITS AND DISABILITY ACTION PLAN

Five consumers were involved in reviewing the plan, out of which five areas were identified for further review.

- Front reception/foyer area
- Lifts and Pathology/xray
- Café Pyrenees
- Urgent Care Centre
- Impatient Unit

Each of the five consumers provided feedback and as an outcome an Action Plan has been developed to address the suggestions and recommendations.

## OCCUPATIONAL VIOLENCE (OV)

Violence of any kind is never acceptable. We support all staff in the prevention of bullying and harassment and during the year have delivered education that reflects contemporary and acceptable workplace cultural guidelines. After consulting with staff during the year CCTV was installed at key locations to provide 24 hour monitoring. We have also strengthened our approach to everyone who enters the Health Service so they all understand their responsibilities in regard to bullying and harassment.

Aggression and OV has risen from 67 incidences last year to 80 this year. Unfortunately it is on the rise and is generally under-reported and although it occurs in all departments of our Health Service the majority are reported in Urgent Care, Aged Care, Community Services and Dental.

The increase in incidents is well-recognised by the Department of Health and Human Services, which has invested funds to enable us to implement a number of initiatives this year including CCTV, staff training and, most recently, the new Standard for Code Grey, an organisational response to aggressive behaviours from all consumers.

Our Health Service offers counselling and critical incident debriefing to staff who have been subjected to OV and aggressive incidents.

## CHILD SAFETY AND FAMILY VIOLENCE

Providing a safe environment for families, including elderly people, women and children should be their right. However, it is a sad, but true, fact that our catchment area has the second highest rate of reported Family Violence in the Grampians Region. This figure reflects the number of reports to the police, rather than the number of recorded incidents.

- Crime Statistics Agency reported a 51% increase in family violence reports. While this might be because of increased awareness, ongoing violence is never acceptable and continues to increase.
- Child Collaboration Plan has been developed that will address and meet the requirements established by the Victorian Child Safe Standards (Victorian Commission for Children and Young People) and the Strengthening Hospitals Responses to Family Violence (developed by the Department of Health and Human Services, Royal Women's Hospital and Bendigo Health).
- Social Worker appointed to work with Grade 5 and Grade 6 students from two local primary schools on a survey to collate their ideas about promoting safety and to find out what makes them feel safe.
- Students invited to consider opportunities for participating in decision making at the Health Service.

Violence also has an impact on our staff, in particular those working in Urgent Care, Maternity Services and Community Services. We will not tolerate verbal or physical violence against our staff and will always take action.

## CULTURAL DIVERSITY

Within the Health Service there are staff from 14 different countries. This makes for a strong and vibrant workplace. Our Health Service identified two discreet cultures within our catchment area that require consideration from a diversity perspective. Data is currently being collected and following consultation with these groups care plans will be put in place to reflect their individual needs.



Naveen Mettu



Heidi Chatfield and Matthew Wood

## ABORIGINAL HEALTH

The Budja Budja Aboriginal Cooperative is an important facility that delivers a range of cultural, medical, health and wellbeing services to the local Indigenous communities. We have an excellent relationship with the Aboriginal Cooperatives within the Grampians Region and to gain an even better understanding our staff met with their staff on a number of issues including:

- Culture awareness training
- Brochure on smoking in the ATSI community
- Ensuring that appropriate Aboriginal or Torres Strait Island information is collected by staff

Working with Western Victoria Primary Health Network, we have reviewed the Victorian Government's strategic direction for Aboriginal health: Koolin Balit and have implemented a number of initiatives that we hope will make the welcome and care for Aboriginal and Torres Strait Island people more appropriate. By working with the Indigenous community we have seen an increase in the number of Indigenous people accessing dental care, diabetes education and podiatry during the last year.

Aboriginal heritage plays an important role in our community and to better understand and support our Aboriginal community we have been working on an action plan to strengthen Aboriginal and Torres Strait Island cultural security. We believe that we can better meet the needs of our Aboriginal community by improving the quality and effectiveness of their care by reducing the inequalities in healthcare access.

It was a very special day when we unveiled Spiritual Healing an artwork by Indigenous artist Heidi Chatfield. Heidi is a Djab Wurrung descendent and her painting has been hung in our main reception to create a culturally welcoming environment to Aboriginal and Torres Strait Island people to our Health Service.



Lauren Miller Aaron Meizys and Larissa Johnson

## ORAL HEALTH

Establishing good oral health at an early age is essential to understanding and learning health strategies that will last a lifetime. Unfortunately in our community poor oral health has been identified as a major contributing factor in the Burden of Disease. However, the good news is that we have been making excellent progress in providing dental care to the community at our Dental Clinic. This year the Dental Outreach service has provided dental screenings, dental examinations and treatment to:



**11 primary schools**, including our service to the Budja Budja Aboriginal Cooperative



Visits to **three kindergartens**



All primary school age groups with **610 children out of a possible 839** receiving a variety of dental treatment options, at no cost to the families

Dental staff promote a holistic view that appreciates the strong connection between oral health and the health of the body. The Dental Outreach service endorses preventative dental care that allows the clinician and patient to focus on the overall health of the individual through education and health promotion. Dental Outreach encourages this important oral health message in all primary schools by providing students and teachers with interactive oral health educational sessions, prior to dental screening treatment. This message allows teachers to actively be involved with the ongoing preventative oral care message to students, throughout the school year. The mobile dental van continues to reach primary aged children in the community and this has enabled dental clinicians to increase the number of patients and provide for comprehensive treatment options.

The Outreach Program has received positive and encouraging feedback from Primary School principals who were particularly pleased with the number of children screened and treated. They were appreciative of the way in which the program was flexible and did not disrupt class time.

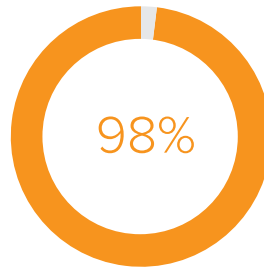
## DISABILITY ACTION PLAN

Staff, with consumers and key stakeholders, have been reviewing requirements on an individual, service and facility level to ensure the best possible outcome for those consumers with a disability who engage with our Health Service.

Most recently, consumers with a disability were involved in a review of signage and entrances across a number of locations at the Ararat campus and their input was extremely useful and insightful with 20 suggestions and recommendations to address identified gaps.

## INTERPRETER SERVICE

Our Health Service is in a fortunate position where it rarely needs to use interpreter services to initiate review and monitor care. While we have a small population from a non-English speaking background we have been able to cater for these consumers well. Our records show that, where necessary, services have been provided to interpret for consumers who require it.



In our most recent Hospital Experience survey **98% of the 88 respondents** replied that they did not require any help understanding English.

## PALLIATIVE CARE

Central Grampians Palliative Care is a community based, nurse led service providing home-based care for people with a life limiting illness. Each year we undertake over 3,500 visits and travel up to two hours per day. We also provide a bereavement service for carers and loved ones to support them as they grieve.

To support and strengthen this important service we provide essential medical equipment, provided free of charge. This enables our clients and carers to remain safe and supported at home. The type of equipment we frequently loan and transport to client homes includes hospital beds, recliner lift chairs, wheel chairs, oxygen concentrators and lifting machines. As each client uses up to four pieces of equipment per year, that amounts to the transporting over 500 articles. We were extremely pleased to obtain a community based Palliative Care Equipment and Infrastructure grant that has enabled us to purchase a multipurpose vehicle to transport these items.

# SERVICES AND PROGRAMS

As a medium sized rural health service, East Grampians Health Service delivers a comprehensive range of programs and services to the community that are accessed through in-patient, residential, home and community based services.

Our Health Service is located at Ararat and Willaura but delivers programs throughout the Local Government Area of Ararat Rural City. We have demonstrated our ongoing commitment to providing safe, quality care to our community and have been recognised for the second year in a row as the Premier's Medium Sized Health Service of the Year.

For enquiries on our services, programs, visiting times and hours of operation, in the first instance ring our main switchboard on 5352 9300 where our friendly reception staff will put you through to the appropriate department.

**For a specific facility, please refer to the site directory and map on the back cover for addresses and phone numbers.**

## CLINICAL

- Chemotherapy
- Inpatient Unit
- Infection Control
- Obstetrics including Midwifery, Domiciliary Midwifery
- Pharmacy
- Urgent Care

## PERIOPERATIVE SERVICES

- Central Sterilising Unit
- Day Procedure Unit
- Haemodialysis
- Operating Suite

## AGED CARE

- 70 Lowe Street
- Garden View Court
- Patricia Hinchey Centre
- Lifestyle Team
- Parkland House
- Willaura Day Centre
- Willaura Health Care
- Lifestyle Team

## COMMUNITY SERVICES

- Ante Natal
- Ark Toy and Activity Centre
- Breast Health
- Cardiac Rehabilitation
- Chronic Disease Management
- Community Nursing Programs (District Nursing, Hospital Admission Risk Program, Regional Assessment Service, Hospital in the Home, Palliative Care, Wound and Stomal Therapy, Post Acute Care)
- Continence Support
- Dental services including outreach to schools and kindergartens
- Diabetes Education
- Dietetics
- Exercise Physiology
- Home Care Packages
- Occupational Therapy
- Patricia Hinchey Centre – planned activity groups
- Physiotherapy
- Podiatry
- Pulmonary Rehabilitation
- Social Work
- Speech Pathology
- Women's Health Clinic (PAP Testing)

## MEDICAL IMAGING

- General X-Ray
- Image Intensifier
- Multi-Slice CT Scanner
- OPG (Panoramic Dental X-ray)
- Ultrasound (including 3D/4D obstetrics, vascular, musculo-skeletal, interventional)

## MEDICAL SERVICES

- Credentialing
- General Medicine
- General Surgery
  - Ear Nose & Throat
  - Gynaecology
  - Ophthalmology
  - Orthopaedics
  - Urology
  - Dental
- Medical Interns
- Supervision of Medical Interns

## PYRENEES HOUSE EDUCATION CENTRE

- Education and Training

## EXECUTIVE SERVICES

- Business Support
- Community Liaison
- Compliments and Concerns
- Human Resources

## DEVELOPMENT & IMPROVEMENT

- Accreditation
- Education and Professional Development
- Information & Communication Technology
- Occupational Health & Safety
- Organisational Development
- Quality & Risk
- Research

## SUPPORT SERVICES

- Accommodation
  - staff & students
- Building Projects
- Catering (Internal/external functions & Café Pyrenees/ Meals on Wheels/Delivered Meals)
- Environmental (Cleaning/Linen/Waste)
- Fire & Emergency
- Maintenance
- Security

## FINANCE SERVICES

# WE'D LIKE TO HEAR FROM YOU

Your opinion is important to us. It helps us plan our future direction. It's not only consumers of our services, but also people connected to our consumers. You all have a significant role in the shaping of our Health Service.



Please take a little time to complete this feedback form on Community Matters and circle the appropriate number:

**(1 being poor and 5 being excellent)**

What did you think of the information in this report?

1 2 3 4 5

What did you think of the presentation of this report?

1 2 3 4 5

What did you think of the length of this report?

1 2 3 4 5

What did you think of the style of this report?

1 2 3 4 5

Has your knowledge on services at EGHS increased?

1 2 3 4 5

Are you interested in receiving further information on consumer participation at EGHS?

Yes  No

Is there any information you would like to read about in future reports?

Yes  No

## Consumers

Consumers provide information, opinion and advice to the health service about how we can make our services safer and better on behalf of the broader community.

## Consumer Forums

Consumer Forums are informal small group sessions for feedback and discussion on your experiences at the health service. The forums focus on three key areas: What are we doing well? What could we do better? Were your needs met? For each forum an action plan is developed. Action plans are included on our webpage so our consumers can monitor our progress.

If you would like to register as a consumer please contact the Development and Improvement team on 5352 9443. For further information check our website.

**Have you any suggestions on how we can improve the report?**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

If you prefer to give feedback online, please visit our website: [www.eghs.net.au/contact](http://www.eghs.net.au/contact).

## CONTACT DETAILS

General Enquiries: **5352 9300**

Thank you for taking time to complete this form. We do value your feedback.

**Please detach the form and return to one of our facilities or post to:**

### Chief Executive

East Grampians Health Service  
Girdlestone Street  
(PO Box155)  
Ararat 3377

If you would like us to contact you in regard to any item in Community Matters, or you are interested in supporting the Health Service, please complete your details and return to us.



# DEVELOPMENT & IMPROVEMENT

## ACCREDITATION AND CREDENTIALING OF HEALTH PRACTITIONERS

To feel confident about your care you need to know that the Health Service is fully compliant with all mandatory Standards and that clinicians providing you with health care have the appropriate up to date registration, that also outlines scope of practice. The Health Service participated in the Accreditation process, whereby a team of external surveyors assess our performance through observation, reviewing policies and procedures, meeting with the Board, staff, patients and families, volunteers and carers.

### National Safety and Quality Health Service Standards

→ Fully compliant

### Commonwealth Aged Care Accreditation Standards

→ Fully compliant, though in the second quarter our aged care facilities required improvement activities following a support visit from the Australian Aged Care Quality Agency. The issues were rectified immediately with full compliance achieved within the quarter.

### Department of Health and Human Services Standards

→ Full compliance

### National Association of Testing Authorities

→ Full compliance

Knowing that all clinicians have appropriate, current qualifications and registration is one of the most important aspects of delivering safe, quality health care. Every year all our health practitioners confirm their registration with the Director of Medical Services.

## VICTORIAN HEALTH EXPERIENCE SURVEY (VHES)

The VHES is undertaken four times a year and gives us the opportunity to ask a number of important questions that assist with reviewing our care delivery and work practices. The survey is anonymous and voluntary.

Our Health Service consistently performs better than the required 95% overall positive experience. However, that does not stop us wanting to improve our performance.

## EDUCATION

Providing an environment where learning is supported means that members of our community can be sure they are being looked after by a very skilled workforce. This goes for both clinical and non-clinical staff. There are many opportunities for education and training, both for professional and personal development.

### This year education has included:

- 50 staff undertaking education, six more than last year
- Cultural awareness training with Aboriginal and Torres Strait Island community members
- Child safety and family violence
- Maternity and Neonatal Emergency program
- 11 Graduate Nurse program
- 28 students enrolled in the Diploma of Nursing, delivered in Ararat by the Australian Catholic University
- Eight Doctors participating in the Grampians Medical Training Intern program

## ACKNOWLEDGEMENTS

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## TRADITIONAL OWNERS

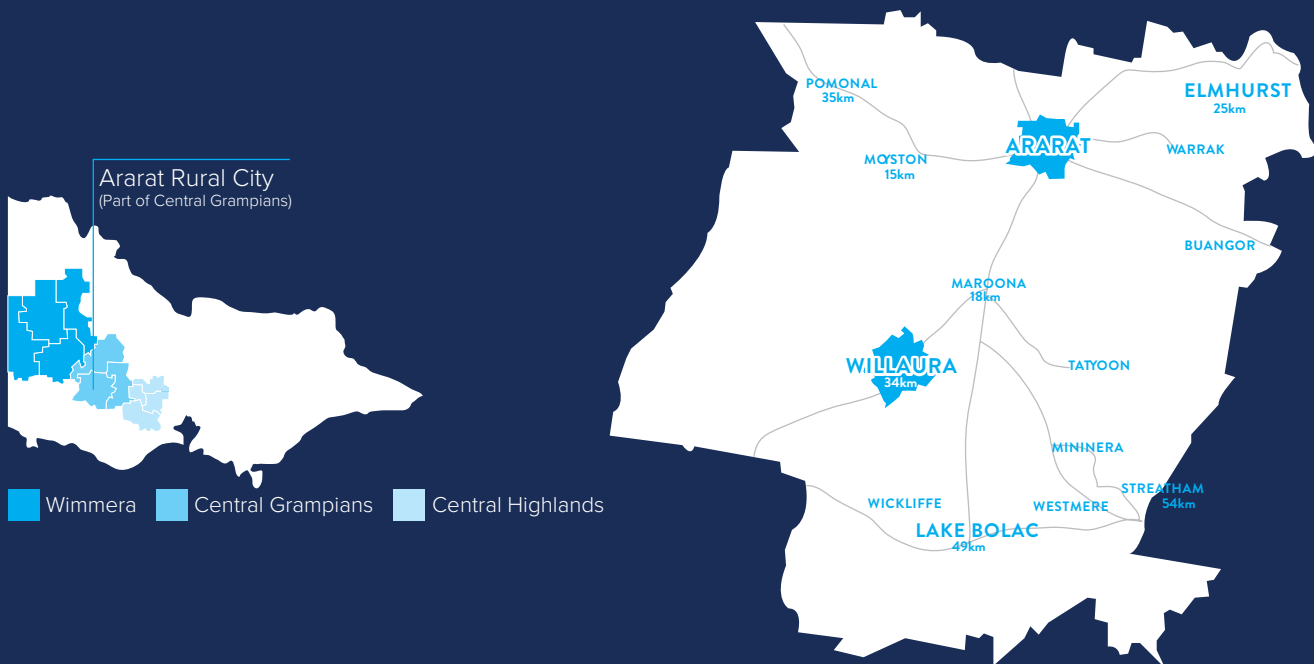
East Grampians Health Service acknowledges the traditional owners, both past and present, of the Jardwadjali and Djab Wurrung people.

And our thanks to the community and staff members who have contributed to this year's Quality Account through consultation, information and feedback.



East Grampians  
Health Service

## SITE DIRECTORY AND LOCATION MAPS



### EAST GRAMPIANS HEALTH SERVICE

PO Box 155  
Girdlestone Street, Ararat 3377

**P:** 03 5352 9300  
**F:** 03 5352 5676

**E:** [info@eghs.net.au](mailto:info@eghs.net.au)

**[www.eghs.net.au](http://www.eghs.net.au)**

### 70 LOWE STREET

Aged Care Facility  
70 Lowe Street, Ararat 3377  
**P:** 03 5352 9323

### GARDEN VIEW COURT

Low Street, Ararat 3377  
**P:** 03 5352 9324

### PATRICIA HINCHEY CENTRE

Girdlestone Street, Ararat 3377  
**P:** 03 5352 9326

### WILLAURA HEALTH CARE

Delacombe Way, Willaura 3379  
**P:** 03 5354 1600

### PARKLAND HOUSE

Delacombe Way, Willaura 3379  
**P:** 03 5354 1613



DEMONSTRATING **LEADERSHIP** IN PATIENT SAFETY