



QUALITY ACCOUNT

\$500,000 Orbost aged

Farewell to Dr

Elizabeth Christie



Service), Brian King (board chair Alpine Health) Denise McLachlan (board chair, Otway Health), Terry Elliott (board chair MTHCS), Darren

ORH en

Mery

\$200,000 Lochiel House refurb



Beat the bug

eryn in spotlight

Relay to help fight cancer





WELCOME





Pictured:
Andrew Martin
(Board President)
Meryn Pease
(Chief Executive Officer)

We are proud to present this year's Quality Account report to Orbost and the wider East Gippsland community. The report was previously named the Quality of Care report. This report has been produced in partnership with our Quality of Care committee, the Executive team, staff and consumers. This report is provided annually to inform the community on our safety and quality performance through indicators, improvements, consumer feedback and consumer experience stories. We are excited by the achievements of the organisation in the past 12 months which contribute to a range of Statewide plans, including Aboriginal Health and Aboriginal public sector employment, disability responsiveness, the prevention and promotion of mental health and wellbeing, and family violence. Our Aboriginal employment rate is 1.5% of our workforce, which is above the state target. We provide a range of programs and activities across primary, community, acute and aged care. Consumer feedback is important to us. We trust you will find this report interesting and informative and we welcome your feedback on this year's report and tell us what you would like to see included in the future. We encourage you to complete the Conversations with our Community card located in the front of this report. This report is available at hospital front reception and on our website orbostregionalhealth.com.au.

The achievements and improvements highlighted in this report would not have been possible without the valuable contributions and commitment of our dedicated staff. Our team is the reason why we provide high quality health care to our community.

Andrew MartinBoard President

Meryn Pease Chief Executive Officer

Mayor Reme

Mi

Thank you for your support of Orbost Regional Health

Orbost Regional Health Board of Directors responsible for overall governance including safety and quality of consumer care.



Names: Catrynes van der Vlugt, Peter van den Oever, Liz Mitchell, Alistair Steel, Teresa Royce, Andrew Martin, Robyn Francis, Narelle Macalister and Stan Weatherall. Not pictured: Garry Squires and Barbara Heiss.

CONTENTS

CONSUMER, CARER AND COMMUNITY PARTICIPATION

DOING IT WITH US, NOT FOR US	Pg 3
PATIENT SATISFACTION	Pg 4
WAYS WE HAVE IMPROVED	Pg 4
IMPROVING CARE FOR ABORIGINAL PATIENTS PROGRAM	Pg 5
PARENTS FEEDBACK	Pg 5
OPEN ACCESS BOARD MEETING	Pg 6
MEDICAL CLINIC	Pg 6
DENTAL CLINIC	Pg 7
BIG BONANG ARVO	Pg 8
INTERPRETER SERVICES	Pg 8
COMMUNITY PARTICIPATION	Pg 9
PATIENT CARE BOARDS	Pg 10
VOLUNTEER WEEK	Pg 11

QUALITY AND SAFETY

CONSUMER FEEDBACK	Pg 12
COMPLAINT FOCUS AREAS	Pg 12
CONVERSATIONS WITH OUR COMMUNITY	Pg 12
CONSUMER FEEDBACK	Pg 13
STAFF SATISFACTION	Pg 13
POSITIVE WORKFORCE CULTURE	Pg 14
BULLYING AND HARASSMENT	Pg 14
ACCREDITATION	Pg 15
ADVERSE EVENTS	Pg 15
QUALITY INDICATORS	Pg 16
HAND HYGIENE	Pg 17
STAFF INFLUENZA IMMUNISATION COMPLIANCE	Pg 17
MATERNITY SERVICE PERFORMANCE	Pg 18
MENTAL HEALTHCARE	Pg 18
RESIDENTIAL AGED CARE	

CONTINUITY OF CARE

VICTORIAN HEALTHCARE EXPERIENCE	
SURVEY – LEAVING HOSPITAL	Pg 2
ADVANCE CARE PLANNING	Pg 2
END OF LIFE CARE	Pg 2

Pg 19

MUM'S STORY

I would like to express my utmost gratitude for the care my mother had received from day one when she arrived at Lochiel House through to her final days in Waratah Lodge.

I wouldn't say Mum was excited about the prospect of leaving her home and independence to go into full time care, but once she had settled in to Lochiel House, she expressed to me the feeling that she was very comfortable and relaxed. The staff were very friendly and mum felt she had gained an extended family.

Her eventual move to Waratah Lodge was accepted with a smile as she knew she was at the stage of needing higher care. That move turned out to be the best thing ever and during my regular trips to visit from Brisbane, she would say that she felt at "home". That simple statement tells volumes for the care and compassion she received from all staff. She loved to share the chocolates I always brought her and she loved to sit in her special corner in the new sun room where she could enjoy the view, but also be able to talk to the budgies and the fish.

During Mum's final few days, my brother, sister and myself whilst sitting with Mum, saw first hand that compassion. I can't express highly enough how appreciative we are for the comfort given to not only Mum in those final few hours, but also to the three of us sitting there watching Mum pass away.

Her doctor, the nurses, nurses aids, kitchen staff, cleaning staff, each and every person made sure we were taken care of. They all came in to say their final few words to Mum and they expressed to us three what a wonderful person she was.

Going through such a traumatic time as losing a parent is very difficult, but the assistance given by all staff, with warmth and genuine concern helped ease the pain and also helped us realise that we were in fact watching Mum passing on, rather than pass away.

Often people are very hasty to write or express a complaint, however those same people are hesitant to express gratitude. I for one wish to express my utmost gratitude to you all, it is staff like yourselves that go way and beyond what is "expected", and instead provide the care and loving attention that would normally be given by a family member.

CONSUMER, CARER AND COMMUNITY PARTICIPATION

DOING IT WITH US, NOT FOR US

Advancing age, a health setback, or disability can pose real challenges for maintaining an independent active life. We expect to be able to manage and may feel embarrassed or even a bit ashamed of asking for help. In some cases reduced capacity can contribute to depression when the activities that used to provide interest are no longer accessible. It provides physical and social therapies helping them to remain as active and engaged as possible. This story is a great example of how a bit of well targeted help can make a difference.

Our home based care services has helped around **250 people** this year to lead an active life.



ALAN'S STORY

I collapsed at home and fractured my back I had surgery and from then on, I was useless. I was doing everything beforehand and lost 12 kgs as I found I couldn't bend over or stand too long, to peel spuds for example. It was terrible.

When I returned home I had six weeks home help with cleaning and found out I could get meals cooked for me. Home based services provided a worker twice a week to help with housekeeping and cooking.

The first two weeks was trial and error, as we got used to each other. We started off going shopping together, doing a big shop. I pick my own recipes now and write my own shopping list. I prepare and pre-bag the vegetables and put them in the freezer ready to cook when I need them. When I am feeling really good I do my own shopping. But if I don't get to do the shopping, I have enough food because there is plenty in the pantry and freezer now as we have stocked them up.

Our staff member said "When I first came here Alan needed help and over time we have worked out different ways so he can still do things. He can prep up the vegetables and we work together to create nutritious meals. I am only guiding him now and monitoring how he is going."

PATIENT SATISFACTION

Overall experience - 94% of patients from Orbost Regional Health rated their overall hospital experience as either 'very good' or 'good'.

Analysis shows that if a health service improves the care and treatment provided by nurses, teamwork between doctors and nurses and the discharge process, a patients' overall experience is likely to improve. Orbost Regional Health has demonstrated this exceptionally well, as indicated below.

97% of inpatients indicated they were satisfied with the care and treatment received from our nurses

94% of inpatients were satisfied with the overall discharge process

95% of inpatients were satisfied with care and treatment received from other health professionals

95% of inpatients thought the doctors and nurses worked well together

WAYS WE HAVE IMPROVED

YOU SAID WE DID

76% of inpatients indicated they received enough information about medication they were given while in hospital.

Nurses and doctors have had numerous education sessions about completing medication documentation with a key focus on consumer information about medications. This is audited regularly with all staff now aware of the need to print out information for patients commencing new medications.

YOU SAID WE DID

73% of inpatients indicated they were involved as much as they wanted to be in decisions about their care and treatment.

Staff regularly reminded to discuss care needs with patients, particularly when doctors present on ward rounds. Patients with complex needs often involved in case management meetings with family members to ensure best possible outcomes achieved.

YOU SAID WE DID

75% of inpatients indicated their family or someone close to them had enough opportunity to talk to staff.

Agreed with doctors for set times to undertake ward rounds to be able to inform family members wishing to attend. Patients and family members encouraged to write questions and concerns on care boards.

IMPROVING CARE FOR ABORIGINAL PATIENTS PROGRAM

ABORIGINAL CHILD HEALTH CHECKS

Regional Health conducted the

In October 2015 Orbost

annual Aboriginal Child Health Checks in collaboration with Moogji Aboriginal Council East Gippsland. Aboriginal people are at risk of poor health outcomes. Providing a service in a culturally responsive environment helps to overcome some of the access barriers. Detecting any problems early reduces the chance of chronic diseases throughout their lives. The children and their parents spent time with the Aboriginal Health Worker, Maternal and Child Health Nurse and a doctor. Dental checks were also included this year. Kids were entertained between appointments with a jumping castle and other activities.



PARENTS FEEDBACK

95% Felt welcomed on the day

5% Provided with enough information to be prepared

100% Given the time/day they requested

100% Staff members were very helpful and supportive through the process

Felt heard, understood and respected 100%

Felt confident they could go back for further support 100%

Satisfied with and understood the outcomes from the Children's Health Check

Happy to join a Facebook page 86%



The first aboriginal child health check day was conducted in 2010 with 30 children participating. In 2015-16, 44 children ranged between 6 weeks and 11 years participated, which represented over 90% of local Aboriginal pre-school children.

OPEN ACCESS BOARD MEETING

A good mix of community, Board and staff members attended the Open Access Board meeting. The topic for discussion was the Medical Clinic.

Information included Orbost Regional Health background and history, statistical information, staffing and services available. Workforce issues in recruitment and retaining doctors were openly discussed.

FUTURE CHALLENGES INCLUDED:

- Recruitment of doctors into rural and remote communities (connection into the community and employment for partners)
- Maintaining emergency and specialist skills (requiring training away from Orbost)
- Access to medical appointments

HOW YOU CAN HELP

- Actively understand and manage your medical condition, the treatment and any medication
- Think ahead and get repeat medication scripts organised before they run out
- Let receptionist know if a longer appointment is needed
- Have an annual check up
- Ring and cancel appointments if unable to make the booked appointment time
- Have an Advance Care Plan
- Jot down questions to ask the doctor at the visit
- Attend Urgent Care if it is an emergency that requires immediate treatment
- Make new doctors and their families welcome



MEDICAL CLINIC

YOU SAID

A person travelled a distance to attend the Medical Clinic appointment for a pre-employment hearing test and was told there was not a doctor available who could complete the test.

WE DID

Now Medical Clinic staff ask people booking pre-employment medical checks if they require a hearing test. This is to ensure the appointment is made with a doctor who can do the test. A practice nurse has completed an audiology course so she can complete hearing tests for pre-employment medical checks.

27 weeks of Locum doctors

25,269 patient visits

225 GP Management Plans

73 Aboriginal and Torres
Strait Islander Health Checks

774 Aboriginal and Torres
Strait Islander patient visits

495 new patients

68% increase in people who had a health check

DENTAL CLINIC

LEANNE'S STORY

Many people find going to the dentist very difficult. Leanne is one such person. She found it hard to work up the courage to finish her dental treatment. However with the support of our senior dentist over 12 months Leanne had extractions and fittings for dentures. On a new career path, Leanne was excited and pleased to receive her long awaited dentures and thanked staff for their care and good work

95% of clients indicated they were highly likely to recommend the dental service to a friend or family member.

Annual Dental Clinic Infection Control Audit was undertaken by the Royal Dental Hospital, Melbourne.

The auditor said "The score is excellent and I am very happy with the changes that have been implemented since last audit. Just a few more tweaks and declutter and it will be perfect! Staff should be proud of what they have already achieved."



SERVICE IMPROVEMENTS

- Graduate Recruitment Program: Developed a graduate recruitment program that resulted in an additional dentist
- Oral Health Screening / Oral Health Promotion activities held at 5 local Primary Schools: Orbost Primary, Orbost North Primary, St Joseph's Primary, Newmerella Primary and Goongerah Primary; and
- The Aboriginal Child Health Check day.

INCREASED ACTIVITY

1144 Clients Treated UP 6.6%

1822 Adult Visits UP 4.4%

967 Child Visits UP 30%

2789 Total Visits UP 12.1% Above State and Regional average for all Performance Indicators.

ADULT RESTORATIVE
RETREATMENT WITHIN 6
MONTHS

CHILD RESTORATIVE
RETREATMENT WITHIN 6
MONTHS

UNPLANNED RETURN
WITHIN 7 DAYS
FOLLOWING ROUTINE
EXTRACTION

UNPLANNED RETURN
WITHIN 7 DAYS
FOLLOWING SURGICAL
EXTRACTION

EXTRACTION WITHIN 12
MONTHS OF STARTING
TREATMENT

DENTURE REMAKES
WITHIN 12 MONTHS

CHILD FISSURE SEAL
RETREATMENT WITHIN 2
YEARS

CHILD RETREATMENT
BY EXTRACTION WITHIN
6 MONTHS

BIG BONANG ARVO

The 14th annual trek up the mountain to Bonang has once again been successfully completed. Consumers regard the annual event as a major community gathering and important link to regional health and welfare services. It makes them feel valued as a community and offers them the chance to come together and share a discussion about their needs. For this community, access to services is challenging because of its remoteness. Women's health and doctor consults were conducted, along with a range of other health checks and advice. Locals were able to access referrals for ongoing support if needed.

Consumers said the dental display was great, the free brushes and paste appreciated. Gadgets on the table promoting child health and development were a win with the children and the veggie box raffle on the dietitian table was hugely popular. The hearing test in the Centrelink bus was well attended. To improve participation, the community is interested in adding to the event themselves with stalls, massage and some activity to attract younger members of the community.

14 women's health checks and 16 doctor consultations were undertaken, with over 35 locals attending and sharing a meal in the evening.



DIETICIAN V OCCUPATIONAL THERAPIST V DOCTOR V WOMEN'S HEALTH V COUNSELLING V PHYSIOTHERAPIST V MEN'S SHED V SPEECH THERAPIST V PSYCHOLOGIST V DENTAL NURSE V DISTRICT NURSE V

INTERPRETER SERVICES

Orbost is not the most culturally diverse of places. A person who may need an 'interpreter' is someone who, for reasons of literacy, or impairment, may have difficulty understanding the treatment required, important documentation, or describing the factors that are impacting on their health and wellbeing. Whilst language interpreter services were only used three times, staff are trained to be vigilant to use them when needed to avoid misdiagnosis and mistakes. This ensures processes are put in place respectfully, with a clear understanding what the circumstances are.

It is also most important to understand the impact of diverse

backgrounds on access to services and be ready to know what to do when people arrive. The Diversity Committee pays particular attention to training managers and staff in cultural awareness and diversity training. All managers are required to attend training each year, with staff strongly encouraged to participate as well.

37 staff attended Cultural Awareness and Diversity training

COMMUNITY PARTICIPATION

LIVING LIFE WELL

Staff joined with local organisations to form the Living Life Well Collaborative to promote good health. Consultations about lifestyle factors and an online health survey were completed. Partners met to plan health promotion events based on identified issues from the survey. They implemented these in their workplace and community events, such as the Orbost Show and East Gippsland Field Days.

WE PROMOTED:







REDUCING INTAKE
OF SUGARY DRINKS



EATING WITHOUT DISTRACTION



PORTION SIZE



NON-SMOKING

Drinking alcohol to excess, in particular binge drinking, was added after ICE awareness presentations showed the strong link between alcohol and other drug use.

60 students from Orbost Primary Schools and 40 adults supported the Living Life Well Project community Walktober event. Everyone gathered for a chat at Forest Park; the students had a fabulous time undertaking organised games and on the play equipment; the Dietitian gave out recipe booklets; a community member won the Living Life Well bag filled with fruit; and 20 adults participated in the Tai-Chi exercise class at the park. There were smiles all round. Snowy Growers Community Garden is sponsored by us, as part of the Living Life Well Strategy. Volunteers keep the garden vibrant and useful. It allows a range of community groups to use the space, such as the school garden program and Planned Activity Groups for older community members. The garden has proven to be an important space for the community and forms a focal point for promoting growing food and healthy eating, along with a range of horticulture topics, produce markets and seed swaps.

We are continuing the effort to be focussed on a community wide approach to Living Life Well.





PATIENT CARE BOARDS

In response to patient feedback, white boards have been introduced for every bed in the acute ward. This is an additional communication tool for staff, patients and family members. The board is updated daily and includes details such as patient's name, risk of falls, nurses and doctor's name and proposed discharge date.



PATIENT FEEDBACK

Our registered volunteers sought feedback from patients on the care boards.

- · 55% were kept informed about their stay in hospital

 • 64% were encouraged to ask questions

 • 82% of staff introduced themselves
- and put their name on board each
- · 55% understood anticipated length of

HOW WELL WE USE THE PATIENT CARE BOARDS

Care board updated 99%

99% Day/date

97% Falls risk status

91% Care team

73% Proposed discharge date

The use of the care boards has steadily increased since implementation and the focus for the next period is to ensure that proposed discharge dates are included on the care board wherever possible.

YOU SAID

The facility is overcrowded and there is only one chair available for Dialysis carers which is usually occupied. Should we sit in the car and wait. sit on the floor, sit outside in the cold, sit in Waratah Lodge or drag a chair from another area?

WE

Staff met with consumer to discuss concerns and consider suitable options. It was decided that seating would be purchased and located outside the Waratah Lodge resident's dining room. The area is now more accommodating for dialysis family members and our residents, who may also like to share this space from time to time.





Orbost ORBOST REGIONAL HEALTH VOLUNTEERS

VOLUNTEER WEEK

National Volunteer Week was celebrated and promoted the theme of "Give Happy". Research shows that volunteers live happier and healthier lives.

Volunteers participate in the Planned Activity Group, the Men's Shed, transport program, meals on wheels program and with the residents at Waratah Lodge and Lochiel House.

Volunteers are an integral part of the health service and provide valuable support to key programs. We appreciate the work, support and commitment of our dedicated group of volunteers.



ASSISTED CLIENTS
IN THE COMMUNITY
TO MEET **538**APPOINTMENTS

ASSISTED
CLIENTS ON
6,327
OCCASIONS



VOLUNTEER HOURS 2,683



MEALS ON WHEELS
DELIVERED **4600** FRESH
MEALS WITH 20 CLIENTS
RECEIVING LUNCH MEALS UP
TO 7 DAYS PER WEEK. THE
MEALS ON WHEELS PROGRAM
HAS BEEN IN OPERATION FOR
MORE THAN 33 YEARS

TRANSPORT PROGRAM 1255 HOURS



TRAVELLING **54,989** KILOMETRES



QUALITY AND SAFETY

CONSUMER FEEDBACK

113 Number of compliments received

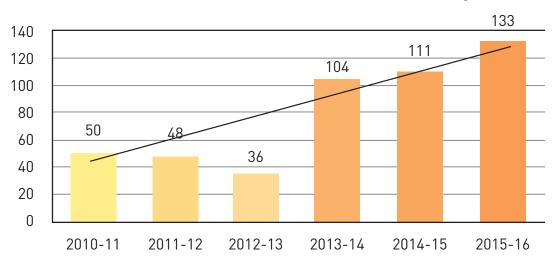
Number of complaints received

43

CONVERSATIONS WITH OUR COMMUNITY

Conversations with our Community continues to be effective for gaining consumer perspective, with increased numbers received each year.

Number of Conversations with our Community



COMPLAINT FOCUS AREAS

BEHAVIOURS

5

CLINICAL CARE

9

FAMILY AND FRIENDS TEST

Consumers from various services were surveyed and indicated they were highly likely to recommend that service to a family member or friend.

100% Women's Wellness Group

17

PROCESS

OR SYSTEM

FACILITIES

10

DIVERSITY OR CULTURE

2

100% Hospital patients

Medical Clinic 71%

Exerguys Rehab Group 76%

95% Dental Clinic

CONSUMER FEEDBACK

POSSUM MAGIC

Home Based Services staff received a call from a frail 90 year old lady, who had been visited by an unwelcome possum during the night.

It had forced her out of her bedroom during the night with its destructive behaviour and by morning had made itself comfortable in her bed.

AND it wasn't moving!!

She had no family close by the neighbours were away and a phone call to DELWP would only offer a cage to trap the intruder.

While not care business, air maintenance staff member was despatched to wrangle the feisty interloper.

On finding the unwanted visitor under the covers on arrival at the client's house, our staff member contained the culprit in the squirrel grip [or in this case the possum grip] carried the startled and aggressive visitor outside and released him back into the trees surraunding the house.

The possum hasn't returned following his

Needless to say the response was much appreciated by our consumer.

exiction

STAFF SATISFACTION

A general staff satisfaction survey, People Matters, is undertaken every year. It provides our staff with an anonymous opportunity to have their say.

• STAFF RESPONSE RATE 53% UP FROM 45% LAST YEAR

• STAFF ENGAGEMENT 75% UP FROM 66% LAST YEAR

• JOB SATISFACTION 78% UP FROM 68% LAST YEAR

My organisation provides a safe work environment

86%

My organisation has systems and procedures to deal with difficult customers

80%

My organisation treats all staff fairly and with respect

78%

There is a positive workplace culture

90%

The work staff do is important

99%

The organisation provides high quality services to the community

97%

OUR STAFF WANT US TO IMPROVE:

Staff want to understand how the Charter of Human Rights and Responsibilities applies to their work

These areas will form part of next years improvement plan.

Staff want managers to keep them informed about what is going on and involve them in decisions about their work

POSITIVE WORKFORCE CULTURE

Organisational culture is being addressed through a range of strategies (current and new) to ensure we have a positive workplace. A place where everyone treats each other with respect; is a safe and professional workplace where staff feel supported to raise concerns or complaints without fear of reprisal; and managers have the skills and strategies to deal with the individual incidents promptly and effectively.

One of the new strategies introduced is our reward and recognition program, where staff are nominated by their peers to acknowledge their contribution.

Kindness...

Let's promote kindness in our workplace

The rules are very simple...



Think kind
You could...pay for
someone's coffee, leave
flowers or a chocolate on
their desk. Be as creative as
you like – have fun!



Act kind

Anonymously do your act of kindness. Shhh...



Leave card
The kindness card tells the
person about your kind act
and asks them to repeat the
game with someone else.

Cards are available in the staff dining room, the medical clinic tea room and the mail room (Kathy's old office)

Recipients please feel free to send a photo of your "Kindness" to the Pulse Committee

Another new strategy has been to promote kindness in the workplace. This program has seen staff embracing random 'Acts of Kindness'.

IN THE FIRST FOUR MONTHS 32 REWARD AND RECOGNITION NOMINATIONS FOR STAFF AND TEAMS WERE RECEIVED.

NOMINATIONS OF STAFF AND TEAMS INCLUDED:

Our new dentist has been amazing. Her patience and knowledge are a real asset to ORH. The assistants and administration are caring and supportive. What a wonderful team providing an outstanding service to Orbost and the district. Dealing with a recent family dental crisis, I was overwhelmed by the care and speed of the service provided.

We know her as the "ORH knowledge bank". If you need to find something out, she will know the answer or know where to look or who to ask. But what makes her really special is that even though she always has mountains of work to get done, she always makes time to help us with our questions and requests.

She always does this with a smile and never begrudgingly. People like this make ORH work like a well-oiled machine and make coming to work a pleasure.

The Maintenance team have contributed to the improvements being undertaken in aged care areas and are integral in the day to day running of ORH.

The catering team provide all the amazing dishes for patients, staff and visitors - thank you for providing yummy food of a high standard.

BULLYING AND HARASSMENT

All staff have been provided with support and education, starting with a basic understanding of bullying and harassment and what is inappropriate behaviour in the workplace which is included in our Code of Conduct.

50% of staff who lodged a formal complaint were satisfied with how it was managed.

Bullying in the workplace results showed positive improvement.





A drop from last year's result of 36% to 18% this year. 2016 18%

Staff survey also highlighted that 11% of staff experienced sexual harassment, mostly from consumers which was than well managed.

ACCREDITATION

Orbost Regional Health has a quality program to support a culture of continual improvement in all parts of the organisation. This is to ensure our consumers are safe.

All health services are checked against a range of standards. Orbost Regional Health are accredited to the following standards.

Services	Accreditation	To be renewed
Organisational Wide	National Safety & Quality in Health Service Standards	November 2017
Home Based Services	Community Care Common Standards	November 2017
Homelessness Support	Department of Human Services Standards	November 2017
Disabilities Services	Department of Human Services Standards	November 2017
Medical Clinic	Royal Australian College of General Practitioners Standards	June 2018
Radiology	Diagnostic Imaging Practice Accreditation Standards	January 2020

ADVERSE EVENTS

All adverse incidents reported undergo an investigation to understand situation, environment, causes and possible preventative factors that need to be considered. Adverse events include incorrect medications, falls and equipment failures. Serious incidents undergo a full review. This may involve people from external organisations to assist us with identifying if the incident was preventable and what changes are required to minimise risk of the incident occurring again.

ACTIONS/RECOMMENDATIONS

8 incidents were rated as moderate severity this year. Incidents included injuries to staff through environmental factors, such as an uneven floor and dog bite at client's home; and injuries to consumers such as a fracture following a fall. These incidents all underwent a thorough investigation.

RECOMMENDATIONS

Ensure all consumers aware of requirement to adequately restrain pets

Repair flooring to prevent trip hazard

Nursing education on recognising patient deterioration

Clutter free environment to be reviewed regularly

Remove oversized bedspread to reduce trip hazard

QUALITY INDICATORS

CLINICAL INCIDENTS

Staphylococcus Aureus Bacteraemia rate 0% Blood and blood products 0% Pressure injuries 4% Medication 22% Falls 54%

BLOOD AND BLOOD PRODUCTS

100% of clinical staff required to administer blood products have undertaken the appropriate mandatory training within the last 12 months.

Blood transfusions during 2015/16

PRESSURE INJURIES

Prevention of pressure injuries within the acute ward has been a major focus over the past 12 months.

Pressure injuries reported during 2015/16

MEDICATION INCIDENTS

Significant improvement in the number of medication incidents has continued through ongoing staff education and diligence.

100% of clinical staff who undertake medication administration have completed mandatory online training.

> **NUMBER OF MEDICATION INCIDENTS** 2012-13

FALLS INCIDENTS

Patient and resident mobility impacts on the number of falls each year. The Falls Prevention Committee investigates incidents of harm from a fall and makes recommendations following this review. Recommendations have included:

- Equipment purchases De-clutter rooms
- Medication reviews
- Specialist intervention

3% of falls resulted in serious harm

NUMBER OF FALL INCIDENTS

HAND HYGIENE

Three staff members have completed the hand hygiene auditing course. They will help monitor compliance by doctors and nurses of the 5 moments of hand hygiene.



100% of staff have completed mandatory hand hygiene education

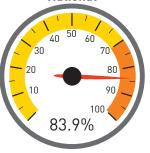
EFFECTIVE HAND WASHING

National benchmarking shows Orbost Regional Health performs well above average in effective hand washing.

Orbost Regional Health

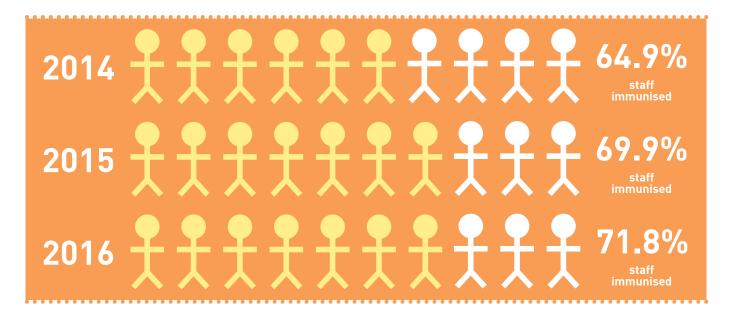


National



STAFF INFLUENZA IMMUNISATION COMPLIANCE

The flu campaign included vaccination bbq lunches and publicity throughout the organisation, including taking vaccines to staff at their desks.



STAFF PERSPECTIVE

Staff sometimes find it difficult to get away from their work area to have flu immunisation. This year we took the immunisations to staff work areas via a mobile flu trolley and staff were happy to roll up their sleeves at the desk to have their needles.

MATERNITY SERVICE PERFORMANCE

Data is submitted following every birth to measure the safety and performance of the maternity service. This performance is measured by key performance indicators and is benchmarked against other maternity services in Victoria. In the last key performance indicators report, Orbost was identified in just 7 indicators due to the low number of births. We performed exceptionally well in all indicators apart from the indicator measuring the number of women smoking during pregnancy.

SAFETY WAS FURTHER SUPPORTED BY AN EXTERNAL SERVICE REVIEW

"Orbost Maternity Services appear quite sound, are provided with good intention and a high degree of concern for the well-being of the women and their babies. The scope of the service is for low-risk births and women who delivered at Orbost Regional Health during the review period appear to have been appropriately classified"

Another quality measure for the maternity service is the collection and transit time of newborn blood screening samples.

> Samples collected and delivered within timeframe. State benchmark of 95%.



Maternity clinicians completed 100% mandatory Fetal Surveillance training

Clinicians completed mandatory Basic and Advanced **Neonatal Resuscitation**

MENTAL HEALTHCARE

SUPPORTING DATA

Medical Clinic data shows that 68% of consumers treated by doctors for ongoing and persistent depression now have a mental health plan and are accessing counselling supports.

YOU SAID WE DID

On three separate occasions I asked Orbost Regional Health staff specifically about psychology services, or some kind of mental health support, and was told "I don't know anything about that; I don't know who to refer you to, or how that works. There is something available at the hospital: you'd have to ask there." I couldn't summon the energy to ask again, so I didn't.

I want every doctor to know that if someone presents with a problem and their judgement confirms the problem, but the help needed is beyond what they can offer, then it's their job to get connections underway.

This story had a significant impact on service design as it highlights the challenges people with anxiety or depression face when seeking help: facing up to the problem and then finding the right kind of support.

We realised that staff were not clear about support options and referral pathways. Medical and counselling staff identified access and referral gaps.

They developed a staff education strategy, including documentation clearly outlining support options and how to access them.

The highlight was improved teamwork with doctors who gained more assurance to enlist the help of mental health professionals, and to support patients to make early contact with medical assessment and further support from counselling and mental health staff.

RESIDENTIAL AGED CARE PERFORMANCE

In Victoria, every public sector residential aged care service is invited to participate in the quality indicator program. Orbost Regional Health has two residential aged care services (Waratah Lodge and Lochiel House) and participate fully in measuring and reporting on the key performance indicators. We understand that these five areas can have serious and life threatening impacts on health and quality of care for our older residents and are constantly looking to improve the services that we provide.

THE PROGRAM MEASURES FIVE IMPORTANT ASPECTS OF CARE:

Pressure injuries

Falls and fall-related fractures

Physical restraint

Use of nine or more medications

Unplanned weight loss

AGED CARE PERFORMANCE

Orbost Regional Health uses this quality indicator data to highlight areas for improvement. The smaller the value, the better the result.

Quality indicator	Orbost Regional Health	State Average
Pressure Injuries Stage 1	0.17	0.35
Pressure Injuries Stage 2	0.32	0.38
Pressure Injuries Stage 3	0.12	0.07
Pressure Injuries Stage 4	0.01	0.02
Suspected deep tissue injury	0.00	0.01
Unstageable pressure injury	0.01	0.04
Falls	5.41	7.21
Fall related fractures	0.09	0.15
Intent to restrain	2.54	0.34
Physical restraint devices	4.32	0.46
9 or more medicines	3.74	4.44
Significant weight loss (→3 kgs)	0.45	0.86
Unplanned weight loss	0.60	0.76

Waratah Lodge and Lochiel House per 1,000 occupied bed days

Key areas for improvement this year focus on:

RESTRAINT:

Residents have all had discussions with multiple health professionals around the risks and benefits of having bedrails used in Waratah Lodge. Measures are underway to reduce the use of bedrails through new equipment purchases and discussions with staff and family about the reasons to use bedrails. At times, the bedrails are used by residents to increase feelings of safety and security when mobility is limited.

9 OR MORE MEDICINES:

Residents of Waratah Lodge and Lochiel House have regular medication reviews by their doctor, along with an annual review by a pharmacist to try to reduce the number of medications they are taking.

CONTINUITY OF CARE

ADVANCE CARE PLANNING

STAFF STORY

I visited a client who lives a considerable distance away from services for an assessment for possible support, to enable him to continue to live safely with his medical condition.

The client is suffering from a progressive medical condition that will predictively get worse and he may at some point have difficulty expressing his wishes about his treatment choices. The wishes are documented on an Advance Care Plan.

This client made it very clear that he had particular choices and that he was choosing to remain independent and live in his current environment for as long as possible and hopefully till the end of his life.

By having the conversation earlier, there has been opportunity to discuss areas of possible risks to his safety which may cause concern to family and health providers when he becomes unwell.

While the client has the capacity to understand these risks and the consequences of those choices, it will further help those who may have to make or assist with decisions about ongoing care at a later time. This also ensures that the client's wishes are carried out. Our role is to help people to express their preference for treatment and care and to provide support to clients where practicable and as far as resources allow, to support their preferences.

This particular client has participated in making sure his wishes have been well documented and that he has made the necessary arrangements with his family and doctors whilst he felt he was fully capable of making his own decisions.

When asked, he had already appointed one of his children as an Enduring Medical Power of Attorney. He had also made sure he had communicated his wishes. His family is fully aware of this and it provided them with clear understanding of their father's wishes.

KEY IMPROVEMENT

The key improvement as a result of the experiences of patients admitted has been the development of a team meeting every week. This meeting is attended by all departments including doctors, nurses, allied health staff, community home support staff and district nurses. This team meeting allows for discussion of patients' needs while in hospital and prior to leaving.

STAFF FEEDBACK

Staff have reported that the meeting is very worthwhile as they have the opportunity to raise concerns or discuss problems which otherwise may not have been well managed prior to patient leaving hospital.

VICTORIAN HEALTHCARE EXPERIENCE SURVEY - DISCHARGE FROM HOSPITAL

PATIENT PERSPECTIVE

Discharge was not delayed. 96%

Satisfied with the discharge process.

Family or home situation was considered when planning 84% discharge.

Enough notice given about discharge date.

Doctors and nurses provided sufficient information about managing at home.



END OF LIFE CARE

ADVANCE CARE PLANNING IN PRACTICE

Staff visited a client who lives independently in a unit close by to daughter and other family members. Recent admissions to hospital following falls and other health issues not uncommon in advancing age were discussed. This was causing some concern to the client and family about future needs and what might happen.

This provided an opportunity to talk about advance care planning and what an advance care plan is and how they work. The main discussion was about how they are used to assist people to make their own decisions and that if you are unable, or want someone to assist with this, then you can chose who that person or persons are.

The next visit was arranged to have appropriate family members present to discuss their plan.

They were given some explanation about Medical Power of Attorney. They were also provided with written material to read and fill out as appropriate. Also what to do next, which was taking it to the next GP visit for further discussion and signing. This took client and family about a week. In that time the client had a copy of their advance care plan and copies were given to appropriate family members. Alerts were put in client's paper and electronic files so that it is accessible to any relevant health professional/s that may be providing care.

Family and client expressed relief to have something in place.

This case study aligns with Orbost Regional Health's team approach to end of life care.

This process starts with conversations about Advance Care Planning and encouraging consumers to document their values, beliefs, wishes and preferences in the event that people are unable to make or communicate these decisions themselves.

These conversations may start in the doctor's clinic, the hospital, at home, visiting a service such as the physiotherapist, or even with the worker providing assistance at home. We believe that every person has the right to make choices about

their end-of-life care, and staff at Orbost Regional Health will work together to honour those choices wherever possible.

Orbost Regional Health has a range of resources and supports to assist patients, consumers and family members to have optimal end of life care. These can be accessed through the acute ward, the district nursing service, the medical clinic, or the community home support service.

By making plans and communicating them to the right people you can feel more confident that your future needs, preferences and wishes will be considered at a time when you are unable to express them yourself.

IF YOUR CHOICES FOR FUTURE HEALTH CARE ARE KNOWN, THEY CAN BE RESPECTED

Regional launched the Living Life Well collaborative last week, with an aim to involve businesses, clubs, groups and organisa-tions in improving the health and wellbeing of community members.

Two information sessions were held, where Orbost Regional Health chief executive officer, Bernadette McDonald, discussed the aims of the collaborative.

It was noted that in East Gipps-land 84 per cent of people don't eat enough vegetables; 58 per cent don't eat enough fruit; 20 per cent drink soft drink daily; 50 per cent are at short term high risk from drinking alcohol; 40 per cent aren't active enough; 55 per cen are overweight or obese and 19 per cent smoke. While the region is on par with the rest of Victoria in terms of the

amount of physical activity residents take; it doesn't compare as favourably in terms of fruit, soft drink and alcohol consumption or obesity. At the information sessions it was explained that joining the

collaborative would help improve the health status and quality of live of those participating, through activities tailored to suit each

organisation.
Participating organisations will be able to gain support, feedback and ideas from others It was explained that participa-Ie office

tt was explained that participa-tion by businesses makes good business sense, in that it leads, to reduced sickness, improvedie-retention, improved resilience, higher commitment, improveduimage, fewer accidents and higher_{ile} productivity.

The collaborative will be guided and supported by Orbost Regional and supported by Orbost Regional Health, with participants to attend an inaugural Living Life Well meeting before undertaking online getting before undertaking online health self-assessments. The results will then be collated to determine the priority areas for each or ganisation. Activities can then beteath the putting the cal tailored to address each organisasigning up atom for tion's priority areas.

Health Orbost Regional H

Improving health together ryn's orbot Regional Health staff and management of the company of the

Orbost Regional Health launched the Living Life Well collaborative last week, with an aim to involve business-es, clubs, groups and organisa-tions in improving the health and wellbeing of community members.

members.

To Two information sessions were below the factor of the facto

and a 4 per cent of people don't eat enough vegetables; 58 per cent don't eat enough fruit; 20 per cent chrink soft drink daily; 50 per cent are at short term high risk from drinking alcohol; 40 per cent

aren't active enough; 55 per cent are overweight or obese and 19 per cent smoke. While the region is on par with

the rest of Victoria in terms of the amount of physical activity residents take; it doesn't compare as favourably in terms of fruit, soft drink and alcohol consumption or

obesity.

At the information sessions it was explained that joining the collaborative would help improve the health status and quality of live of those participating, through activities tailored to suit each organisation.

Participating organisations will

Participating organisations will

It was explained that participation by businesses makes good business sense, in that it leads has announced business sense, in that it leads has announced to reduced sickness, improved ease will be the retention, improved resilience, hief executive higher commitment, improved

higher commitment, improved image, fewer accidents and higher productivity.

The collaborative will be guidedntly left to take and supported by Orbost Regionalsition at Austin Health, with participants to attend an inaugural Living Life Wellse is leaving her meeting before undertaking online as director of frhealth self-assessments. The re-ærvices – nurs-of health self-assessments. The re-ærvices – nurs-of with will then be collated to deter midwifery at mine the priority areas for each or-last Health incommitment of the provided to address each organisa-Drbost.

Orbost Regional Health is set to provide four extra aged care beds, following a \$147,541 funding boost.



Prog Andrew Phillips congratulates Chantelle Parsons and Brenda Cotter of

The contract and the state of the contract and fight cancer

Pollies takes local concerns to Cabinet

employed two new staff members as community support worker trainees.

community support worker transcess.

Brenda Cotter and Chantelle Parsons to both won the jobs after a rigorous selection process. They are now employed part time within Orbost Regional Health's Home and Community Care (HACC) department to provide home based services to older frail and aged people as well as younger people with

disabilities. Brenda and Chantelle are both in the process of being enrolled in Certificate III Aged Care/HACC at Chisolm Institute and will receive ongoing support from Chisolm Institute and Orbost Reional Health.

The course offered by Chisolm Insti-

cess to interactive activities, materials, educational videos discussion, live and webinars as well as an expert to

Assessment will include a mi line quizzes, reports on a cas collecting online research on a t exams.

Orbost Regional Health staff are delighted to support the loc munity by offering traineeships field. Traineeships have been over recent years in medical c ministration, general administra dental assisting, however this is time a traineeship has been of the growing community base

position as director of nursing at Wangaratta Hospital, where she has worked for the past six

years. She has got there

She has got there through applying herself to study and gained a Diploma in Business from a local TAFE; a bachelor's degree at Australian Catholic University in applied science (Nursing); amaster's degree in

degree administration

from the University of New South Wales, which she did over the internet with a residential period twice

Her last course was with the Australian Insti-tute of Directors, where she studied the company directors course. A leader without a vision for the organisa-tion she leads is bound to find herself stressed

Grbost Regional Health representatives shared their vision for improved health services in the region when the Minister for Rural Health, Fiona Nash visited last week.

Health, Fiona Nash visited last week.

Ms Nash was in town with Member for Gippsland, Darren Chester, and Member for Gippsland East, Tim Bull.

Mr Chester, and Member for Gippsland East, Tim Bull.

Mr Chester, and Member for Gippsland East, Tim Bull.

Mr Chester, and Member for East for Chester, and Member for East for Chester, and Minister Nash to Orbots Recommended to the Chester for State of Chester for East for Chester for Chester

purpose Services was at the centre of Minister Nash was made aware of the minister Nash was made aware of the Minister Nash gave an undertaking to pursue the issue with her Cabinet colleagues. "Orbost Regional Health provides an outstanding service to the local community of the Minister Nash gave an undertaking to pursue the issue with her Cabinet colleagues." "Orbost Regional Health provides and outstanding service to the local community of the deal community of the Minister Nash gave are in the deal community of the total package," or Mr Chester Said.

"Funding comes via a service to the focal package," or Mr Chester Said.

"Funding comes via a service to the local package," or Mr Chester Said.

"Funding comes via a service to the local package," or Mr Chester Said.

"Funding comes via a service to the local package," or Mr Chester Said.

It's a different funding arrangement harnt stand-alone residential aged-care services. "While this funding model has more as and requirements in the aged care sector have changed over time and as such, this model needs to be reassessed."

Mr Chester said providing access to quality health services was critical for Gipps-land's future growth and prosperity and it was important to have the Minister in the region listening to local health professionals.

orh AGM

Regional Health employees and a board member was recognised at the semirecognised at the service meeting last

Tuesday evening.
ORH's annual report

activities is relatively stable, however employee expenses have increased. There was a slight decrease in the amount spen to non-salary labour costs, supplies and consum-ables and one employee the costs. The comprehensive result for the 2014-15 financial year was a \$852,000 loss, formpared to a \$165,000 loss last financial year.

milestones:
Andrew Phillips, Carole
Kane, Elizabeth Christie,
Mary-Jane Hammond, Mary-Jane Hammond, Marthews, Sarah Pinkerton, Sharon Raynor, Sonial
Melville, Trong Damie (10)

up early and putting in a full day at work. Meryn found her first job working in a GM Motors dealership in St Arnaud. There she acquired knowledge and experience in

as director of nursing.
Then she was a
pointed as director

ional Health board president Andrew Martin and chief executive officer Meryn ratulate Garry Squires on his 15 years' service to the board. s423-269

Accreditation endorses ORn

The long service of many Orbost Regional Health staff was recognised at the annual general meeting. Annong the staff were Merrill Herbert (25 years), Susan Wait (20 years), Belein McCarthy (25 years), Debbie Hall (15 years), Pamela Andrews (15 years), Elizabeth Christie (10 years), s48-260

She and her husband still have land near her parents' property, which ran sheep and grew wheat. The area is in the grip of drought at present, and crops are of the minished value. Meryn went to school at Charlton, where she attended the primary and then the secondary school. Her experience in education established a life-long interest in. a life-long interest in, and a commitment to, carning; a highly desir-ble attitude in modern ociety, where change and innovation is neces-

bosst las

But part of the learning
the space. But part of the learning
this is the fiprocess is also
land hospithe process of acquiring
cer Bernadejob skills and getting

which made her a dou-ble certificated nursing sister.

She did her midwifery training in Mackay in central Queensland, at the Mackay Base Hospi-tal. Merpu worked for a number of years in Queensland in areas of intensive care and ma-ternity nursing. Most of the time she sought op-portunities to gain im-proved qualifications and gain new skills that enhanced her job prospects.

Moving to Toowoomba as a health planner, she worked for Darling Downs Regional Health Authority for several years. There she was en-gaged in developing strategic and operational plans for beath services.

introduced which re

quired that trainees do 1500 hours of study to

1500 hours of study to accompany their practi-cal clinical work in the hospital under supervi-sion. She gained her nursing certificate in general nursing and then went on to gain her cer-tificate in midwifery, which made her a dou-ble certificated nursing sister.

strategic and operational plans for health services in the region.

She married in Toowoomba, and went to Oakey Health Service

pointed as director or nursing at Harvey Bay on the coast of Central Oueensland and worked on the coast of Queensland and