



Staff are excited about the redevelopment of the Emergency Department that will see it double in size from 8 to 16 cubicles. Completion is scheduled for March 2013.

Improving the health and wellbeing of our community

The Board of Directors, Executive and staff at the West Gippsland Healthcare Group are pleased to bring you our 2012 Quality of Care Report.

We wish to thank the community for their ongoing support, as well as thank the members of the Community Advisory Council (CAC) for their assistance in preparing this report. On page nine of this report, Rosemary Joiner, Chairperson of the CAC outlines the role that the Council plays and highlights some of the 2012 collective achievements.

The Quality of Care Report allows us the opportunity to inform you of how we monitor, compare and act to improve the safety and quality of health services we provide.

We distribute this report via local newspapers to maximise our greatest reach throughout the community. We welcome feedback on any issues regarding the improvement of patient safety, as well as

invite ideas on how we can continue to improve our health services.

Please refer to the consumer feedback form on the back page.

A highlight and major focus for WGHG this year has been the redevelopment of the Emergency Department, expected to be completed in March 2013.

The addition of eight extra cubicles will see the Emergency Department double in size to a total of 16 cubicles. Over 20,000 presentations occurred last year which was a 5% increase on the previous year. As part of the ED redevelopment, models of care and patient flow processes will also be reviewed to ensure that patients receive optimal care as quickly as possible. Refer to page six for more information on the Emergency Department.

What a difference a team can make

Seven years ago, local resident Ken Jones was diagnosed with lymphoedema. This is a long term condition where fluid builds up in the tissues causing swollen limbs.

Ken lived alone and his condition had gone unmanaged as he found it difficult to leave the house. The swelling in his legs became so severe that he found it difficult to care for himself, resulting in Ken having a fall at home.

Ken was admitted to the Emergency Department and then transferred to the High Dependency Unit (HDU). Due to the complexity of his condition, the HDU staff contacted the District Nursing team for wound care advice. The District Nurse attending was a specialist in lymphadema management. Together with the medical and nursing staff of the HDU, they developed an intensive management plan involving antibiotics, skin treatments and compression bandaging to reduce the fluid build-up in Ken's legs.

Once he was well enough, Ken was discharged. He and the District Nursing team worked together to develop a life changing plan that suited him physically, financially and emotionally. The plan enabled him to successfully manage his condition with ongoing support. In addition, Ken was linked with a team of staff from the community that helped him improve many other aspects of his life.

With this team approach, Ken's legs improved markedly. He began walking and became fitter and healthier. He lost 25 kg in weight and his quality of life both physically and emotionally improved.

Angela Tate, from the District Nurses team commented "This was a greatly satisfying and positive outcome for patient and healthcare workers and shows what team work can achieve."

Ken said "I'd been an idiot and thought I could manage when I couldn't. Thanks to all the staff that willed me to get motivated. One and a half years later, I'm walking around enjoying life! Proof that with the right people who care, everything is possible."

Patient Ken Jones and District Nurse Angela Tate understand that teamwork can achieve great results.

Pet therapy programs bring joy...

At Andrew's House and Cooina Lodge, our Aged Care residents and their families value the benefits and joy that our lifestyle programs offer.

The Pet therapy program at Cooina Lodge includes regular animal visits. A highlight for resident Carmel Spiteri (pictured) was meeting staff member Meagan Jones miniature pony.



About your Health Service



From the CEO...

Welcome to the 2012 Quality of Care Report. I'm thrilled to be able to provide you with an overview of the past year's highlights and challenges that our Healthcare Group has experienced. With the population of the Baw Baw Shire growing at a faster rate than the State average, the West Gippsland Hospital has had an extremely demanding year. The Emergency

Department saw continued growth with 20,051 attendances, 953 more than last year, a 5% increase.

We treated a total of 13,211 inpatients, which was 2,153 more inpatients than the previous year, and well above our target of 11,200.

Our Obstetrics team was very busy with 881 births (another record breaking year), which was an increase of 61 births versus the previous year.

The increased patient numbers placed significant pressure on the elective surgery program with 3,209 operations performed, only 124 less than the previous year. Our waiting lists grew with 779 patients on our waiting list as at the end of June this year. This is reflective of the growth in demand for services at the hospital, which will continue to be

a challenge into the future, particularly as the community continues to grow.

In July this year, we introduced a new initiative called the no gap private patient scheme, which is aimed at encouraging patients with private health insurance to use that insurance for the wellbeing and benefit of the hospital. This will greatly assist with providing a revenue stream for our hospital, and will help to relieve pressure on public funding.

We will also implement some new initiatives including the introduction of electronic prescribing for medication on our Wards, and releasing time for care by more effectively managing non patient tasks.

I gratefully acknowledge the support and leadership of our Board of Directors, and the assistance of the Community Advisory Council and tireless efforts of the volunteer community.

VISION To improve the health and wellbeing of our community.

MISSION West Gippsland Healthcare Group is committed to the provision of high quality, integrated health care that meets the changing needs of individuals and our community.

WE VALUE: Our Customers; Our Community; Our Staff; Leadership; Improving Performance

Finally, our staff are to be congratulated on their continued commitment to delivering high quality health care services. Their enthusiasm, dedication and determination are highly commendable, particularly as we strive to meet the needs of our growing community.

Dan Weeks
Chief Executive Officer

What We Do

HOSPITAL (ACUTE)

Anaesthesia
Breast Surgery
Community Rehabilitation Centre
Day Surgery
Dental Surgery
Diabetes Education
Ear Nose and Throat Surgery
Emergency
Endoscopy
General Medicine
General Practice
General Surgery
Haemodialysis
High Dependency
Midwifery
Neurology
Obstetrics/Gynaecology
Oncology
Ophthalmology
Orthopaedic Surgery
Paediatrics
Paediatric Surgery

Plastic Surgery
Post Acute Care
Pre-admission
Rheumatology
Stomal Therapy
Urology and Urodynamics

SUB-ACUTE

Cognitive Dementia and Memory Service (CDAMS)
Continence
Geriatric Evaluation and Management (GEM)
Hospital Admission Risk Program (HARP)
Interim Care
Palliative Care

AGED CARE

Aged Care Assessment
Andrews House Aged Care Facility
Coinda Lodge Aged Care Facility
Home & Community Care

Services
Respite Care

COMMUNITY HEALTH SERVICES

Aboriginal Liaison
Adolescent Health
Asthma Education
Victorian Bushfire Community Support Service
Counselling
Diabetes Education
Emergency Relief
Falls Prevention
Family Counselling
Health Education/Promotion
Rural Allied Health Service
Self Help and Support Group
Facilitation
Women's and Men's Health
Youth Services

ALLIED HEALTH

Cardiac Rehabilitation
Chronic Obstructive Airways

Disease (COAD) Program
Diabetes
Nutrition and Dietetics
Occupational Therapy
Pharmacy
Physiotherapy
Podiatry
Social Work
Speech Pathology

HOME NURSING SERVICE

District Nursing Service
Hospital in the Home
Palliative Care Nursing/
Volunteers

SUPPORT SERVICES

Administration
Engineering
Environmental Services
Finance
Food Services
Health Information
Infection Control
Information Technology

Library
Occupational Health and Safety
Payroll
Public Relations
Quality & Customer Service
Staff Development
Supply

BUSINESS UNITS

Consulting Suites
Meals on Wheels
Salary Packaging
Warragul Linen Service

DIAGNOSTIC SERVICES

(Contract Services)
BreastScreen
Endoscopy
Lung Function Testing
Medical Imaging
Pathology
Stress Electro Cardiographs
Stress Echo Cardiographs

Our Service Area...

Who we care for

West Gippsland Healthcare Group (WGHG) is a customer focused health organisation providing acute care, residential care and community health services to 45,000 people in the rural, urban residential, agricultural and industrial areas located within the Baw Baw Shire and beyond.

Last year we:

- Employed a total of 1,217 staff
- Treated 13,212 hospital patients
- Provided 76,077 outpatient and community occasions of service
- Cared for 141 aged care residents

While most people in the Shire speak English, 5.3% of our population is from multi-cultural and non-English speaking backgrounds. In addition to this 1.5% of our population is Aboriginal.

We Value our Customers

Patient Safety - Infection Control



Hand Hygiene

Clean hands are the key to preventing the spread of 'bugs' and reducing infections. Our Healthcare Group has stringent hand hygiene practices in place and actively promotes the importance of hand hygiene by:

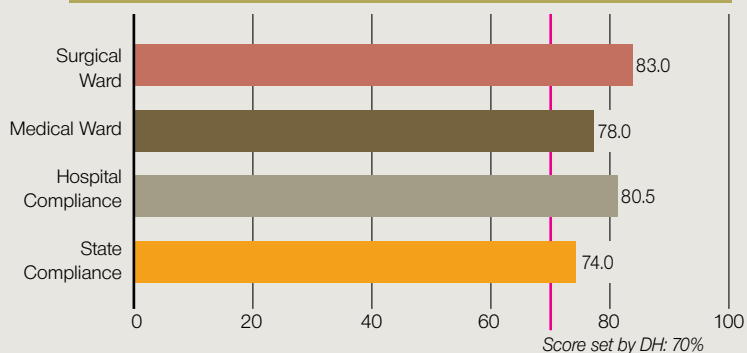
- Supplementing hand washing with special alcohol based hand rub solutions
- Educating our staff in using the international best practice model of 'five moments for hand hygiene'
- Regularly checking staff compliance by completing ongoing observational audits

Cleaning Standards

A clean environment, clean equipment and best clinical practice are highly important to the control of infection. A clean hospital is important to reduce the risk of people developing infections. Our Infection Control Team ensures work surfaces, work environments and new equipment are easy to maintain and clean. We conduct monthly internal audits and Department approved auditors conduct regular external cleaning audits.

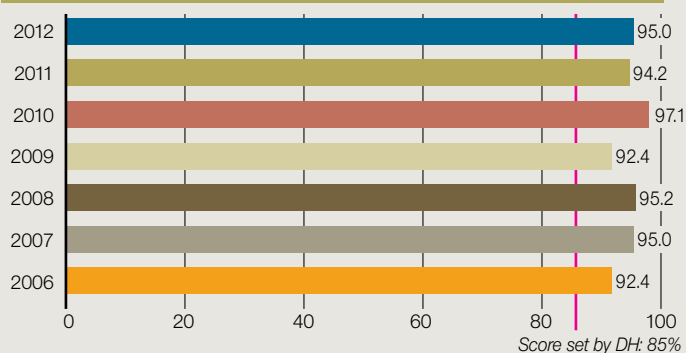
The Rural Infection Control Group (RICPAC) audit tool highlighted the need to adopt a consistent cleaning program for all drapes and isolation rooms. This resulted in the purchase of new specialised steam cleaning equipment which has delivered excellent results.

Hand Hygiene Compliance Audit One 2012



The Department of Health's minimum for Hand Hygiene compliance is 70%. Overall results show WGHG compliance at 78% for Medical Wards and 83% for our Surgical Ward. Regular audit results are shared with staff in order to develop ongoing improvement strategies

Cleaning Standard Score



WGHG has a strong track record of consistently achieving high scores in cleaning standards. The Department approved auditors conduct annual audits, with a required minimum target of 85%. For the past eight years, WGHG has achieved above 92% demonstrating focus and commitment to infection control and cleaning standards

Over 20,000 Presentations through the Emergency Department

Patient Safety

Medication Management

We administer large arrays of medications by a variety of different methods, which can at times make medication management a high risk area. This is why we take it very seriously.

Numerous aspects of medication management are monitored and include:

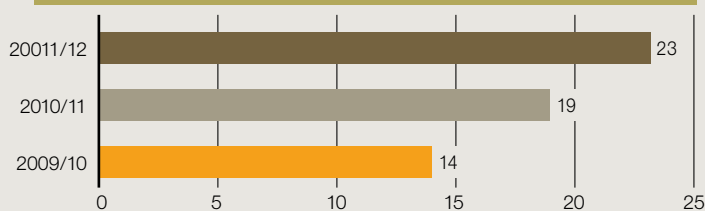
- Regular reviews of policies, procedures and protocols that help guide and assist our staff
- Education programs which are conducted at orientation and at regular intervals throughout the year
- Reviewing the competency of nursing staff to correctly calculate medication doses
- Conducting numerous audits to ensure staff comply with policies
- Actively encouraging staff to report and discuss medication errors
- Analysing errors to identify why they occur
- Checking medication management processes against national standards to ensure compliance.



Pressure Ulcer Stages

- STAGE 1** Redness with intact skin
- STAGE 2** Abrasion, blister or shallow crater on the skin surface.
- STAGE 3** Deep crater on the skin surface
- STAGE 4** Full thickness skin loss and muscle or bone damage

Number of Hospital Acquired Pressure Injuries



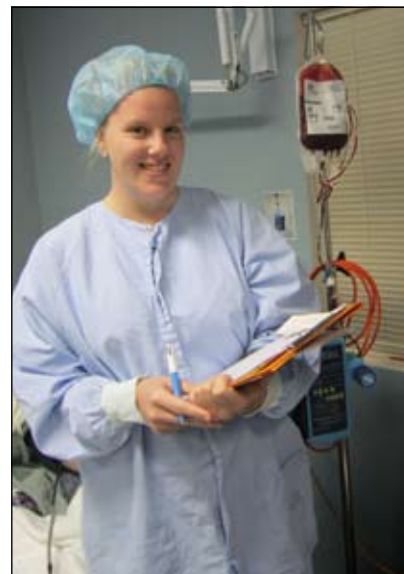
Whilst there has been an increase of four pressure injuries from the previous year, the injuries were Stage 1 or 2 (redness or abrasion).

Blood Safety

Each year many blood and blood product transfusions occur in the care of acutely ill patients. These blood and blood products are a vital resource to patient care and there are many safety aspects to the procedure for giving transfusions. WGHG has a comprehensive blood safety program which is monitored by the multidisciplinary Blood Transfusion Committee.

The blood safety program includes the following:

- Best practice policies and procedures are in place to safely and appropriately store, order and administer blood and blood products
- Staff are trained in blood storage, transportation, transfusion administration procedures and techniques
- Patients and their families are provided with current information about blood transfusions
- Medical records are periodically audited to check that all appropriate steps are documented
- Where patients have reactions, such as a fever or other symptoms, the reactions are investigated and reported to the Blood Transfusion Committee for review
- Where there are significant reactions to blood transfusions, these are reported to the state-wide Serious Transfusion Incident Reporting (STIR) system at the Department of Health
- Each request for a transfusion is audited to ensure there is appropriate documentation and there is no resource wasted.



Pressure injuries

Pressure injuries are caused when tissue over bony parts of the body is starved of blood due to pressure or friction. The injuries can range from a reddened area to deep sores that affect the underlying tissues. The sick and elderly are very vulnerable and pressure injuries can begin to occur very quickly.

All patients and aged care residents are assessed for the risk of developing a pressure injury and the need to implement pressure relieving strategies as part of their care plan.

As part of our Patient Safety Program, all pressure injuries are reported on our Incident Reporting System, including those pressure injuries that people come in with and those that are sustained whilst in hospital or aged care facility.

We monitor the effectiveness of our Patient Safety Program through regular spot audits, to check that the pressure risk assessments have been completed and interventions to reduce the risk of pressure areas developing have been implemented in a timely manner.

We Value our Community

Patient Safety

Aged Care Quality indicators

Andrews House and Cooinda Lodge monitor a range of clinical safety and quality indicators which measure and alert us to potential problems and opportunities for improvement in patient care.

RESULTS APRIL TO JUNE 2011	ANDREWS HOUSE (51 beds)	COOINDA LODGE (60 beds)
Incidence of Pressure Injuries		
(See definitions on pressure ulcers stages on previous page)	Stage 1 0	Stage 1 4
	Stage 2 2	Stage 2 4
	Stage 3 0	Stage 3 0
	Stage 4 0	Stage 4 0
Incidence of use of restraint		
Restraints intentionally restrict a Resident's movement or behaviour and include things such as table tops and chairs that are difficult to get out of. <i>Minimal level of restraint is used to ensure safety of the Resident. It is only used as a last resort and when the potential benefits are greater than the potential harm.</i>	0	3
Incidence of Multiple medication use		
Where nine or more medications are being taken by a Resident it is a flag to review the medications.	7	23
Incidence of unplanned weight loss over 3 kg		
This is used as a flag to investigate the reason for weight loss and implement corrective actions if required.	4	0

The basic program has five steps:

1. Risk screening
2. Risk assessment
3. Care plan to reduce risks
4. Process to manage a fall if it occurs
5. Process to reassess and modify care

The program is ongoing and regular evaluations and audits monitor staff compliance to screening and assessment steps. Preventive strategies remain the major focus, along with building up personal physical strength. Research had shown that without exercise people resting in a hospital bed can within days lose significant muscle strength, making them more susceptible to falling.

We have established Allied Health Assistance to staff members to provide functional maintenance programs in the Medical and Surgical Wards.

A prevention program is available for the care of people after discharge and is a staged model of care aimed at independence. The Community Services Physiotherapists provide a 14 week 'Make a Move' program in a community based setting for patients requiring additional assistance. People are then encouraged to continue to exercise independently.

Additional programs available for referral include:

- Strength and balance
- Community rehabilitation
- Strength and conditioning

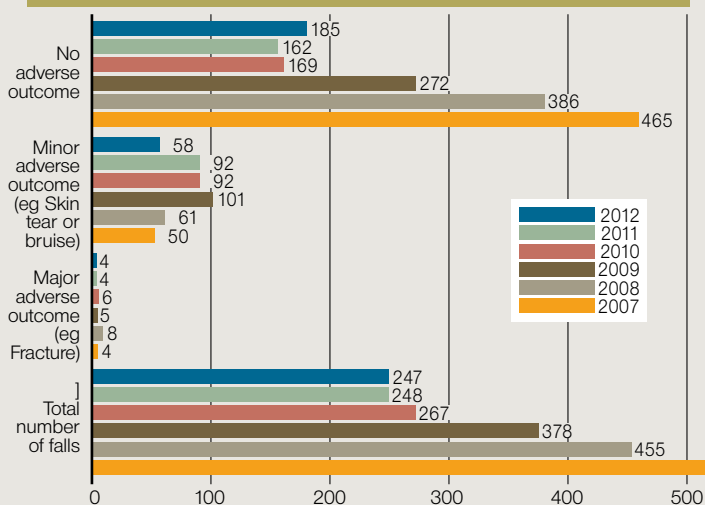
Additional fall prevention and injury minimisation strategies include:

- Lowering beds so they are closer to the floor
- Where possible, placing patient beds closer to the nurses desk for better observation
- Regularly checking on a patient's needs
- Using alarms to alert staff when patients are getting out of bed without assistance
- Using yellow arm bands to alert staff of someone at high risk of falling
- Applying hip protectors
- Ensuring items are close at hand and within easy reach
- Reviewing medications
- Referring patients to dieticians, podiatrists and eye specialists
- Encouraging exercise
- Auditing staff skills in patient screening and assessment
- Reporting falls to capture occurrences and contributing factors for analysis and understanding.

Falls Prevention

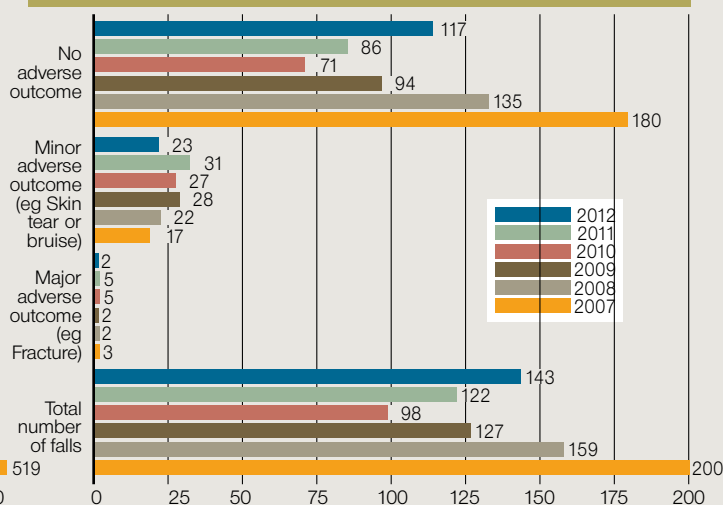
The Falls Prevention program is in its sixth year of operation. The program aims to prevent falls and minimise the injuries caused to hospital patients, aged care residents and clients in community based settings. The program is based on the best practice model developed by the Victorian Quality Council.

Number of Falls Residential Aged Care (RAC)



The number of falls in Aged Care resulting in minor and major harm have slightly reduced in 2011/12.

Number of Falls West Gippsland Hospital



While the total number of falls reported this year has slightly increased, the number causing minor and major harm have reduced.

We Value our Staff

Managing Demand

The Emergency Department

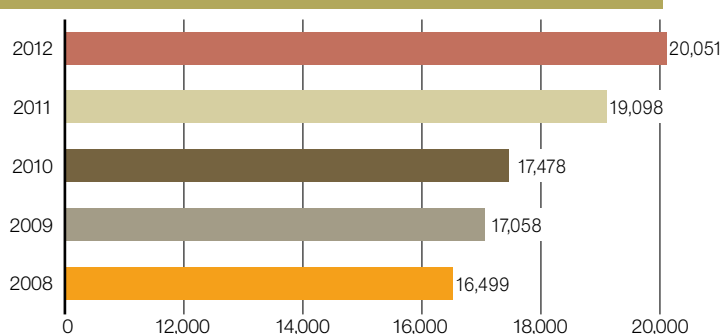
Demand for our services continues to increase, with a significant number of people attending the Emergency Department (ED). The number of people increased by 5% with 953 more presentations. This increase within the confines of the ED environment is one of the reasons we failed to meet our waiting time targets set by the Department of Health.

This year 106 patients extended their length of stay for more than 24 hours in ED. This was not only undesirable for patients but also reduced the capacity of the ED to see new patients and further compounded the demand on inpatient beds.

There were times when the ED became critically overloaded and during these times, a response plan was initiated. While the hospital did not go on ambulance by-pass, at times the ambulance service was notified so that it could make appropriate choices regarding which hospital patients should be taken to. Particularly those from outside the Baw Baw Shire. Other strategies introduced included bringing in additional medical and nursing staff, reviewing the elective surgical operating list and reviewing patients who were scheduled for discharge within 24 hours.

During this response the department is monitored half hourly until the situation improves. Response was triggered 20 times during the year, (the same as last year) and 18 times in 2009/10.

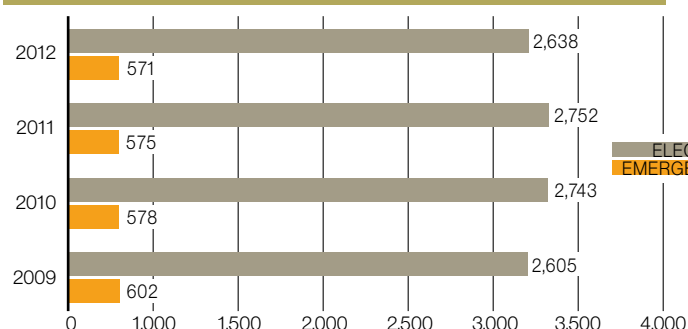
Emergency Department Attendances by Year



Elective surgery

Managing the increased demand for elective surgery within funding constraints continued to present challenges. The number of elective surgery cases completed from the waiting list was 2,217. The number of people added to the wait list was 2,667 and as a result, our elective surgery waiting list grew from 610 last year to 836 this year. 100% of Category 1 patients (the most urgent) were operated on within 30 days.

Total Operations Performed (Elective and Emergency)



Redesigning Care - more time with patients

'Releasing Time to Care' was launched earlier this year, with its main focus being to improve the valuable time carers spend with patients and aged care residents.

It involves a modular improvement series that was rolled out to eight departments across WGHC.

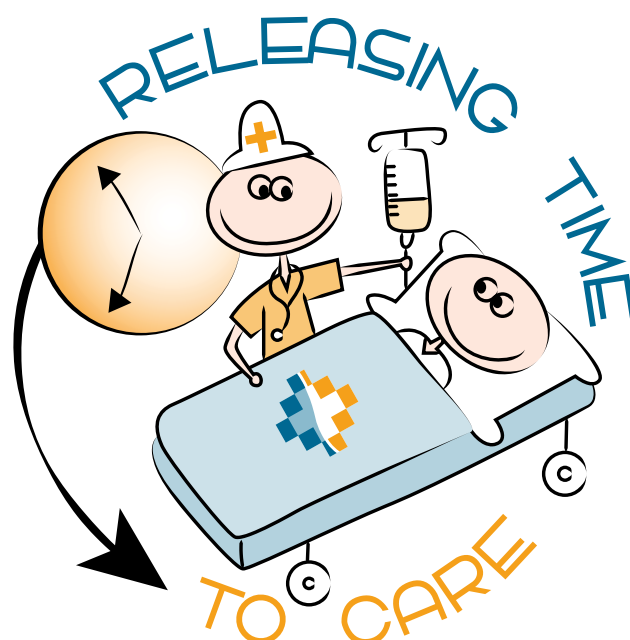
Fifty three staff attended a two day workshop run by the National Health Service (NHS) Institute for Innovation and Improvement.

The Direct Care Time programs that staff attended saw them review current systems and processes, in order to free up and increase time they spend at the bedside with patients.

Direct Care Time has four key areas:

- Safety and reliability of care
- Staff wellbeing
- Patient experience
- Efficiency of service

Redesigning Care continues to facilitate staff in all areas to challenge and creatively think about the way we provide care to ensure it's the best for our patients and our community. We aim to work smarter not harder and grow our continuous improvement culture.



Record Number of Births Reached 881

Clinical Governance

Clinical governance is an accountability framework to ensure the clinical risk management systems and processes are in place to continually improve the safety and quality of care.

WGHG's program of clinical risk management and governance is based on the Department of Health Clinical Governance Guidelines and involves:

- Ensuring an effective and safe workforce
- Monitoring the effectiveness of care
- Managing clinical risks
- Involving consumers in their own care

Elements of the program include:

- A commitment by the Board and executive to a "safety first" environment
- Ensuring staff have the correct qualifications, registrations, experience and credentials to undertake the tasks they are employed to perform
- Staffing departments with people who have the appropriate mix of skills and experience
- Providing staff with educational support that includes supervision of junior staff and ongoing education and testing of mandatory competencies to keep staff up to date with best practice
- The organisation participating in projects to implement best practice
- Involving staff in planning and redesigning systems and processes that improve the way we do things
- Involving patients and family in their care
- Monitoring a large number of audits and clinical indicators that measure our clinical performance

- Encouraging staff to report clinical risks and incidents, to learn from them and prevent them from occurring again
- Investigating incidents, identifying underlying causes and implementing strategies to reduce risks
- Where possible, utilising technology to design out or minimise errors
- Having in place and constantly revising programs to manage known clinical risks (such as Infection Control risks)
- Regularly review policies, procedures, guidelines and protocols to ensure they reflect current best practice
- A range of clinical committees that provides expertise and direction to improve care delivery
- Holding regular meetings of the Clinical Risk and Evaluation (CARE) Committee to discuss clinical incidents, complaints and issues. Risks identified are then directed to the most appropriate committee or persons for action. Strategies aimed at risk prevention are identified, implemented and reported to the monthly Clinical Quality Committee.

One of the keys to a good clinical risk management program is a healthy culture of reporting incidents or issues so lessons can be learned. It is difficult to ensure every incident is reported so WGHG actively encourages and supports reporting through education and feedback to managers.

Where a serious incident occurs the CARE committee recommends a higher level of investigation is carried out, such as an in-depth review or root cause analysis. During these processes every detail of the incident and events leading up to the incident are analysed to identify causes. The team then develops recommendations to prevent similar incidents occurring in future.

Clinical Incidents

2011-12	1470	Falls 30 %	Medication and IV related 15%
2010-11	1602	Falls 26 %	Medication and IV related 12%
2009-10	1570	Falls 27 %	Medication and IV related 13%
2008-09	1378	Falls 37 %	Medication and IV related 22%
2007-08	1502	Falls 45 %	Medication and IV related 13 %
2006-07	1730	Falls 42 %	Medication and IV related 15%

The table above shows the number of clinical incidents reported, some of the most common types of clinical incidents and their prevalence over time.

Education and learning is the key

This year we increased focus on delivering education by better utilising the overlap of staff shifts.

This resulted in a significant increase in the number of staff taking up education opportunities. 436 of the 576 in-service sessions for nursing staff occurred during this time.

Each year staff are required to complete mandatory competencies related to their work. This year there was a significant increase in the number of staff completing these requirements. 2,863 competencies were successfully completed by 378 staff. Mandatory competencies include Basic life support, hand hygiene, manual handling, medication administration, fire safety and neonatal resuscitation for midwives.

The number of Diploma of Nursing and Registered Nurse students undertaking clinical placement at WGHG increased with 288 nurses attending for a total of 3,763 student days. In addition to this, 90 medical students undertook clinical experience with midwifery, paramedic and personal care attendant students also hosted throughout the organisation.

New technology and equipment improves safety and quality of care

A five year sponsorship arrangement with the Drouin & District Community Bank provided the opportunity for the Operating Theatre to lease the latest Laparoscopic Equipment. This equipment will be used by all types of surgical specialties. The equipment is the latest technology allowing for advances in surgical technique and clearer pictures during surgery. Clear, sharp high definition pictures allow for a perfect view of veins, arteries and nerves and improved depth of view when performing surgery which increases the capacity of the surgeon to perform the operation safely and quickly. Types of surgery undertaken using laparoscope include: Orthopaedic, General, Gynaecology, Ear, nose and throat; and Urology.

Funding from the Department of Health allowed for new smart technology intravenous pumps to be purchased. The pumps contain built in safety programs and an electronic prescribing system that can be programmed with a computerized 'drug library' to provide the safe delivery of a range of intravenous medication. The introduction of these pumps is planned for 2012-13.



Over 3,300 Operations were Performed

Reaching Everyone

Closing the gap

Under the Improving Care for Aboriginal Program, WGHG has achieved significant outcomes over the past year. Relationships continue to strengthen through close links with local Aboriginal Elders and the local Ramahyuck Aboriginal Health Service, along with two aboriginal members being part of the organisations Community Advisory Council.

WGHG staff are provided relevant cultural information by the AHCO at orientation and staff have undertaken Building Aboriginal Cultural Competence training.

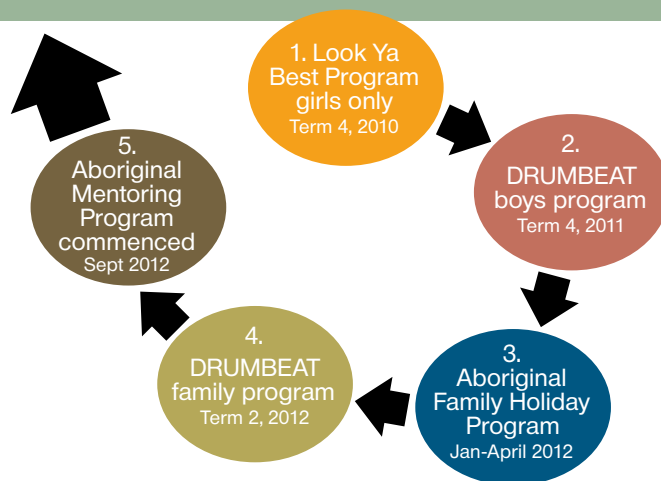
Sadly, last year our Aboriginal Health Liaison Officer Dot Mullet passed away after nearly 26 years in the role. She was a highly valued member of staff assisting with patient cultural needs, supporting discharge planning for Aboriginal patients and contributing enormously to the development of programs and services for the local Aboriginal community.



Participants in the Mentoring Program L-R Sonia Dow, Tamani Hoskins, Emily Harrison, Troy Jennings, Jacey Moffatt, Heather Hood.

'The time me and my children spent with my extended family has been so special. I feel so much more connected to my culture than what I have felt in a long time - thanks so much'.

-Drouin Community Member



1. Look Ya Best

A program for young aboriginal girls conducted in the primary school focussing on self esteem, and healthy relationships.

2. Drumbeat

A social connectedness program delivered to boys at a local school using drums to build social skills.

3. Family holiday program

Aboriginal people view health holistically. To them it includes social, physical, mental, spiritual, cultural, relationship aspects and connection to country.

A 12 day program was conducted during the holidays aimed to deliver a program that met the needs of the local community.

Program objectives included:

- Demonstrating healthy eating, physical activity and healthy lifestyles
- Creating supportive environments that build resilience, confidence, self-esteem and social connectedness within the community

Highlights of the program were:

- Visits to local culturally significant sites
- A sports day featuring indigenous games
- A family swimming day
- Art and craft activities
- A bush tucker walk with native food tasting
- Fishing
- An overnight tour to Lake Tyers Trust Mission

Each event had an underlying focus on healthy eating and physical activity. The program was so popular with both children and adults that attendances increased as the program progressed. There was a significant improvement noted in health related behaviours including the enjoyment of trying new healthy foods.

Some results included:

- 83% developed new skills such as fishing, drumming, talking to new people and playing new sports
- 86% learnt more about their culture and everyone who visited Lake Tyers Trust felt more connected to their traditional culture and ancestors
- 86% felt more connected to their local community

4. Family Drumbeat

An afternoon with dietician on healthy cooking.

5. Mentoring Program

Six local aboriginal members of the community commence a work place pre traineeship placement program within WGHG aimed at improving chances of long term employment.

We Value Leadership

Reaching Everyone

Responding to cultural needs

WGHG has a whole of health service approach to responding to cultural needs.

A Cultural responsiveness plan addresses the six standards of the Department of Health Cultural responsiveness framework. It is reviewed annually by the Community Advisory Council. The Community Advisory Council is a sub Committee of the Board of Directors and is involved in strategic and annual planning. It has established links with the Gippsland Multicultural Service which is used annually to advise on the development and review of the organisation's cultural diversity framework.

As less than 5.3% of our patient population come from Culturally and Linguistically Diverse backgrounds (CALD), West Gippsland Healthcare Group does not have dedicated cultural staff. Using the Cultural Diversity policy, Interpreter policy and resource kit, staff are provided guidance on how to access resources, interpreter services and translated written health material as they are required.

Clinical assessment tools include cultural considerations so staff can plan patient, resident or client needs.

Incident and complaint reporting processes identify issues where there has been a lack of interpreter services. During 2011/12 no issues were identified.

Each year the patient feedback is evaluated and population demographics is reviewed to identify training requirements.

Data from the Victorian Patient Satisfaction Monitor showed 2% required an interpreter and the number of CALD consumers/patients who indicated that their cultural or religious needs were respected by the health service as 'good and above' was 92.4%.

Transition care

Expansion of the Transition Care Program occurred this year, with the funding of an extra bed at Neerim District Health Service and an extra home based bed. This brought the total number of beds for this program to seven.

About your Health Service From the Community Advisory Council...

2012 has been an exciting year for consumer engagement at West Gippsland Healthcare Group (WGHG). The Community Advisory Council (CAC) has spent this year finding new opportunities to contribute to the work of the WGHG.

The CAC is a subcommittee of the WGHG Board and is made up of enthusiastic, community-minded volunteers. They play an important part in WGHG's strategy for engaging the community. Members of the Council provide a consumer perspective to the work of the organisation.

Last year, the National Safety and Quality Health Service Standards were released and we were encouraged to learn that Partnering with Consumers had been named as a key priority in that document. This year, those standards have given added momentum to WGHG's already robust consumer engagement work.

The Standards recommend WGHG partner with consumers in the areas of service planning and designing care.

Some of the projects and tasks we have worked on this year have included:

- Visiting various departments within the hospital to give consumer input on the work being done
- Developing a number of booklets for patients and carers being transferred suddenly to Melbourne hospitals
- Providing consumer feedback on WGHG's Victorian Patient Satisfaction Monitor results
- Reviewing brochures and publications developed within the organisation, to ensure they are consumer friendly
- Participating in the organisation's Board planning day.

We look forward to another exciting and productive year in 2013.

Rosemary Joiner
Chairperson, Community Advisory Council.

Some of our priorities for the future include:

- Supporting people with disabilities by helping to maintain a meaningful Disability Action Plan for WGHG
- Supporting our Culturally and Linguistically Diverse (CALD) clients by helping to maintain a meaningful Cultural Diversity Plan for WGHG
- Developing a Community Participation Plan for WGHG which reflects the important work already being done, and develops our potential for future achievement
- Looking to foster fruitful partnerships with other consumer groups in our region.

10 tips for safer health care



1. Be actively involved in your own health care
2. Speak up if you have any concerns or questions
3. Learn more about your condition or treatments
4. Keep a list of all the medicines you are taking
5. Make sure you understand the medicines you are taking
6. Get the results of any test or procedure
7. Talk about your options if you need to go into hospital
8. Make sure you understand what will happen if you need surgery or a procedure
9. Make sure you, your doctor and your surgeon all agree on exactly what will be done
10. Before you leave hospital, ask your health care professional to explain the treatment plan you will use at home.

Over 13,000 In-Patients Cared For

Getting You Involved

You and your care

WGHG is committed to working in partnership with consumers at many different levels. Part of this commitment involves implementing various strategies to meet the consumer participation indicators required by the Department of Health as part of the "Doing it with us not for us policy." For 2011-12 WGHG has achieved 100% of the objectives set out under the five required standards.

Standard 1 Demonstrating commitment - 8 of 8 objectives met.

WGHG:

- Has a community participation policy in place and this year has been revised to align with the Departments consumer participation framework.
- Contributes to the implementation and monitoring of the local primary care partnership strategic plans.
- Has a variety of approaches to record and monitor consumer participation.
- Has a cultural responsiveness plan that meets the six requirements.
- Has an improving care for Aboriginal and Torres Strait Islander patients program meeting the 4 key result areas.
- Has a disability action plan.
- Has processes in place to consult and involve consumers.
- Works with staff to build the capacity of staff to support consumer participation at multiple levels.

Standard 2 Consumers and, where appropriate, carers are involved in informed decision-making about their treatment, care and wellbeing –All targets exceeded.

- Victorian patient satisfaction score for consumer participation index. WGHG... 83.2% vs target 75%. State average 80% (Wave 21)
- The number of women who said they thought they were given an active say in making decisions about what happened during their labour and/or birth. WGHG 90% vs target 90% (Wave 21)

Standard 3 Evidence-based, information provided to people is helpful.

- 85% of patients responding to the Victorian Patient Satisfaction Monitor rated the question on the quality of written information on how to manage your condition and recovery at home, as being 'good' to 'excellent'. (Target 75%)
- 100% of written information produced by WGHG is tested to meet at least 30 of the 40 items on the Checklist for Assessing Written Consumer information. Target 85%

Being involved and understanding your care is important. The more you understand what is happening to you the better you are able to cope with your treatment.

Good communication is the key to involving people in their care. We encourage everyone to discuss their care with the team looking after them. For patients with complex needs we assist this process by arranging more formal meetings with family members and the health care team.

Standard 4 Consumers, carers and community members are active participants in the planning, improvement, and evaluation of services and programs.

- WGHG meets 6/6 of the dimensions required (100%) vs target of 75%.
- A Consumer Advisory Council meets monthly and provides a forum to regularly seek consumer input in relation to people's experiences, service delivery and strategic planning.

The Council:

- Reviews consumer related policies
- Provides commentary and advice on written patient information
- Reviews the results of the Victorian Patient Satisfaction Monitor
- Provides advice on improving the organisations web site
- Assists in monitoring the progress on the Cultural Diversity Plan
- Participates in organisational planning days
- Provides a link to the Aboriginal community
- Participates in the Ethics Committee
- Advises on a variety of quality activities such as consumer surveys and projects.

This year the Council has begun working directly with clinical department managers to identify ways the CAC can assist managers to improve service delivery from a consumer perspective.

Standard 5 The organisation actively builds the capacity of consumers, carers and community members to participate fully and effectively.

Members of the Consumer Advisory Council are developing an orientation program for new members. Members are provided the opportunity to attend Health Issue Centre workshops and conferences and the organisation is a member of the Health Issue Centre which provides a large range of resources for our Community Advisory Council.

A consumer participation kit provides a guideline to assist staff in consumer participation.



We Value Performance Improvement

Accreditation update

WGHG has continued to evidence embedded and robust quality and safety systems resulting in full accreditation status.

Accreditation processes are in place to ensure that healthcare organisations meet industry standards and continually improve their systems and processes.

WGHG undergoes several mandatory accreditation processes which are conducted at regular intervals from one to two years depending on the type of survey.

This year:

- The Hospital and Community Services underwent a full accreditation survey by the Australian Council on Healthcare Standards (ACHS)
- Andrews House and Cooina Lodge Aged Care Services completed full accreditation survey by the Aged Care Standards Agency
- WGHG was reaccredited under the Baby Friendly Hospital Initiative.



Two of the Isolette incubators in the Low Level II Special Care Nursery.

Current accreditation ratings:

- Full Aged Care accreditation rating with full compliance to all 44 criteria for Andrews House and Cooina Lodge
- Full accreditation for our hospital and community services under EQUIP 5
- 20/20 accreditation score for our Home and Community Care (HACC) services
- Full accreditation with International Standards Organisation AS/NZS ISO 9001:2008 for the Warragul Linen Service
- Community services registration under the Children, Youth and Families Act, 2005
- Full food safety certification
- Baby Friendly Hospital Initiative Accreditation

The accreditation requirements are regularly reviewed by the accreditation bodies to ensure safety and quality standards continue to rise. This year the Hospital and Community Services were accredited under the revised EQUIP 5 requirements.

Highlights include the following:

- The highest possible rating being received - Outstanding Achievement rating for quality improvement processes
- Eight Extensive Achievement ratings which can only be awarded where there was evidence of innovation, processes had been benchmarked and improvements instituted over time or there was research of a publishable standard.

At the same time the accrediting body, ACHS, reviewed WGHG against the new National Standards which will be a mandatory requirement in 2013. This review provided WGHG with a gap analysis to assist with planning to meet the new National Standards.



Over 76,000 Outpatients and Community Occasions of Service

How happy are you?

Patient satisfaction monitor

Many WGHG departments and services conduct surveys to gather your thoughts and ideas on the quality of services they deliver. One major survey is the Victorian Patients Satisfaction Monitor (VPSM). This is an independent survey collated every six months by an external body appointed by the Department. The survey provides data on our performance and is compared to all other Victorian Hospitals.

Best performing areas

- Courtesy of nurses
- Being treated with respect
- Responsiveness of nurses
- Helpfulness of staff in general
- Help received for pain.

Areas we need to improve this year

- The quality and temperature of food
- Waiting room comfort
- Explanation of hospital routines.

Please tell us

When things do not appear to go as they should, please take the time to inform us. We encourage people to let us know if things have not been as planned.

It provides us with the opportunity to investigate what happened and try and ensure it does not happen again.

All complaints are registered to help us determine where issues are occurring, so that we can prioritise them and ensure they are responded to.

This year we received 75 registered complaints.

All complaints received are investigated and followed up by a senior member of the management team and or the most appropriate person.

Victorian Patient Satisfaction Monitor (VPSM)

2011/12 (Wave 21).....	80.4
2010/11 (Wave 19).....	82
2009/10.....	81
2008/09.....	78.2
2007/08.....	80.4
2006/07.....	79.9
State average (Wave 19).....	80

Number of complaints registered

2011/12.....	75
2010/11.....	64
2009/10.....	95

There are many ways for you to tell us your concerns and/or what your good or bad experiences were. You can do a number of ways including:

- Please speak to one of our friendly staff members
- Complete a compliment or complaint brochure available at all of our sites (for a copy to be sent to you please call 03 5623 0631)
- Write us a letter
- Email us at info@wghg.com.au

Consumer Feedback Form

The Quality of Care Report is designed to inform our community about the serviced provided by the West Gippsland Healthcare Group. We value your feedback so we can ensure our Report meets your needs in the future. Please tick appropriate boxes:

Age: 15-35 35-50 50-65 Over 65 Gender: Male Female

How much of the report did you read? All Some A little

Was the Report easy to understand?

Very easy Easy Not easy but not difficult Difficult Very difficult

Did you find the report informative? Yes No

Please tell us what you liked about the report and any other comments you may have:

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Please return in person to main reception, West Gippsland Hospital, 41 Landsborough Street Warragul 3820 or post to the address above. Alternatively, you may complete the form at www.wghg.com.au

We Value Our Customers



1. COMMUNITY HEALTH SERVICES

Drouin - Baw Baw Health and Community Care Centre

Young Street Drouin 3818
ph 03 5625 0200
fax 03 5625 0204
email bbhcc@wghg.com.au

2. COMMUNITY HEALTH SERVICES

Warragul Community Services

31-35 Gladstone Street Warragul 3820
ph 03 5624 3500
fax 03 5624 3555
email wgcsd@wghg.com.au

3. HEAD OFFICE

West Gippsland Hospital

41 Landsborough Street Warragul 3820
ph 03 5623 0611
fax 03 5623 0896
email info@wghg.com.au

4. Warragul Linen Service

Ley Street Warragul 3820
ph 03 5623 4056
fax 03 5623 5074
email info@wls.com.au

5. AGED CARE

Cooinda Lodge

West Gippsland Hospital Site
Landsborough Street Warragul 3820
ph 03 5623 0769
fax 03 5623 0896
email cooinda.clerk@wghg.com.au

6. AGED CARE

Andrews House

School Road Trafalgar 3824
ph 03 5637 4100
fax 03 5633 1018
email ah.office@wghg.com.au

7. COMMUNITY HEALTH SERVICES

Trafalgar Community Services

9 Contingent Street Trafalgar 3824
ph 03 5624 3500
email traf.chs@wghg.com.au

8. COMMUNITY HEALTH SERVICES

Rawson Community Health Centre

Pinnacle Drive Rawson 3825
ph 03 5165 3236
fax 03 5165 3268
email rawson.chs@wghg.com.au

Thanks to Bec of Vandyk Images and Kylie from Kage Design