

# Delivering health and wellbeing to our community



5 day old Michael was amongst the record breaking 1020 babies born this year at West Gippsland Hospital. Michael held by proud new mum Natalie Hickman

The Board of Directors, Executive and staff of West Gippsland Healthcare Group are pleased to bring you our 2013 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. 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, medical centres and community health centres to maximise our reach throughout the community. We welcome feedback and ideas on how we can improve our health service and this publication.

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

Among the highlights of this year has been the record breaking number of births at our Hospital. We had an incredible 15% increase in births this year (1020 births compared to 821 the year prior). Thanks to our wonderful staff and medical practitioners, our Hospital has an excellent reputation for delivering exceptional maternity care which sees women from numerous locations outside of the Baw Baw Shire, choosing to have their babies here.

Another highlight was the official opening of our new Emergency Department (ED) on the 17th May. We welcomed the extension of the Department from eight to sixteen cubicles. Despite the building works and disruptions to the ED, over 20,000 presentations occurred during the year. Please refer to page 7 for more information on the Emergency Department.

## Walking his way back to great health

In April last year, Andrews House welcomed new resident Russell 'Rusty' Aumann. Rusty had previously suffered a stroke and had spent considerable time in rehabilitation as well as another aged care facility.

He needed help with basic tasks like dressing and showering. He had been unhappy with the standard of care at his previous aged care home.

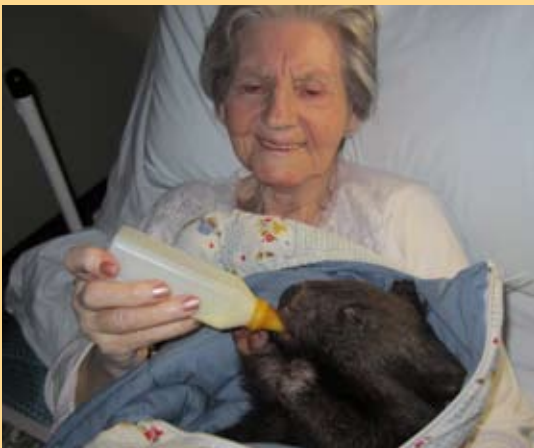
Rusty possessed a strong desire to regain as much of his independence as possible. He gradually developed a good rapport and trust with the staff at Andrews House and formed strong relationships with fellow residents. He became actively involved in many of the activities available including playing Wii, attending concerts and contributing to the resident's meetings. Rusty also became involved in the walking program.

With determination and the support of nursing staff, lifestyle staff, the occupational therapist and physiotherapist, he walked a total of 110 km (which equated to him walking from Trafalgar to Chadstone). He enjoyed encouraging other residents to join him.

*Rusty recalled "There was always a sense of fun at Andrew's House. Staff were easy to talk to and due to their prompt attention, my anxiety was greatly reduced. The care and advice I received was incredible".*

Rusty gradually built up his strength and regained sufficient independence to enable a discharge plan to be implemented. Rusty was eventually discharged home to live independently in Melbourne in July this year, just over one year after his arrival at Andrews House.

The staff at Andrews House are delighted that Rusty has remained in contact via phone and email. Andrews House residents and staff wish Rusty all the best for a happy and healthy future.



## Lifestyle programs lead the way

Our aged care residents and their families value the benefits and the joy that our lifestyle programs bring. Andrews House resident Pearl McGarry, was overjoyed when a baby wombat dropped in for a cuddle and a feed.



Andrews House resident Rusty Aumann and Lifestyle Co-ordinator Merita Rawlyk are delighted with the results of the resident walking program.

# About your Health Service



## From the CEO

On behalf of West Gippsland Healthcare Group it gives me great pleasure to present the 2013 Quality of Care Report. This year we have released this report at the same time as the Annual Report. While the Annual Report contains mostly information required by Government, the Quality of Care Report allows us to provide more information and feedback to the community about what we do, what we do well and areas

where we are aiming to improve. For these reasons, the Quality of Care report is more widely circulated. Copies of the Annual Report are available from the Hospital, or you can access via our website [www.wghg.com.au](http://www.wghg.com.au).

2013 was an important year for WGHG. We worked closely with the Department of Health to develop a shared understanding of the role and function of WGHG and the growing population and demand in this region of Gippsland. While doing this we had to reign in surgical activity, with further pressure when the Commonwealth and State Governments had their well-publicised arguments over health funding in Victoria. While the surgical waiting list grew, we were very pleased with the announcement of significant growth funding for 2013/14, which will allow us to increase our surgery in a sustainable fashion.

## Hand hygiene reduces infections

Hand hygiene continues to be one of the most important strategies embraced by staff in reducing infection across our organisation. We take hand hygiene very seriously. Our Infection Control team provides competency based education packages based on the international best practice model "5 moments for Hand Hygiene" and all staff are required to complete this each year.

To ensure that education translates into practice, our Infection Control team conduct regular observation audits that are compared to the Department of Health minimum standard of 70%. This year, WGHG achieved a Hand Hygiene audit result of over 80%.

We also celebrated the completion of the Emergency Department, with its formal opening in May by the Minister for Health, the Hon. David Davis. Despite the building work, we still recorded more than 20,000 patients in the Department for the second year in a row.

The other major milestone for 2013 was having more than 1,000 births, the most in any Hospital in Gippsland. This was a remarkable achievement by the obstetricians, midwives, paediatricians and all of the other clinicians, volunteers and staff involved in obstetrics. Their capacity to cope with this huge increase while maintaining the quality of care reflects their dedication and skill.

I use this opportunity to acknowledge the support and leadership of the Board of Directors, the enthusiasm of the Community Advisory Council and the energy of the many volunteers who support WGHG. Finally, I thank the staff, including

visiting medical staff, for their efforts and commitment to their job and our community. I trust this report showcases some of their efforts.

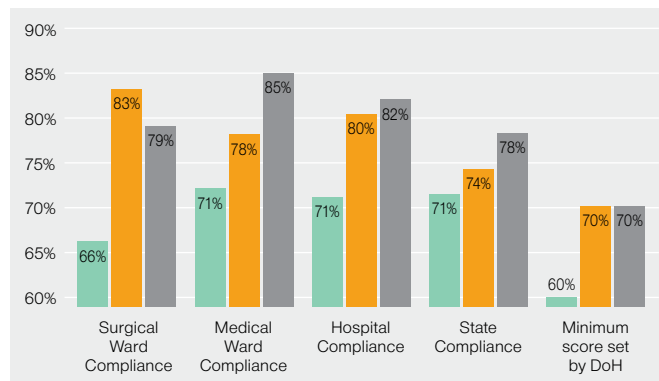
### Dan Weeks

Chief Executive Officer

**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



2011 2012 2013

## 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.

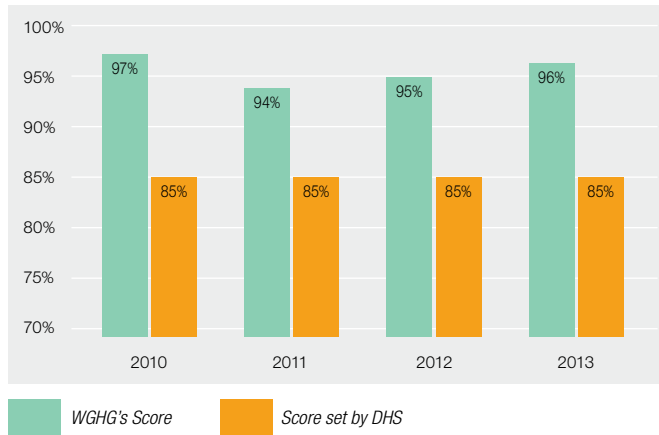
This year we:

- Employed a total of 1,360 staff (a 3.66% increase from the previous year)
- Attended to 20,071 Emergency Department presentations
- Performed 3,078 surgical operations



# Cleaning Standards

## Cleaning Standard Score



A clean environment, clean equipment and the best clinical practice are the cornerstones in reducing the risks of people developing infections whilst in Hospital. Our Infection Control team ensures work surfaces, work environments and new equipment are easy to maintain and clean.

We conduct monthly internal audits and annually are audited by an approved external auditor. Full compliance is achieved as per the requirements by the Department of Health cleaning standards.

WGHG has consistently scored above the minimum target of 85%. In June 2013, our score was 96%.

## Medication Safety

Medications are administered by a variety of different methods, which at times can make medication management a high risk area. We continuously monitor our medication management processes against national standards to ensure compliance. Over the past year, we have introduced two new medication safety initiatives.

**60 new intravenous pumps** have been programmed with a drug library that contains built in safety parameters for the delivery of a range of intravenous medications. The program creates a barrier that prevents staff entering the wrong rate and reduces errors relating to medications being given too quickly or too slowly.

**An electronic prescribing system** project is underway with a team of key staff working with equipment suppliers to establish a system for our Hospital. This exciting new initiative is expected to reduce the number of errors relating to the administering of prescription medication.

In addition to the new technology we:

- ❑ use the evidence based National Inpatient Medication chart which is aimed at improving documentation so medication instructions are clearer
- ❑ regularly review policies, procedures, protocols and guidelines that guide staff so they adhere to best practice
- ❑ provide regular education programs at orientation and throughout the year to keep staff informed
- ❑ have competency based training programs to check nursing staff are able to correctly calculate medication doses
- ❑ conduct a range of different audits to check staff are complying with policies
- ❑ actively encourage staff to report and discuss medication errors
- ❑ analyse errors to identify why they occur and look at opportunities for improvement.

*National standards puts a spotlight on medication safety. The new National Safety and Quality Health Service accreditation process focuses on preventing harm from medication errors - as per Standard 4.*



One effective process for reducing errors has continued to be the bi-weekly INSPIRED meetings. This meeting of Nurses, Doctors, Pharmacy staff and Physicians provides a learning environment and engages junior staff in the review of errors and issues in relation to medication management. Summaries of discussions at the meeting are then circulated to other staff via the INSPIRED newsletter as a way of communicating 'lessons learnt'.

Identified 'lessons learnt' this year include the importance of;

- ❑ using dosage guidelines
- ❑ correct documentation when prescribing
- ❑ recording allergies correctly.



# Patient Safety

## The New Push for Antimicrobial Stewardship

By Dr Daniel Stefanski



I recently saw yet another newspaper article about the rise of the "superbugs" as well as three or four excellent documentaries on TV.

Of course, sensationalist pieces about aggressive or resistant infections have made great headlines for decades.

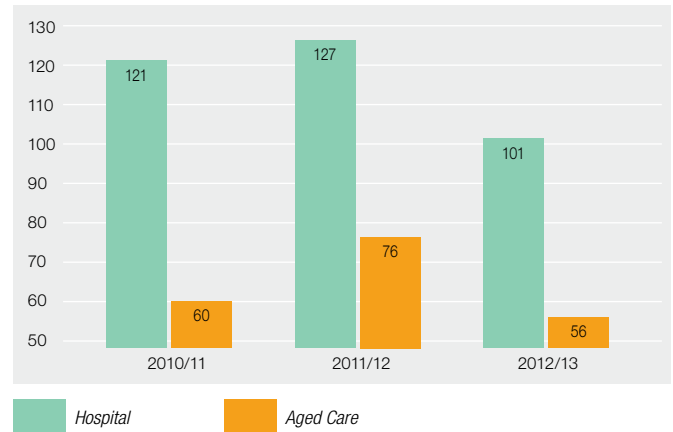
What needs to be highlighted is that while modern medicine has made impressive gains, the unregulated use of antibiotics has imminent dangers.

Due to infections becoming resistant to antibiotics, some infections are becoming untreatable and an increasing number of patients may need pre-1940 style treatments with surgery as the last resort.

Hopefully, there will be an increase in awareness and a shift in community attitudes to antibiotic use. The timing couldn't be better, with the Australian Commission on Safety and Quality in Healthcare (ACSQHC) mandating every hospital in Australia to have an Antimicrobial Stewardship program in place this year.

Antimicrobial Stewardship is a systematic approach in a healthcare setting, to ensure that patients receive the right antibiotic, at the right

## Number of Medication Incidents



The number of medication incidents at West Gippsland Hospital continues to decrease each year, with a 20% reduction over the past 12 months.

The number of medication incidents in Aged Care reduced by 26% compared to 2011/12.

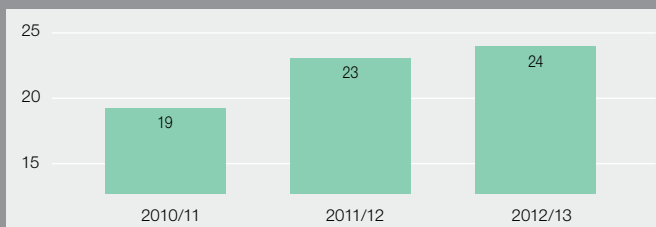
dose, at the right time, and for the right duration. The principles of Antimicrobial Stewardship apply in a wide range of settings including Hospitals, residential care facilities, general practice clinics, agriculture and veterinary settings, as well as at home and in the community. ACSQHC is targeting Hospitals in 2013, and these initiatives and principles will involve everyone from intensive care physicians to pharmacists, nurses, cleaners and patients.

How big is the problem here in Australia? According to the ACSQHC, up to 50% of antibiotic courses given are considered inappropriate. The evidence is clear that increasing antibiotic use is the driver for increasing antibiotic resistance. This can result in excess lengths of Hospital stay, higher death rates and spiralling health-care costs.

Effective Antimicrobial Stewardship programs and infection control have been shown to lead to an 22–36% improvement in antibiotic use and patient outcomes.

So, this year WGHC will be assessing and auditing our practices and working collaboratively to protect the value of antibiotics – one of the golden discoveries of 20th Century medicine.

## Hospital Acquired Pressure Injuries



## Preventing Pressure Injuries

A pressure injury is a term used to describe an area of skin that has been damaged as a result of constant pressure, poor blood flow, rubbing or chafing of the skin. The injuries can range from a reddened area (Stage 1) to deep sores (Stage 4) that affect the underlying tissues. The longer the area is starved of blood, the worse the injury.

People of all ages are at risk of developing pressure injuries. The very sick, elderly and premature babies are very vulnerable and in these patients the early stages of a pressure injury can begin to occur very quickly. Once the deeper tissues are damaged they can take a long time to heal and in some cases can lead to more serious complications.

### 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

All patients and aged care residents are assessed for the risk of developing a pressure injury and as part of their care plan, pressure relieving strategies if needed are implemented.

Some people arrive at Hospital or aged care facility with existing pressure injuries. In these cases the focus of care is on healing the injury while preventing the development of new ones.

As part of our patient safety program, all pressure injuries are reported on our incident reporting system. This includes those patients that arrive with an existing pressure injury and those that occur while in Hospital (Hospital acquired) or in our aged care facility.

If a pressure area is identified, nursing staff re-assess the patient, monitor the areas more closely and implement additional pressure relieving devices such as special mattresses or gel pads to relieve the pressure and reduce further harm.

This year there were 24 incidents of Hospital acquired Stage 1 or Stage 2 pressure injuries reported in Hospital. There were no serious Stage 3 or Stage 4 pressure injuries.

## Aged Care Quality Indicators

Our Aged Care Services (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.

To enable a comparison with other health services, these indicators are scored as a rate per thousand bed days. In all indicators WGHG Aged Care Services performed better than the state average.

Results (Dec – Feb) Quarter 3 - 2013	Andrews House	Cooinda Lodge	State Average
Incidence of pressure injuries Stage 1 & 2 per 1000 bed days	0.22	0.00	0.68
Incidence of pressure injuries Stage 3 & 4 per 1000 bed days	0.00	0.00	0.09
Incidence of multiple medication use (residents being on more than nine medications per 1000 bed days)	2.22	2.43	4.76
Incidence of falls per 1000 bed days	5.54	5.41	7.24
Incidence of falls with serious harm per 1000 bed days	0.00	0.00	0.16
Incidence of unplanned weight loss per 1000 bed days	0.66	0.19	0.78
Incidence of unplanned weight loss over 3 consecutive months per 1000 bed days	0.44	0.00	0.75



Cooinda Lodge - Warragul



Andrews House - Trafalgar

## Meet Louise Allen, Nurse Educator



Louise works at WGHG as a Registered Nurse and Nurse Educator with a specialist role in blood safety. Each year, Louise completes the Department of Health Blood Safety Audit, which compares existing Hospital practices against the National guidelines. Where there is a significant patient reaction to a blood transfusion, WGHG reports these to the Serious Transfusion Incident Reporting System (STIR) at the Department of Health.

Findings of the 2013 Blood Safety Audit include:

- ❑ 90% of patients surveyed, felt they were involved in the decision making process to receive a blood transfusion, compared to an 86% state average
- ❑ 93% of patients had possible blood transfusion risks explained to them, compared to 86% state average
- ❑ 97% of patients recalled being asked to give their consent to receive a blood transfusion versus 80% state average.

Also as part of this audit, WGHG revised our Patient Blood Transfusion Consent Policy in order to improve our compliance with best practice standards.

Louise's role is to:

- ❑ train and educate staff in best practice blood storage, transportation, transfusion administration and techniques
- ❑ ensure systems are in place to provide patients and their families with current information about blood transfusions
- ❑ develop and review policies and procedures relating to blood transfusions
- ❑ periodically audit medical records to ensure all the appropriate steps have been taken and documented
- ❑ audit requests for transfusions to ensure appropriate documentation and that no resource is wasted
- ❑ provide reports on policy requirements, education sessions and audit results to the Blood Transfusion Committee which monitors the Blood Safety Program
- ❑ investigate any transfusion related incidents or reactions such as fever or other symptoms and report on these to the Blood Transfusion Committee
- ❑ attend Department of Health and Red Cross blood transfusion safety update sessions.

*Each year many blood and blood transfusions are given to acutely ill patients at our Hospital. These blood and blood products are a vital resource in patient care. It is important that these products are delivered and administered to the patient safely and the resource is not wasted. WGHG uses approximately 70 units (or 35 litres) of blood per month*



# Patient Safety

## Continuing to Reduce Harm Caused by Falls

WGHG's falls prevention program is based on the best practice model developed by the Victorian Quality Council.

The program has 5 steps:

1. Risk screening
2. Risk assessment
3. Care planning to reduce the risk of a fall occurring
4. Steps to manage the person after a fall
5. Steps to reassess them and modify care plans.

Over the years WGHG has established many initiatives to reduce falls and the harm caused by falls. One of these strategies is to maintain or build up a person's 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. In recognition of this, WGHG uses Allied Health Assistants to provide a functional maintenance (supervised exercise) program in the medical and surgical wards.

The prevention program also extends to the care of people after discharge with a staged model of care aimed at independence. People at risk of falling on discharge from Hospital, are referred to a Strength and Conditioning program run by the District Nursing Service. The Community Services Physiotherapists then take over providing a 14 week "Make the Move" program in a community based setting. People are then encouraged to continue to exercise independently.

The challenge for WGHG is to come up with new ways to further reduce the number of falls and the injuries they cause. One new initiative is the 'Releasing Time To Care' project. The project focuses on things such as improving work practices to free up time for direct care delivery and increased involvement of care delivery staff in analysing falls, the reasons why they occur plus the development of strategies to prevent them from occurring.

This year there was a 12% reduction in the total number of falls reported in Hospital compared to 2011/12.

While the number of falls resulting in minor lacerations and bruising remained similar to last year, there were no patients in Hospital that sustained a serious injury such as a fracture.

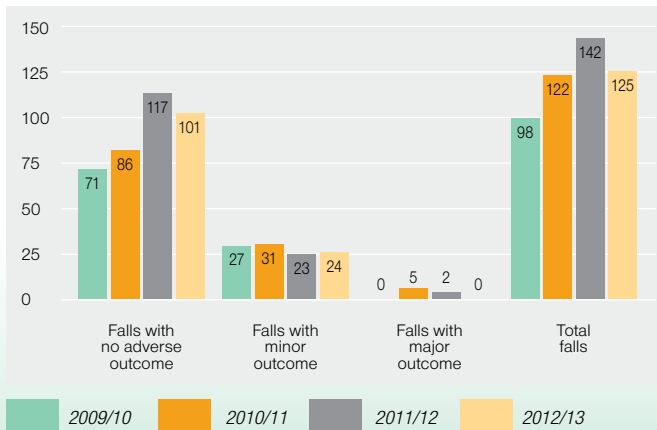
The program is ongoing and regular evaluations and audits monitor staff compliance through to screening and assessment steps. WGHG continues to focus on preventative strategies.

Some of the many falls prevention and harm minimisation strategies used at WGHG include:

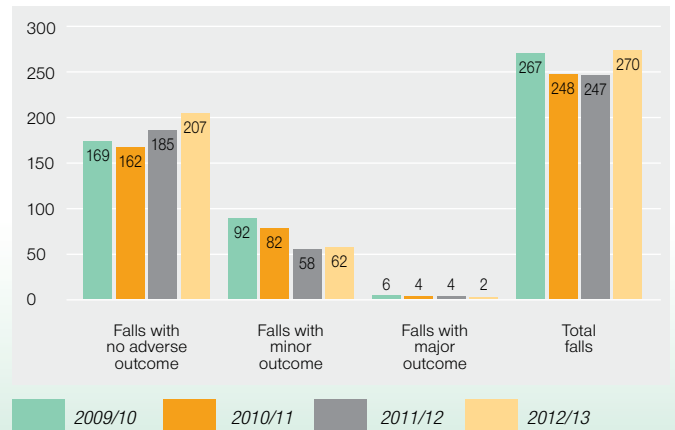
- Lowering beds so they are closer to the floor
- Using special very low beds that lower to the floor
- Where possible, placing patient beds closer to the nurses desk so they can be observed more closely
- Regularly checking on patient's needs
- Using alarms to alert staff when patients are getting out 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 compliance to screening and assessing patients risk of falling
- Reporting falls to capture occurrence's and contributing factors for analysis and learning

*National standards put a spotlight on falls. The new National Safety and Quality Health Service accreditation process focuses on preventing falls and harm from falls in Standard 10.*

## Hospital Inpatient Falls Outcomes



## Aged Care Falls Outcomes





# Managing Demand

## Our Emergency Department

Despite the building works and redevelopment that occurred in the Emergency Department (ED) throughout the year, our ED team again managed demand with over 20,000 patient attendances.

The \$3.7 million department expansion now has 16 (previously eight) treatment spaces, including a second resuscitation cubicle, a new isolation cubicle, a behavioural assessment room, an additional treatment room and a new staff meeting room.

All cubicles are fitted out with new state of the art equipment including new beds and monitoring systems. The department is modern and bright with greater patient comfort and privacy, as well as a better work environment for staff. The ED is now better positioned to meet the growing needs of our community.

This year 63 patients (admitted and non-admitted) had a length of stay in ED of over 24 hours, compared to 106 last year.



*The new look Emergency Department opened in November 2012.*

## Maternity Matters

As a family centred, contemporary facility, the Maternity unit (Ward 5) is dedicated to serving the needs of the West Gippsland community, whilst always striving for excellence. The health care professionals of this unit respect the values, beliefs and rights of the individual and are committed to providing competent, compassionate care for all those we attend.

The cross section of clients who attend Ward 5 include:

- Families who choose to birth at West Gippsland Hospital
- Newborns requiring 'Special Care Nursery' care
- Women requiring gynaecological surgery
- Women requiring ongoing breastfeeding advice and support following discharge from hospital.



*6 day old Chase Miller in the level 2 special care nursery*

## Clinical Governance

West Gippsland Healthcare Group is committed to an open and transparent review of the quality of our care through a comprehensive clinical governance framework.

The Clinical Governance Committee is the overarching group responsible for monitoring the many aspects of the clinical governance framework.

Membership of the committee includes; Board members, Clinical Executive Directors, Medical, Nursing and community health representatives, Quality Manager, external representatives and importantly consumers.

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
- ❑ Ensuring staff access to current best practice policies, procedures and guidelines

The committee reviews the many elements of the Clinical Governance program such as:

- ❑ Monitoring data
- ❑ Showing staff have the correct qualifications, registrations, experience, credentials and competencies to undertake the tasks they are employed to do
- ❑ Reviewing the results of a large number of audits and clinical indicators that measure our clinical performance
- ❑ Receiving reports on a range of projects to implement best practice and improve patient care
- ❑ Receiving reports on clinical risks, incidents and complaints and how these have been managed to reduce risks, incidents and improve care.

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.

Each week, the Clinical Risk and Evaluation Committee (CARE) team meets to review clinical incidents, complaints and data.

Where a serious incident occurs the CARE council 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 the future.

The most common type of clinical incidents reported is falls (43% of all clinical incidents reported).

Dr Liz Mullins, Director of Medical Services explains "Our approach to quality clinical governance is that we measure and audit, we find the most appropriate benchmark and we actively compare with the best, comparable services and our WGHG experience over time".

Describing how WGHG monitor progress, Liz says: "We colour code our progress so we do not 'skip over' less than optimal results. Our Q-dash Report (Quality Dashboard), looks to identify, measure and monitor our outcomes. We are proud to share our strengths and are humble enough to know our challenges, but keen enough to have a plan and a process to improve".

# Reaching Everyone

## Home Based Dementia Assessments now an option

Assessing people with dementia can be complex and challenging for all concerned. The Cognitive, Dementia and Memory Service (CDAMS) have got the balance right.

CDAMS offers the option of an initial assessment in a home environment, allowing family to attend plus the benefits of a familiar environment to assist with providing relaxed and comfortable surroundings. The CDAMS team can explain what the assessment is about and provide the opportunity to answer all questions and address any concerns.

The team are very proud to have received such positive client feedback throughout the year who shared how much they appreciated and felt comfortable with the assessment process.

## Responding to Diversity

Education is the key to responding to the culturally diverse needs of our patients. Each year, WGHG reviews the cultural diversity plan which addresses the six standards of the Department of Health's Cultural Responsiveness Framework. The plan is reviewed annually by the Community Advisory Council (CAC). As part of this plan, WGHG engages with Gippsland Multicultural Services to keep abreast of any changes with the cultural demographics of the community.

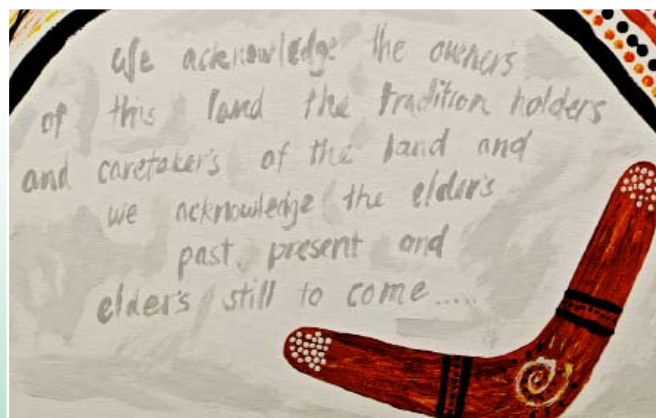
Staff are guided by a Cultural Diversity policy and Interpreter policy. Clinical assessment tools include cultural considerations that assist staff to plan patient, resident or client needs. The use of interpreters ensures people from culturally and linguistically diverse backgrounds are able to communicate effectively with staff.

WGHG uses a nationally accredited interpreter service accessed via phone or in person. To ensure customers and patients are properly informed about their health care, WGHG staff are able to access written health information on a variety of subjects and languages.

In recent Victorian Patient Satisfaction survey results, it was noted that a very small number of patients were not asked if they would like an interpreter. WGHG has now engaged the Gippsland Multicultural services to run a series of staff training sessions on the use of interpreters.

## Rural Allied Health Service Update

This year saw an increase in funding from Home and Community Care (HACC) for Occupational Therapy services within the Rural Allied Health Service. As a result, the service has been able to employ an additional Occupational Therapist, which has significantly decreased waiting times for service from 12-15 weeks to an average waiting time of four weeks. As well as decreasing waiting list times, an exciting new program also commenced. In conjunction with Baw Baw Shire, HACC services targeted clients specifically identified within the community who required additional advice on daily activities such as education, life strategies and support, to enable them to continue to live independently. The initial results of the program have been very promising.



## New entertainment for kids

Thanks to the generous support from our community throughout the year, Ward 2 Paediatrics Unit were able to purchase six new flat screen digital TV's.

This has allowed our young patients to have greater choice of free to air TV stations, including ABC 3 for Kids. Our parents and young patients have been delighted with the upgrade from the old TV units. Along with new toys, books and puzzles also donated during the year, we're able to keep our young patients well occupied.



*The Baw Baw team were among the numerous community supporters to raise money for toys, books and puzzles for the Paediatrics Ward.*

## Improving Care for Aboriginal People

WGHG continues to meet the four key result areas under the Improving Care for Aboriginal People program. To help close the gap in aboriginal health, WGHG undertakes a number of activities.

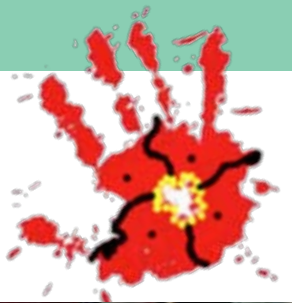
We have continued to strengthen our relationships with the local aboriginal community. Two local community members are on the Community Advisory Council and WGHG staff attend the weekly Kurnai and West Gippsland Aboriginal advisory meeting.

WGHG's Aboriginal Health Liaison Officer provides local cross cultural training for new staff at orientation, plus cultural advice for staff where required as well as assisting aboriginal people during their stay in hospital and during discharge and referral processes.

## What is Health Literacy?

*Health Literacy is the ability to read, understand and use healthcare information to make decisions and follow instructions for treatment.*





## Staff Pledge Support

The Closing the Gap strategy endorsed by the Australian Government in 2008, is to achieve Indigenous health equality by 2033 and aims to reduce Indigenous disadvantage with respect to life expectancy, educational achievement and employment outcomes. The average difference in life expectancy between indigenous and non-indigenous Australians is an appalling 17 years.

On the 8th May, WGHG staff showed their support for Closing the Gap by attending a 'Pledge Your Support' day. Another new exciting program to commence this year was the Aboriginal Traineeship program.

Cindy Mathers, Aboriginal Mentoring Program Co-ordinator explains: "In the last six months we have had four Aboriginal trainees commence traineeships at the Hospital. One is in the Linen Service and three are in the Allied Health Department. This has been a very exciting opportunity to support our local Aboriginal community to gain access to employment in the local health and community services sector. The presence of the trainees in our organisation has helped us get a better understanding of the Aboriginal culture, and the many barriers they face to improve their health, wealth and opportunities for a better life".

"We are learning from each other. Another coup was to have the DRUMBEAT Facilitator training delivered in Warragul and thanks to the funding from Gippsland Medicare Local, we have trained ten Aboriginal community members to deliver their own training in schools. In the future, we hope to support the local Aboriginal community to use the skills learned in the DRUMBEAT Facilitator training to develop their own community mentoring program".



(L-R) Joanne Campbell, WGHG Vice Chair with Sue O'Shannessy, Koori Maternity Services, Ramahyuck and Linda McCoy, WGHG Director of Community Services, sign up for Closing the Gap in May 2013.



## "Team Rounds" improve communication

This year, Ward 3 introduced a new initiative called "Team Rounds". The aim of the daily "Team Rounds" is to improve communication with patients and their families through a co-ordinated multidisciplinary approach to ongoing patient management. The results so far have been pleasing with improved patient outcomes, shorter length of Hospital stays and a more structured discharge plan. Patients and their families have benefited from being informed of their progress and when they expect to be ready to go home.

(L-R) Nurse Laura Flahavin, Dr Megan Brown, patient Anna Lesyk, Cheryl's Leigh with daughter Sapphire (from Warragul Choc Shop) launch the communication improvement program in Feb 2013.



## Promoting Good Health

Health promotion includes the development and introduction of health literacy training for all employees via staff orientation and a general staff training program. This year, there has been an increased focus on ways WGHG staff can assist patients with low health literacy, which accounts for about 60% of the population. WGHG's health literacy work is leading the way forward in Gippsland Health services.

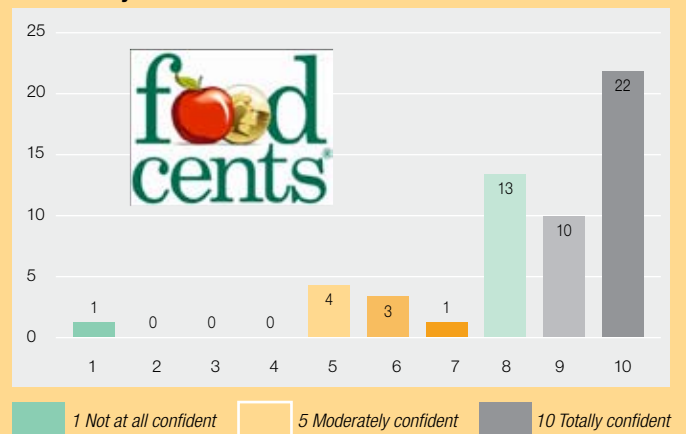
Throughout the year, WGHG collaborated with Baw Baw Shire and other health professionals to introduce the FOODcents program to the Baw Baw region. FOODcents is an education program that helps families to achieve a healthier diet and save money on their grocery shopping.

Evaluation of the FOODcents program showed that 88% of participants said they would change how they shopped for food in the future. It was encouraging to note that on average, people's confidence that they could afford to have a healthy diet on a budget, increased by 74% after completing the FOODcents program. The program was very well received by the community and will aide individuals and families to make good long term health improvements.

The Heart Foundation Walking Groups continued to be strongly supported by WGHG again throughout the year. Several new groups have begun including a group at Coinda Lodge, as well Neerim South, Yarragon, Drouin and Warragul.

The Health Promotion team also continues to work with community gardens, school breakfast clubs and community kitchens as well as many smaller projects to promote the importance and benefits of good health and wellbeing.

### After FOODcents, how confident are you that you could cook low cost healthy meals?



2012-13 Foodcents survey results. 40% were totally confident they could cook low cost healthy meals, while 83% rated themselves 8, 9 or 10/10 for confidence.

# 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 2012/13 WGHG has achieved 100% of the objectives set under the five required standards.

## Standard 1 Demonstrating commitment

- 8/8 objectives met (Target is 6/8)

WGHG has:

- ▣ a Community Participation Policy in place which aligns with the Departments Consumer Participation Framework
- ▣ a Consumer participation plan revised - 2013
- ▣ a Person Centred Care Policy developed - 2013
- ▣ staff training at orientation on person centred care - commenced 2013
- ▣ contributes to the implementation and monitoring of the local primary care partnership strategic plans
- ▣ a variety of approaches to record and monitor consumer participation
- ▣ a cultural responsiveness plan that meets the six requirements
- ▣ an Improving Care for Aboriginal and Torres Strait Islander Patients Program meeting the four key result areas
- ▣ a Disability Action Plan
- ▣ processes in place to consult and involve consumers
- ▣ staff to build the capacity of other 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 84% versus target of 75%. State average 81% (Wave 23)
- ▣ 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 100% versus target of 90% (Wave 23).

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

- ▣ 87% 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'. 2% more than last year (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%
- ▣ Health Literacy Training package delivered to staff and online learning package was developed.

## Good news for Continence

Earlier this year, the Continence team were successful in gaining funds from the Department of Health, to assist with reducing the Continence program waiting list. Another benefit from funds received was for a one off scholarship to improve staff knowledge and clinical practice skills. Continence team member Helen was pleased to accept the scholarship to undertake and complete a Graduate Certificate in Continence.

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

- WGHG met 6/6 of the dimensions required (100%) versus a target of 75%

The Consumer Advisory Council (CAC) meets monthly and provides a forum to regularly seek consumer input in relation to people's experiences, service delivery and strategic planning.

Consumers are involved in:

- ▣ reviewing consumer related policies
- ▣ providing commentary and advice on written patient information
- ▣ reviewing the results of the Victorian Patient Satisfaction Monitor
- ▣ providing advice on improving the organisations web site
- ▣ assisting in monitoring the progress on the Cultural Diversity Plan
- ▣ participating in organisational planning days
- ▣ providing a link to the Aboriginal community
- ▣ participating in the Ethics Committee, Clinical Governance committee, Audit and Risk Committee and Medical Credentialing Committee
- ▣ advising on a variety of quality activities such as consumer surveys and projects.

This year the CAC has begun working directly with Clinical Department Managers to identify ways that 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 CAC have developed 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 the CAC.

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

## 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 surgery or a procedure
  8. Make sure you understand what will happen if you need on exactly what will be done
  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.

# Accreditation

## Fully focused on the new National Standards

WGHG continues to provide robust quality and safety systems. WGHG participates in several accreditation processes which are conducted at intervals of one to two years depending on the type of accreditation. The accreditation surveys are conducted by external people and check that WGHG systems meet industry standards and safety and quality processes continue to improve.

This year WGHG staff are hard at work putting in place systems and processes to meet the new national standards. These ten new standards are a significant change to previous accreditation processes and focus very much on clinical activities which are deemed high risk.

In January, WGHG was successfully accredited under the Department of Human Services "Community Services Standards". During the year, both Andrews House and Cooina Lodge Aged Care Residences also underwent two unannounced spot surveys and successfully maintained full accreditation.

Current accreditation ratings are as follows:

- Full Aged Care accreditation rating with full compliance for 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 Warragul Linen Service
- Community Services registration under the Children, Youth and Families Act, 2005
- Full Food Safety certification
- Baby Friendly Hospital Initiative Accreditation.

## The 10 National Standards



**STANDARD 1**  
Governance for Safety and Quality in Health Service Organisations



**STANDARD 2**  
Partnering with Consumers



**STANDARD 3**  
Preventing and Controlling Healthcare Associated Infections



**STANDARD 4**  
Medication Safety



**STANDARD 5**  
Patient Identification and Procedure Matching



**STANDARD 6**  
Clinical Handover



**STANDARD 7**  
Blood and Blood Products



**STANDARD 8**  
Preventing and Managing Pressure Injuries



**STANDARD 9**  
Recognising and Responding to Clinical Deterioration in Acute Health Care



**STANDARD 10**  
Preventing Falls and Harm from Falls

## Community Advisory Council - Chair's Report

It has been another exciting year for consumer engagement at West Gippsland Healthcare Group. The Community Advisory Council (CAC) has continued to find new opportunities to contribute to the work of WGHG by increasing consumer, carer and community participation in our health service.

While the CAC mainly has an advisory role, this year has seen more CAC members take a hands-on role in such things as assisting in work to meet Accreditation and National Standards, and contributing to the Disability Plan and the Cultural Diversity plan. We have also undertaken several Consumer Participation Service Reviews, where we review the provision of care in various hospital departments and wards, from a consumer perspective. The CAC has also contributed to the development of this Quality of Care report.



This year has seen WGHG appoint consumers to even more of its committees and working parties, including the Written Health committee, Clinical Governance committee and Credentialing committee.

We have also established a Consumer Register which means even more consumers (including current patients, past patients, carers and any other members of our community) can have a voice in how WGHG can best meet the needs of its community.

This year, we have found opportunities to network with consumer groups from other Victorian health services, and we are looking forward to finding more partnership opportunities in the future. Working together with other CACs means learning from each other's experiences and building on each other's strengths. Strong partnerships benefit everyone.

We recently developed a Community Participation Plan for WGHG which reflects the important work already being done, and develops our potential for future achievement.

We were very proud of the recent results of the Victorian Patient Satisfaction Monitor (VPSM). The VPSM monitors patients' levels of satisfaction with our care and services. The latest results showed that WGHG scored statistically significantly higher in the area of Consumer Participation than comparable Victorian Hospitals. This is a great result that we look forward to building on in future.

We look forward to another exciting and productive year to come.

*Rosemary Joiner*

Chair, Community Advisory Council



# We Listen and Welcome Your Feedback

## Patient Satisfaction Monitor

Many WGHG departments and services conduct surveys throughout the year to gather customers 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 of Health. The survey provides data on performance and is then compared to all other Victorian Hospitals.

### Best performing areas:

- Courtesy of staff
- Help was received for pain
- Personal safety
- Being treated with respect
- Helpfulness of hospital staff in general.

### Areas we need to improve on:

- Delay before admission
- Facilities for storing belongings
- Temperature of hot meals
- Quality of food
- Waiting room comfort

We encourage people to give us feedback, especially if things don't go to plan or as they expect. We review all complaints received, to help

us determine where issues are occurring and what we can do to rectify situations occurring again. All complaints received are responded to.

An example of this was a complaint that was received in relation to a day surgical case, where a patient had indicated that they would drive themselves home on their health questionnaire. This was not picked up by staff at the time and the patient drove themselves home. Upon receiving the complaint, a review was undertaken of the information provided to people having surgery and the paper work and instructions about what to do post surgery was strengthened.

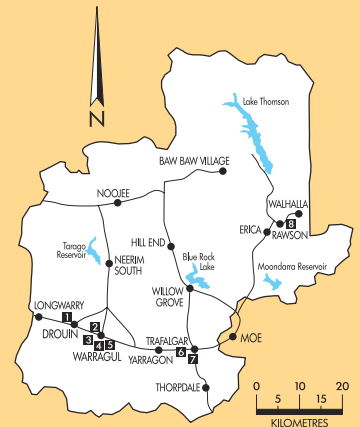
### The number of complaints registered are as follows:

2009/10.....	95
2010/11 .....	64
2011/12.....	75
2012/13.....	67

There are many ways for you to share your feedback with us, including any concerns you may have or what you like or don't like.

### You can provide your feedback a number of ways including:

- Speak to one of our friendly staff members
- Complete a compliment or complaint brochure available at all our sites
- Write us a letter
- Email us at [info@wghg.com.au](mailto: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](http://www.wghg.com.au)

### 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](mailto: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 [wgcgsd@wghg.com.au](mailto:wgcgsd@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](mailto: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](mailto: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](mailto: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](mailto: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](mailto:traf.chs@wghg.com.au)

### 8. COMMUNITY HEALTH SERVICES

#### Rawson Community Health Centre

Lehmann Court Rawson 3825  
ph 03 5165 3236  
fax 03 5165 3268  
email [rawson.chs@wghg.com.au](mailto:rawson.chs@wghg.com.au)