



**Swan Hill**  
District Health  
*my hospital*

# 2017-2018 QUALITY ACCOUNT REPORT



## Our Values

**Respect**

**Professionalism**

**Care**

**Commitment**

**Collaboration**



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# CEO Introduction

## A message from the CEO.....

It is my pleasure to be part of an excellent team of staff who continue to strive toward improving our service for our community.

Our **VISION STATEMENT** guides us with our overall purpose:

**“ Provide appropriate services  
in the right setting by**

**dedicated people with and for  
our community ”**

This statement reminds us that our services need to be appropriate so we do not attempt to deliver services which are unsustainable or unsafe.

**The right setting** for our services challenges us to consider the location and physical environment for our appropriate services.

**By dedicated people** refers to all our staff and volunteers and visiting consultants who are dedicated to provide high quality care to our residents, patients and clients of Swan Hill District Health.

**With and for our community** reminds us all that we are all working together with our community to provide the best services we can for our community. Beneficiaries are the community we serve.



**Swan Hill  
District Health**  
*my hospital*



**“ Provide appropriate  
services in the right  
setting by dedicated  
people with and for our  
community ”**

## Our Values

The way we provide our services is underpinned by our values –

Respect	Professionalism	Care	Commitment	Collaboration
This means that you interact with others as you expect them to interact with you.	This means we deliver services with integrity, honesty and competence.	This means that we provide a standard of service and support which we would expect for ourselves.	This means that we are dedicated to the promoting and success of the organisation.	This means working together in a positive, supportive manner.

Collectively our staff have described the behaviors we want to ensure our values can be demonstrated by our actions. Our staff are saying that they want to work in a health service that is open to improve its culture through respectful communication, where effort is acknowledged and where we practice a WE rather than ME and THEY culture. We want to make sure the behaviors we are trying to imbue truly connect with our own values and help achieve the goals that we have set.

We are in the second year of our Hardwiring Excellence Program where our staff are learning how to support each other to model the behaviours that they have identified for their teams and in line with our organisational values.

Our culture will be driven by our shared values, how we approach our work and how we interact with each other.

It tells not only what is valued by our health service but what is and is not permitted.

# Improving Cultural Responsiveness & Safety

Swan Hill District Health and Mallee District Aboriginal Health have a Memorandum of Understanding to June 2019 with the aim to improve health services and outcomes for Aboriginal & Torres Strait Islander people.

The Aboriginal Hospital Liaison Officer (AHLO) provides support for community by promoting and assisting in accurately identifying Aboriginal & Torres Strait Islander people, ensuring equal access to healthcare and facilitating referrals. The AHLO also provides support and guidance for staff to ensure culturally appropriate care is provided. This includes support with inpatient admissions, accessing SHDH services including other medical and community services.

Ms. Debra Chaplin, Aboriginal Hospital Liaison Officer (AHLO), is representative on a number of relevant working groups including the Mallee District Aboriginal Service Advisory Group, Swan Hill Aboriginal Network, Community Partnership Strategy Advisory Group, Swan Hill Koori Justice Network and Bringing Them Home.

## Activities include:

- 2 Water Bottles for the summer high temperature period. This allowed Ms Chaplin to visit vulnerable Aboriginal community members to provide two bottles of water and initiate assessment of their circumstances. Outcomes included working with Mallee District Aboriginal Service Second Bite, replacement of a broken air-conditioner, follow up care due to noticing an empty Webster pack. The program has been expanded for the winter period.
- Aboriginal Women in Swan Hill (AWISH) is a self-supporting group managed by the participants who support each other through sickness, hospital stays, birth, grief, disability and life celebrations. AWISH was initiated by Ms. Chaplin who provides support when requested.
- Swan Hill District Health continues to be a subscriber to the Koori Mail and Deadly Vibe magazine with distribution in Emergency Department, Acute Ward, Day Procedure, Allied Health and Renal Dialysis Unit waiting rooms.
  - Training undertaken by Ms. Chaplin includes Older Persons Mental Health First Aide and Understanding Autism.

## FACT

For 2017-18 there were 62 dental referrals from Mallee District Aboriginal Service Medical Clinic resulting in 238 visits.

As well as Health Promotion activities Swan Hill District Health provides direct services to Mallee District Aboriginal Service including Dietitian, Speech Pathology and Podiatry.

The dental referral pathway between Mallee District Aboriginal Service's Medical Clinic and the Swan Hill District Health's Dental Clinic continued for 2017-18 and supports promotion and access to dental services for Aboriginal clients. This referral pathway is especially important for Aboriginal community members who are not eligible to access public dental services with funding allocated from the Aboriginal Health Promotion and Chronic Disease (AHPACC) Program allowing them to prioritise their oral health. This program supports a Korin Korin Balit-Djack Strategic Direction 5.2.1 to improve dental health outcomes for Aboriginal Victorians.

For 2017 -18 there were 62 dental referrals from Mallee District Aboriginal Service Medical Clinic resulting in 238 visits. There were 36 clients not eligible for public dental care however still able to receive free dental care from Swan Hill District Health Dental Clinic.

There have been a number of outcomes around access and dental care which would not have occurred without the support of the AHPACC program due to not being eligible for public dental care. Examples such as the client who had a tooth with an abscess requiring root canal treatment, porcelain crown and returned for remaining three fillings. The client who needed a large number of fillings which couldn't afford and expected to eventually lose all the teeth commenced a dental plan to save all the teeth and the children are also attending the dental clinic now.

Swan Hill District Health has continued to provide a Speech Pathology service to Mallee District Aboriginal Service Swan Hill. This has been in the form of a weekly Tuesday afternoon clinic, involvement in the Early Years play groups and other services provided by Mallee District Aboriginal Service. The Speech Pathology service has seen clients to school age and adults. Parents and carers have been encouraged to refer their child to the service if they have any concerns regarding their child's language, speech and feeding development.

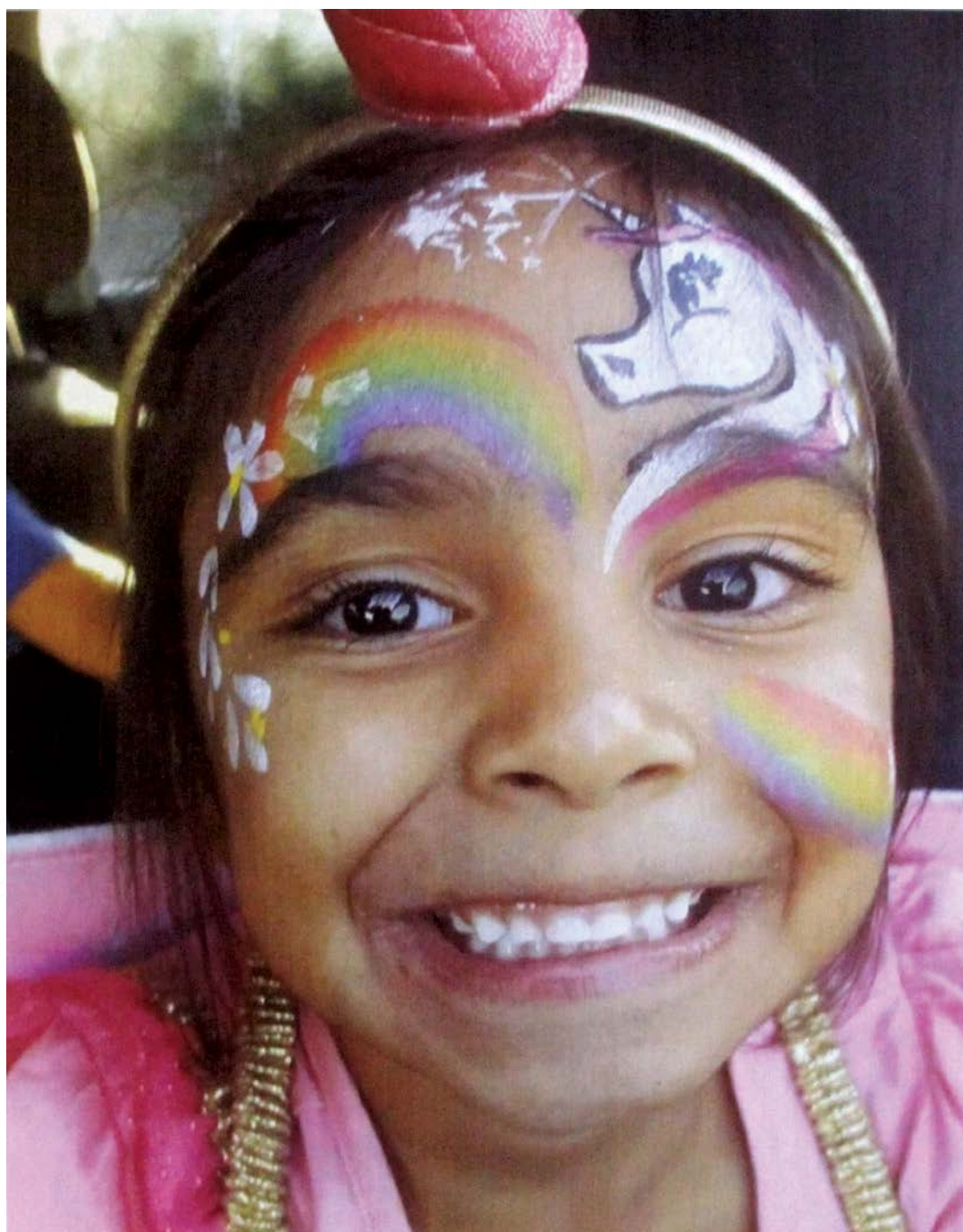
The service has also incorporated educational sessions for staff within the Mallee District Aboriginal Services Departments of Early Years, Family Services and Maternal and Child services. These sessions have aimed to promote the Mallee District Aboriginal Services Speech Pathology service, increase awareness around developmental language delays and provide information on strategies that could be implemented at home to encourage language development. ►

◀ The Speech Pathologist has also attended events organised through Mallee District Aboriginal Services, which have provided a great environment to meet with and create stronger relationships with members of the Aboriginal Community.

The Speech Pathology service has included weekly attendance at Kunawaa Pre-School with aim of these visits to improve access to services for Aboriginal children and their families, who find it challenging to attend the weekly Speech Pathology clinic at Mallee District Aboriginal Service. This has been a successful project, with the majority of parents following up with a referral to the Speech Pathology clinic at Mallee District Aboriginal Service.

The Mallee District Aboriginal Services clinic has also worked as a bridging service to the Speech Pathology clinic at SHDH, with some children being initially seen at Mallee District Aboriginal Service and having follow up therapy at SHDH in order to access additional resources and clinic space.

Swan Hill District Health acknowledges the traditional Aboriginal owners of country throughout Australia. We pay our respects to them, their culture and their Elders both past and present.





# Oncology Rehabilitation Program

In September 2016 Swan Hill District Health through the Physiotherapy Department was successful in obtaining funding through the Loddon Mallee Integrated Cancer Services (LMICS) to embark on a project entitled “Enhancing supportive care screening at SHDH and implementing a cancer specific exercise/education program and referral pathway.”

There has been a substantial amount of research and focus on the benefits of exercise throughout and post cancer treatment even to the point of the, clinical oncology society of Australia putting out a position statement stating; “exercise should be embedded as part of standard practice in cancer care and to be reviewed as an adjunct therapy that helps counteract the adverse effect of cancer and its treatment.” (COSA)

**Table 1**

**Summary of potential benefits of exercise during and/or following cancer treatment.**

Preservation or Improvements	Reductions
Muscle mass, strength and power	Number of symptoms and side effects
Cardiorespiratory fitness	Intensity of symptoms
Physical function	Duration of hospitalisation
Physical activity levels	Psychological and emotional stress
Range of motion	Depression and anxiety
Immune function	Risk of co-morbid conditions
Chemotherapy completion rates	May reduce risk of recurrence
Body image, self-esteem and mood	

Based on this research SHDH physiotherapy department developed the Oncology Rehabilitation Program. This program is a 12 week program that involves an; Initial assessment (1 hour, 1:1 appointment with project lead/ Exercise Physiologist), 10 week program on Monday and Wednesday's 1 hour of exercise each day and 1 hour of education on Wednesdays.

## The education components consist of:

- Exercise for the management of cancer – Exercise Physiologist
- Fatigue management and sleep – Occupational Therapist
- Pharmacological and Podiatry services – Pharmacy / Podiatry
- Nutrition during and post cancer treatment – Dietetics
- Specialist physiotherapy services (Lymphoedema and Continence Physiotherapist)
- Managing anxiety and depression – Counselling Department
- Mouth Care and Speech – Speech Therapy
- Participation in occupation – Occupational Therapy
- Community Health Nurse
- Service options – District Nursing

An initial pilot program ran from the 8/3/17 to 10/5/17 with 12 participants all at varying stages of treatment and from various cancer streams. Due to the positive outcomes of this program, this has now been incorporated in the Physiotherapy and Exercise Physiology Service continuing to run twice a week in a rolling format.

The results from the Oncology Rehabilitation program demonstrated positive outcomes for participants and significant improvements in function and quality of life. The incidental positive outcomes of the project include social support, with a number of participants reporting how much they enjoyed the program. A number of the participants continue to catch up for weekly coffee, 4 months post completion of the program. Many participants have also reported that they wished they had the opportunity to do this program earlier on in their treatment/ diagnosis stage, stating it would have been great earlier on to know what to expect and to also know that they were not “going mad” with the side effects they were experiencing.

# McGrath Breast Care Nursing Service - Wellness program

Clients within the McGrath Breast Cancer Nursing Service have an optional direct referral pathway to the Oncology Rehabilitation Program and to date there has been in excess of twenty referred to the program coordinator from Swan Hill and outlying areas. The benefits have been far reaching and continue after the completion of the program.

Apart from the physical benefits from the exercise component, and information gained from different services there has been positive feedback for the improvement in wellbeing and quality of life for clients trying to return to some sense of 'normal' following a cancer diagnosis.

There has been feedback from clients that they continue the interaction with others by meeting for coffee after the program where support gained from each other has also been important in their recovery.

Returning to wellness post cancer treatment and support for people surviving cancer are important parts of care. The term 'survivorship' is often used. Locally based survivorship strategies are important for our clients and the oncology rehabilitation program is an example of that. For the McGrath Breast Care Nursing Service it has been of great benefit to be able to offer clients a direct link to a wellness program and further interaction with others going through similar treatments.





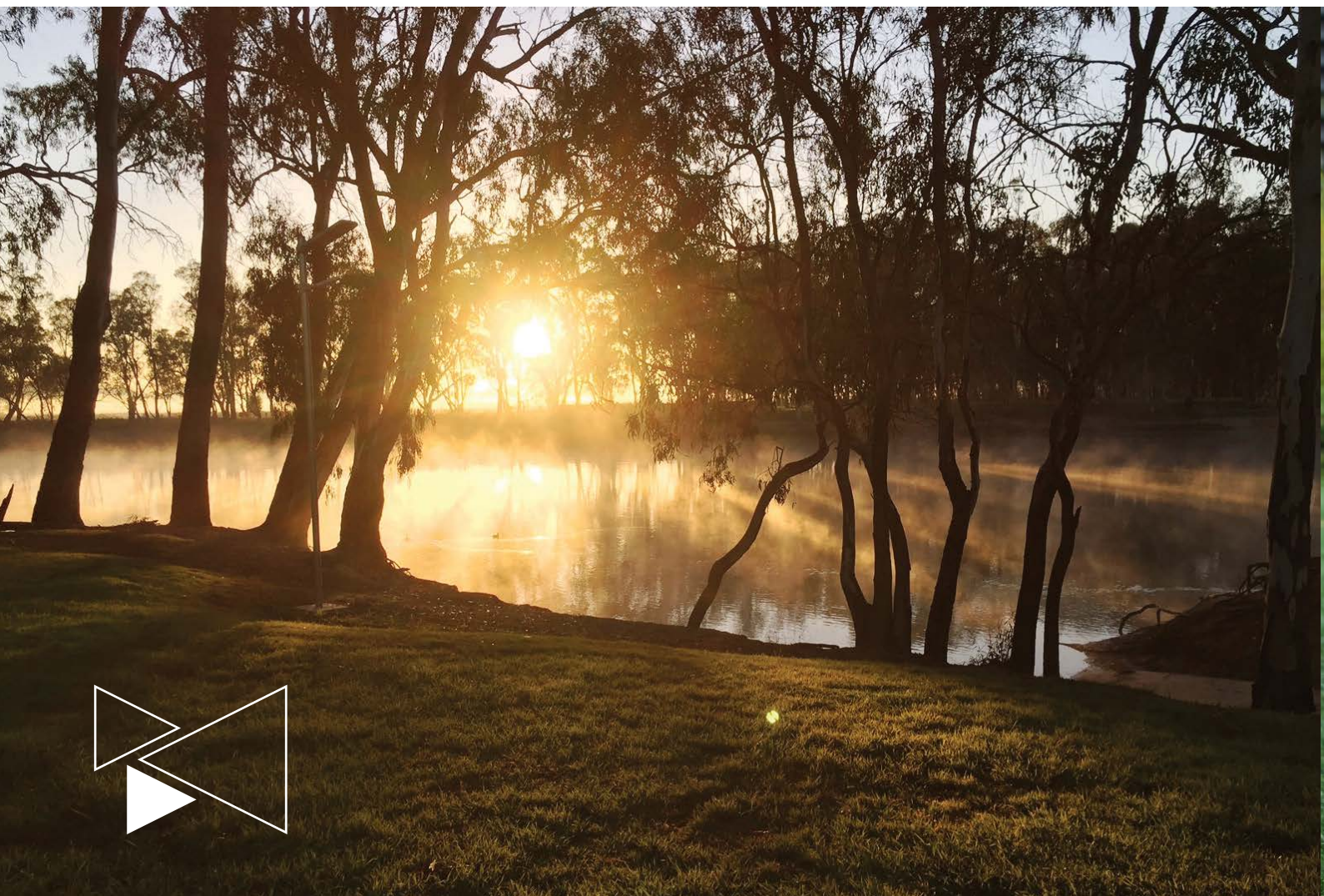
# Strengthening Hospital Response to Family Violence (SHRFV)

Swan Hill District Health utilised the newly created Social Work role to implement the Strengthening Hospital Response to Family Violence (SHRFV). SHRFV is a whole of Hospital response model for responding to Family Violence. SHRFV was developed by The Women's (hospital) and Bendigo Health as result of Royal Commission Recommendations. Local data (Swan Hill) indicates Family Violence is a growing problem for our region. Hospitals are in a unique position to identify and respond.

To date Swan Hill District Health has developed and implemented a Family Violence Sensitive

Enquiry Policy, Family Violence Sensitive Enquiry Procedure and a Workplace Impact Protocol. Over 65 staff have received training - Modules 1 and 2 combined: "Shared Responsibility and Identifying and Responding", with further training being rolled out currently.

The recently established SHRFV Cluster Lead position based at Echuca Regional Health will enable further project development including review.





# Being a Child Safe organisation

All staff and volunteers are required to observe Child Safe principles and expectations for appropriate behaviour towards and in the company of children by adhering to the Swan Hill District Health Reporting of Child Protection Procedures.

The Child Safety and Other Reportable Conduct Policy and Reporting of Child Protection and Other Reportable Conduct Procedure have been reviewed and updated to include the Commission for Children and Young People Reportable Conduct Scheme requirements.

The Commission for Children and Young People requires Swan Hill District Health via the Chief Executive Officer to report any allegations

of reportable conduct, including professional misconduct, sexual offences/misconduct, physical, emotional or psychological harm, or significant neglect of a child by staff or volunteers.

Swan Hill District Health requires all staff and volunteers to have a satisfactory Police Check prior to employment, and, in line with the Aged Care Act, all staff are renewed every three years. A Working With Children Check is also applied to required staff in accordance with the Department of Justice Guidelines.





# Cultural Diversity

Swan Hill District Health (SHDH) employs a refugee health nurse for 5 days each fortnight to assist with the needs of refugee clients.

Swan Hill has a diverse refugee population, but the majority of refugees are the Hazara people, a persecuted group from Afghanistan. Many of these people haven't been to school, and have worked as farmers and tradesmen, with limited formal education and qualifications. Many have never been to a hospital or seen a doctor. This makes the transition to accessing health care in Australia a very daunting scenario.

The refugee health nurse role helps them to navigate the health care system, and to educate them in health related issues such as vaccination

and health screenings, that ultimately benefits the whole population. We are working with this community to improve their health literacy and understanding. This predominantly occurs with the use of a telephone interpreter.

The refugee health nurse also provides and co-ordinates appropriate education sessions to groups, to assist with their health knowledge and access to services.

Swan Hill also has a significant population of people that are seeking asylum in Australia, and we work with this population to help them access health care.



# We speak your language

Everyone accessing care at Swan Hill District Health (SHDH) has the right to be understood, and have things explained to them in a way they can understand. Health professionals have an obligation to obtain accurate information from people before obtaining consent and commencing care. This is a professional and legal obligation. People need to be able to make decisions about their care, and give consent for services and procedures that they require.

For people who are hearing impaired, a video-conferenced trained Auslan interpreter can be accessed.

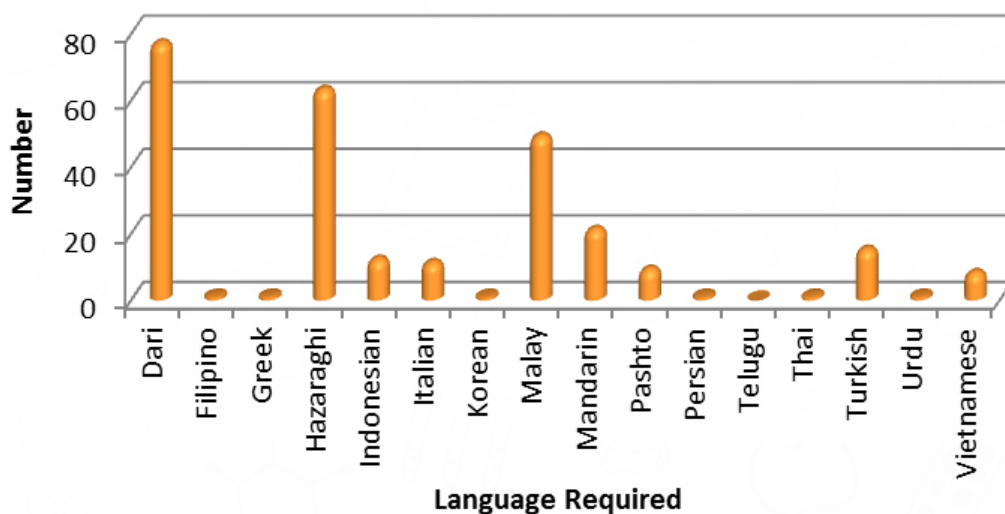
For people from a non English speaking background, or those having poor English language skills, SHDH staff utilise the Victorian Interpreter and Translation Services (VITS) to ensure that the communication

needs of our clients are met. These are trained interpreters. SHDH predominantly use the phone based service, using a speaker phone, but where required, an onsite interpreter can be accessed.

Phone interpreters can be used in emergency and planned situations. We have the option of pre-booking a phone interpreter, or calling at any time, and waiting for an interpreter to become available.

We are lucky enough to have a skilled multi-cultural work force, so we are also able to use some staff members to interpret when appropriate and required.

**Total use of Interpreter Service  
Swan Hill District Health**



# Communication Access

“Communication Access occurs when people are respectful and responsive to individuals with communication disabilities, and when strategies and resources are used to support successful communication.” (Solarsh, West, Johnson & Rezzani, 2013).



Where the Communication Access symbol is displayed, it means the service you are visiting is communication accessible where staff are welcoming and treat everyone with dignity and respect, are able to communicate successfully with people with communication difficulties and where communication tools are available to help people get their message across and understand what people are telling them.

Swan Hill District Health Allied Health Reception received training in Communication Access and was awarded the certificate of recognition in November 2016. Since this time, Allied Health Reception continued to utilise a range of systems to support clients with communication difficulties access Allied Health services including:

- Easy English versions of forms
- Use of visuals to assist the intake process and completion of the Initial Needs Identification
- Use of Google Translate and appointment letters printed in a range of languages
- Use of a range of communication strategies to assist clients with hearing loss and other communication difficulties
- 1:1 assistance with completion of forms as required

The Communication Access Network completed training on communication accessibility with Community Rehabilitation Centre and Health Promotion Reception staff in March 2018.

The session outlined what is meant by communication accessibility, receptive versus expressive communication, introduced methods of communication other than speech (e.g. gesture, sign, national relay service, interpreter services and communication/visual aids). The session also highlighted what is meant by accessible information and identified the types of documents Reception staff use regularly for translation into Easy English.

There was also a further training session for Administration staff on Key Word Sign in June 2018.

## Helping Children with Autism

Swan Hill District Health over the past 12 months has been gradually building up services for children with Autism Spectrum Disorders, who have funding through “Helping Children with Autism” (HCWA). The HCWA funding has supported children to be seen in the most appropriate setting whether this is in the clinic, at day care/pre-school, or at home.

It has allowed clients to access additional Speech Pathology services in addition to Early Intervention services, where they have specific speech/language or social communication goals. It also allowed the Speech Pathology Department to support children with Autism Spectrum Disorder through school transition and to work more closely with other multidisciplinary services involved in the client’s care i.e. Early Intervention services, Occupational Therapy etc.



# Upgrading our Services

Access to our facilities this year has seen the development of a purpose built counselling facility with disabled access. The previous building did not allow for ease of access for clients with mobility issues.

We have also been fortunate to have a new headspace facility built with ease of access in line with the building regulations.

Our Dental clinic has seen a significant waiting room upgrade that allows extra space for wheelchairs, prams, walking frames our clients have appreciated this upgrade and are now finding our dental clinic to be a comfortable place to wait.





# Volunteers and Consumers at SHDH

Consumers of our health service are encouraged to become active members of our facility. We have many different forms of Volunteering, from assisting in Aged Care, Adult Day Services, Men's Shed, Volunteer Desk, Volunteer Visitors and the Ladies Auxiliary Opportunity shop.

We also have a Community Advisory Committee who meet bi-monthly to assist the health service to have a greater understanding of what is happening in the community and the challenges that they are facing. Also our Community Advisory Committee provides insight to patient experiences in our organisation and assists with the review of information and providing an independent insight.

We also encourage consumers to participate in our meetings to assist with providing and planning care delivery through our National Safety and Quality Healthcare Services Standards.

During our strategic planning sessions, the community is invited to participate to assist us with developing a health service to meet the community needs.



# Community Inclusiveness

Swan Hill District Health (SHDH) works in partnership with a range of organisations, services and community members to provide events and promote inclusiveness for those individuals identifying as Lesbian, Gay, Bisexual, Transgender or Intersex (LGBTI). This partnership is led by the Swan Hill LGBTI Inclusion Committee.

A project conducted by SHDH Health Promotion and supported through a HEY Grant focused on the development of a social network for LGBTI young people and awareness raising community wide activities. These included 'The Gate of Conversation', a visual support where community members wrote a pledge on a coloured ribbon and tied it to a gate on International Day Against Homophobia, Biphobia, Intersexism and Transphobia (IDAHOBIT) day in 2017. This was conducted in the Swan Hill main street and then displayed throughout the organisation. A second activity, 'The Diversity Wall', featured on the external brick wall of Café Allure in central Swan Hill. This was a very substantial piece of work that gained fantastic community support and recognition. The wall displayed photos of 92 community members, including staff from supportive services, with the slogan 'I've got your back: no matter your identity' and the rainbow colours in the centre. 'The Diversity Wall' was on display for several months and was highly regarded by our community and the broader region. In May 2018 an afternoon tea was held on IDAHOBIT day where 60-70 people attended to show their support (pictured below in front of 'The Diversity Wall').

Swan Hill District Health is currently working through a review of our own service to improve access and inclusive practice for LGBTI community members. This has included ensuring all staff position descriptions have a statement in regard to recognition of diversity, the display of a rainbow flag at all service entry points and improvements to posters and reading materials in waiting rooms throughout the service. An Inclusive Practice Action Plan for 2017-2020 has been developed.





# Enhancing Consumer Experience

Through our feedback system we have been able to identify an opportunity for improvement and enhance the consumer experience in our health service.

## Palliative Care Patients / families / carer

The following outcomes have been achieved:

- The referral process from discharging the patient from the acute ward across to the community palliative care has been strengthened and all staff have been educated in regards to this process and the importance.
- Access to medications after hours for palliative care programs has been strengthened with clear directions for medical officers in the emergency department to follow.
- The introduction of a new IT program PalCare so that after hours authorised users are able to access the community palliative care records to be able to provide comprehensive care to patients in line with their current needs.

## Sharps Safety

Due to trending in incident reporting that was identified and through patient feedback, it was noted that there were used syringes in the public toilets not being discarded into the appropriate sharps containers. A review occurred on locations where the syringes were found, and paper hand towel dispensers have been replaced with air dryers therefore eliminating the chance for injury for patients and visitors.

## Volunteers Visitor Program

Volunteers are available to come and visit with patients that may not have family close by or are isolated. These visitors are happy to have a chat and reminisce about the good old days, or read the newspaper to our inpatients. We are currently recruiting more volunteers into this program.





# Consumer Feedback

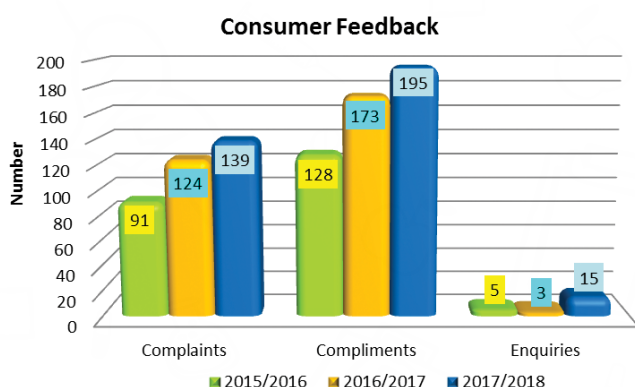
## We don't know what we don't know.

Swan Hill District Health endeavour to provide the best treatment and services to the community where ever possible. In a bid to ensure this is achieved we are constantly looking for your feedback in one way or another.

These include the feedback process which can be supplied in many formats including on a feedback form, in person, telephone, email to [feedback@shdh.org.au](mailto:feedback@shdh.org.au) and via webform at [www.tinyurl.com/SHDHFeedback](http://www.tinyurl.com/SHDHFeedback). This year we have also included the QR codes option located near the feedback submission boxes throughout the organisation, which can simply be scanned using your mobile phone for completion online and instant submission.



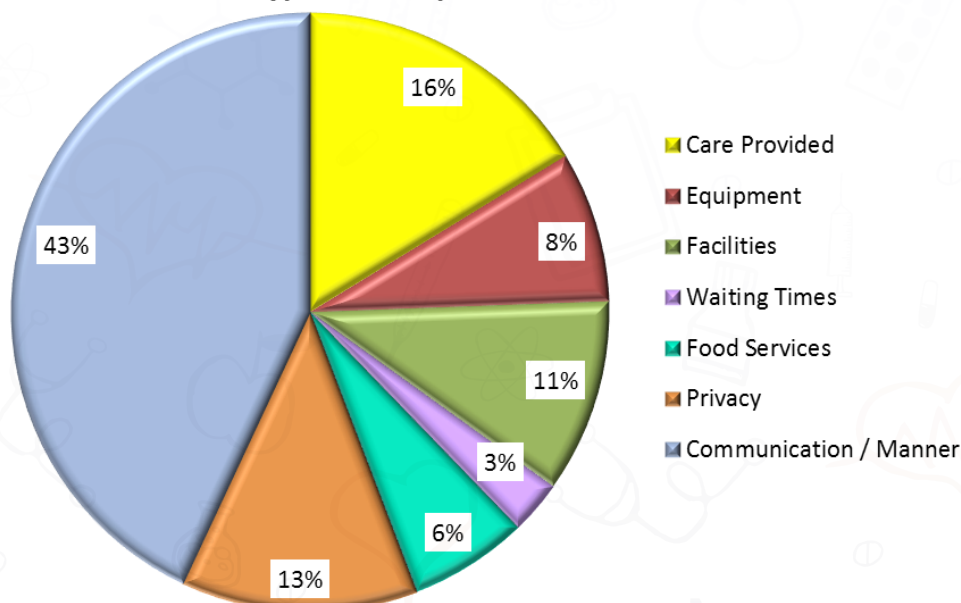
During 2017-18 there have been 139 Complaints, 195 Compliments and 15 Enquiries received.



## Actions following Consumer Feedback include:

- Increased signage re No Smoking
- Communication focus in Hard Wiring for Excellence (HWE) program
- Regular carpet cleaning in Jacaranda Lodge
- Continence management review in Logan Lodge
- Medical team coaching in communication through HWE
- Bathroom heating for Acute Ward
- Signage review regarding food in DPU waiting room
- Hand Dryers in public toilets
- Spider spraying in Logan Lodge
- Bug spraying/clean up in SHDH main corridor
- Garden maintenance in SHDH and Logan Lodge
- New vending machine in Emergency Department – Healthy choices
- Communication book in Primary Health Medical Centre (PHMC) through HWE
- Medical Student ID badges displayed
- New ultrasound chair in Radiology

## Types of Complaints 2017/2018



# Consumer Feedback

Swan Hill District Health provide surveys for consumers to complete. These are sent out via traditional postal service with a reply paid envelope included. Surveys are normally also provided with an online completion option for those who find this an easier method. During the 2017/2018 financial year we distributed about 20 surveys to approximately 600 consumers. Results from these surveys were collated into comparative reports and sent to the relevant departments for review and implementation of improvement plans where required. These survey results are then reviewed by the health service governance committee (CQI) at regular monthly meetings.

Every staff member in the health service is expected to contribute to improvements. These are then lodged in our quality improvement system and monitored. Staff were surprised when asked how many QI activities had been commenced over the previous 12 months. Often a QI Activity will be as a result of consumer feedback, or an internal or external audit. QI activities range from small items like the provision of information to patients up to larger funded opportunities like the provision of Sub Acute care buildings. There were 139 Quality Improvement Activities undertaken throughout SHDH during 2017-18.

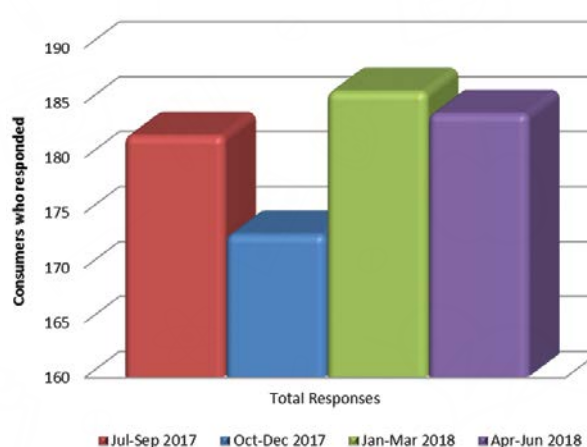
Swan Hill District Health is constantly planning to become involved with the local community and needs your input to ensure we meet the growing needs of our community. It's up to you to provide us with the feedback to help us identify the next planning phase. Local community members have previously become part of support groups, including the Community Advisory Group (CAG) and this needs to continue. The plan in the next financial year is to significantly expand the current consumer engagement profile and include community members to a greater extent in the planning process for building development and expansion, service development and expansion, treatment alternatives as well as the best process to handle feedback including complaints. We need your input to ensure we are meeting your needs.

Remember, if we don't get told the issues, we don't know what you believe they are. If you advise us of any suggestions we are more than happy to investigate changes. Every feedback item received is treated with appreciation, recorded in our electronic system then tracked and investigated to determine the correct plan of action.

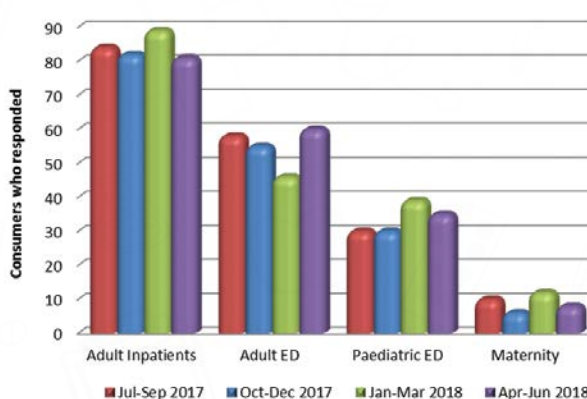
## VHES Inpatient and Emergency

There is also a health department funded survey distributed to randomly selected patients from the Acute Ward, Emergency Department and Midwifery. This survey is referred to as the Victorian Health Experience Survey (VHES) and is distributed every three months. As there have been nearly 3500 surveys distributed in the last 12 months, perhaps you have already received one of these in the mail. These surveys comprise approximately 90 targeted questions for you to complete. These results are then returned to the independent survey company for comparison with similar health services and entire state results. The results once collated are then provided to us for comparison and identification of further improvement strategies.

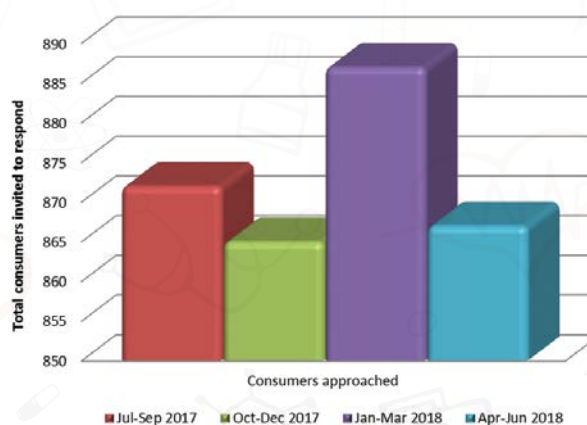
**VHES Survey Overall Responses**



**VHES Survey Responses**



**Consumers Invited to Submit VHES Survey**



## VHES Community Health

The Victorian Healthcare Experience Survey for Community Health was undertaken from October – December 2017 with 270 questionnaires distributed with a 32% response rate. The survey covered a range of Swan Hill District Health community programs including Physiotherapy, Podiatry, Occupational Therapy, Speech Pathology, Dietetics, Adult Day Service, Dental, Counselling, Community Nursing and District Nursing.

The survey provided the opportunity to gauge the client's perspective on the services we deliver with 49 questions relating to ability to access the health service, environment and facilities, experience with health workers, team work, care planning, and information provided. The Overall Experience received a rating of 95% with results for 20 questions rated above the State and Peers, 18 questions rated above State or Peers, and results for 11 questions below State and Peers.

It was rewarding to see areas we were above our State and Peers including awareness of the community health service, staff considering all the client's needs, politeness and helpfulness of reception staff, privacy, time spent with health professional, involvement of client in decision making about care, achieving client goals, information provided, clients treated with respect and dignity, how to make a complaint, assisted with doing things which are important, and would recommend services to friend and or family.

Areas above our State or Peers included compassionate staff, comfortable to raise issues, listened to by staff, concerns taken seriously, assistance with setting health and wellbeing goals, knowledge of contacts for questions, and waiting time for appointment,

Areas where we were below our State and Peers include how easy it was to find the health service, transportation access (e.g. car parking, public transport), time spent by health professionals to explain, asked about concerns, and care plan goal setting including being reviewed, provided a copy and usefulness of the plan.

We have utilised the Swan Hill District Health Hardwiring Program to engage staff in addressing areas highlighted by our clients where we need to improve.

Hardwiring has allowed staff to investigate the Victorian Health Care Experience results and then determine actions for delivering improvement. One focus area is how to ensure care plans are developed in conjunction with clients which are relevant, timely and understood for their care needs as well as being user friendly for completion by staff. Hardwiring with staff is also being utilised to determine opportunities on how we can provide greater care for our clients.

Some comments from clients:

'Advertisement telling me there was an inexpensive diabetic service. In-depth discussions with the dentist and the dietitian – both very good plus they had a caring attitude.'

'Being so kind and caring and helping me understand situations and issues better'

'Contact with other people; enjoying their company. Joining is exercises and I really look forward to my day every week with this group – they are terrific.'

'I found the receptionists very helpful and friendly, always making sure they fitted me in. The dental nurses were lovely and always explained things very well. I really think it is the best dental service I have been to. I am always made to feel special.'

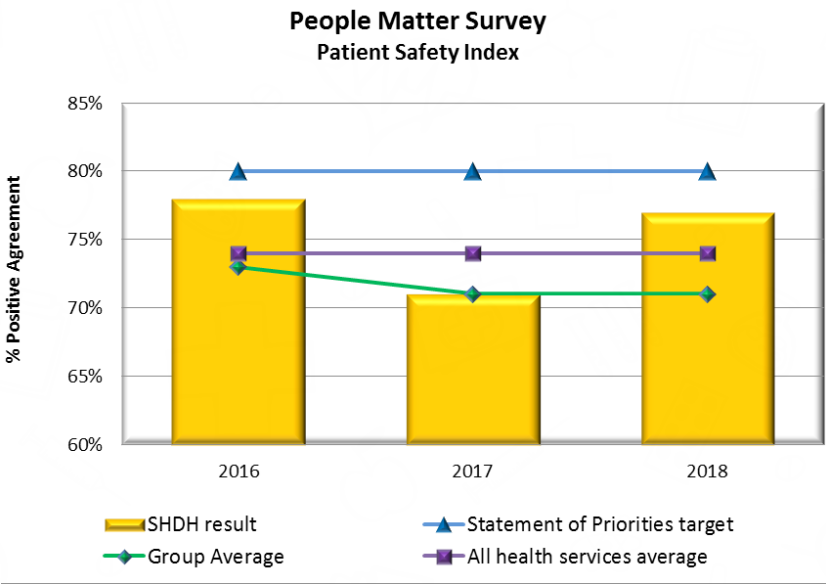
## FACT

The Overall Experience received a rating of 95% with results for 20 questions rated above the State and Peers.

# People Matter Survey

The People Matter Survey is a public sector employee opinion survey run by the Victorian Public Sector Commission. The Patient Safety Index for 2018 measured 77% against a Statement of Priorities requirement of 80%. Note, SHDH measured a 6% increase against 2017 and, as bench marked in the survey, measured higher than most in the comparator group.

The series of 8 patient safety questions that made up the Patient Safety Index were featured in focused team rounding under Hard Wiring for Excellence during the year, with all results escalated to health service Management. The results are currently being disseminated across organisation divisions with the view of formulating strategic directions.





# Maternity Services

The Midwifery Unit at Swan Hill District Health is committed to providing safe and evidenced based care to all the women that use our Services. We aim to uphold our organisational values of respect, professionalism, care, commitment and collaboration.

The unit is led by Obstetricians, Midwives and Emerging Midwives. We work in collaboration with the GP Obstetricians and other multidisciplinary teams to provide holistic care to the women in our care.

The Victorian Perinatal Services Performance Indicators 2016/2017 report reflects an increased number of first time mothers that had a Caesarean Section to deliver their babies. The percentage is higher than the state wide result and the Midwifery Unit has looked into the possible reasons for the increase in the caesarean rate. The Caesarean rate statewide was 22.6% for first time mothers in the period 2016-2017. At SHDH the total number of caesarean sections for that period was 35%. Our aim is to have a reduction in the caesarean rate which can be achieved without compromising on safety of the mothers and the babies.

## The plan includes:

- Empowering women and their partners on benefits of having a normal vaginal birth but understanding that medical intervention is indicated when necessary. We have antenatal classes run by skilled and knowledgeable midwives that discuss labour and birth allowing the women and their partners the opportunity to discuss expectations.
- Ensure consistency with all midwifery practices by all the medical providers.
- All women should have access to pain relief during labour in a timely manner and have qualified medical staff to provide the pain relief as requested.

We are constantly working at improving practices. Many women have some perineal trauma during childbirth. 10% of all first time mothers sustained a 3rd or 4th degree tear. This was a higher than expected rate of tears which has been investigated. Midwives regularly attend workshops and programs to enable them to maintain their Midwifery skills. In the event of women sustaining a tear follow up care post birth includes a multidisciplinary approach to reduce complications that impact on the woman's quality of life.



# Accreditation

## National Safety and Quality Health Service (NSQHS) Standards

Swan Hill District Health underwent organisational wide accreditation on 12-14th September 2017. Full accreditation was granted to the health services, with 5 developmental recommendations. All 12 recommendations from the previous survey have been closed.

Recommendation	Action Taken
2.2.2 Consumers and/or carer's are actively involved in decision making about safety and quality.	Development of a consumer engagement framework for community engagement that is relevant to a regional/rural community which has been endorsed by the board.
2.8.2 Identify and implement a mechanism to actively engage consumers and/or carers in the planning and implementation of quality improvements.	Consumer input has been a key driver in the building of the subacute care facility that is currently underway, they have reviewed the floor plans, and will be consulted in regards to furnishing of hospice rooms.
3.16.1 Ensure that the cleaning, disinfecting and sterilisation of reusable instruments and devices is in compliance with the manufactures instruction and national and international standard.	Thought the Infection Prevention & Control committee ongoing monitoring and implementation against the AS4187 (Australian & New Zealand Standard) on Reprocessing of reusable medical devices in health service organisations is seeing the purchasing or addition equipment to meet the requirements of the standard. SHDH is operating within the required standard.
3.19.2 Develop a mechanism for ensuring that infection prevention and control information provided to the patients and carers meets their needs.	SHDH annual undertakes an infection transmission based audit, this year additional questions to gather a focused responses on the information that is provided to inpatients, families/carers to ensure that the information is meeting their needs when transmission based precautions are required to be implemented.
8.10.1 Provide evidence to demonstrate that pressure injury management plans are developed in partnership with patients and carers.	Spot audits of clinical areas are ongoing with inpatients, to identify if the pressure injury management plan has been formulated in conjunction with the patient/families/carers are continuing. When there are instances identified that this has not occurred, additional support and training is provided to staff.
10.10.1 Provide evidence to demonstrate that falls prevention plans are developed in partnership with patients and carers.	Spot audits are also used to assist with the further management and development with fall prevention with patient and staff.

## Commonwealth Home Care Standards

Swan Hill District Health, Allied Health, Adult Day Services, and District Nursing underwent accreditation on the 8th August 2017 with all 18 outcomes being met successfully with nil recommendations.

## Australian Aged Care Quality Agency

### Jacaranda Lodge:

18th April 2017 and 2nd May 2018 unannounced visits with all actions met, for ongoing annual unannounced assessments.

### Logan Lodge:

10th January 2017 and 3rd October 2017 unannounced visit with all actions met, for ongoing annual unannounced assessments. ►

## Postgraduate Medical Council of Victoria (PMCV) Accreditation Standards

A Mid-Cycle Review Report was submitted to PMCV on June 29th 2018.

The Swan Hill Mid-Cycle Review report was tabled at the Accreditation Committee meeting on Monday 20th August and accepted with all previous recommendations from 2016 PMCV accreditation now met. The only area for action and feedback is to ensure that interns on the General Surgical rotation have dedicated, rostered time in theatre with both observations and some hands on experience.

### Key areas outlined in the report were as follows:

- Strengthening of Junior Medical Officer (JMO) supervision and education support since last review period with appointment of Emergency Department (ED) Director and Medical Services Manager
- Links with Bendigo Health ED via tele link for JMO education purposes
- A robust education program for Medical Services
- Introduction of Hardwiring for Excellence accountability framework for the Medical Workforce with monthly leader rounding of doctors to improve communication and trust relations and ensure requests are actioned within achievable timeframes
- The development and approval of the JMO and Medical Intern Support Protocol in 2018 and the development and approval of a Medical Admitting Rights policy.
- Structured committees with medical workforce representation – monthly Hospital Medical Officer (HMO) Meetings; bi-monthly Medical Workforce and Training Meetings; monthly Morbidity and Mortality Meetings and quarterly Medical Advisory meetings.
- The application for a Post Graduate Year 2 (PGY2) position, to replace a current International Medical Graduate (IMG) Full Time Employment (FTE), as a rotating position through Bendigo Health has been accepted for 2019 onwards. This is to:
  - ▶ Ensure participation in the Loddon Mallee Rural Generalist PGY2 pathway and strengthen the medical workforce supply of doctors in the Emergency department with general medical registration.
  - ▶ To seek recognition for a strengthened medical workforce management and education program for prevocational junior medical staff at Swan Hill District Health.
- Considerations for protected time (for JMO's), is also under discussion, along with a research model through the Director Swan Hill Primary Health Medical Centre; Chief Medical Officer (CMO) and Monash University.
- Compliance against Medical Workforce Mandatory and Required training has also been a significant improvement in the last 12-18 months which includes Bullying and Harassment online training.
- Development of a Multi-Sourced Feedback Form has strengthened the appraisal process of JMO's by adding both value and insight into their performance.



# Keeping you well

## Influenza

More than 90% of staff working at Swan Hill District Health have taken the opportunity to receive this year's Fluvax together with 233 of their domestic contacts. Swan Hill District Health is sending a positive public health message for the flu season regarding the importance of vaccination in the prevention of the spread of the flu.

## Hand Hygiene

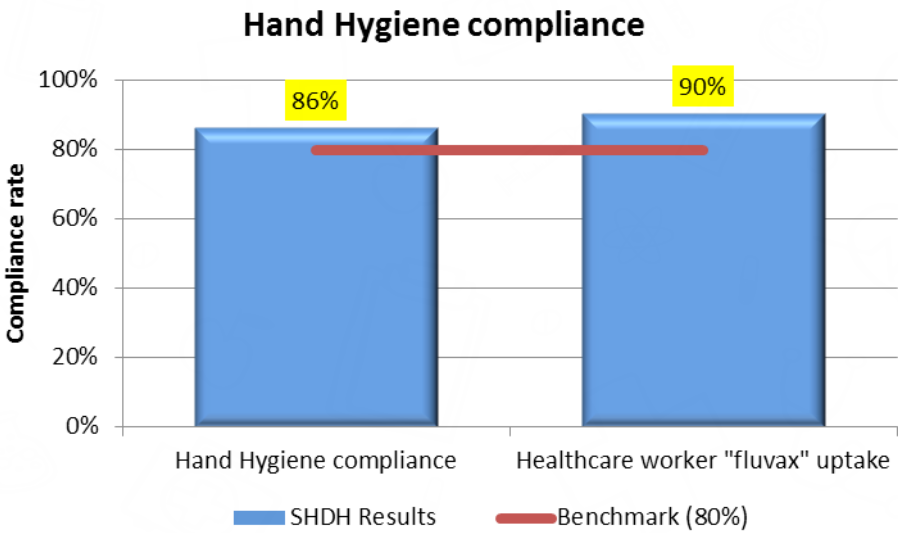
Swan Hill District Health has implemented the Clinell hand wipe on meal trays. This has occurred as a result of a focused consumer interviews which identified an inability for many patients to easily wash their hands prior to meals.

## Bloodstream Infections

Staphylococcus aureus are bacteria that are found in our noses, respiratory tract and on our skin. Sometimes these bacteria can cause infections.

Healthcare associated staphylococcus aureus bacteraemia (SAB) are significant and can sometimes lead to poor health outcomes for patients. SHDH rate for 2017/2018 year was 1 per 10,000 occupied bed days. Our comprehensive infection control program aims to limit hospital acquired infections.

## How we compare to other services



# Monitoring Adverse Events

Swan Hill District Health across the organisation has reported twenty one ISR 2 (Incident Severity Rating) incidents.

All incidents that are reported are presented to the Risk Management Committee and discussed. Case reviews in regards to the ISR 2 incidents are reported to the Mortality and Morbidity Committee.

The incidents have occurred in the following areas, Acute Ward, Emergency Department, Midwifery, Radiology, Transition Care Program, Theatre, Jacaranda Lodge and Logan Lodge.

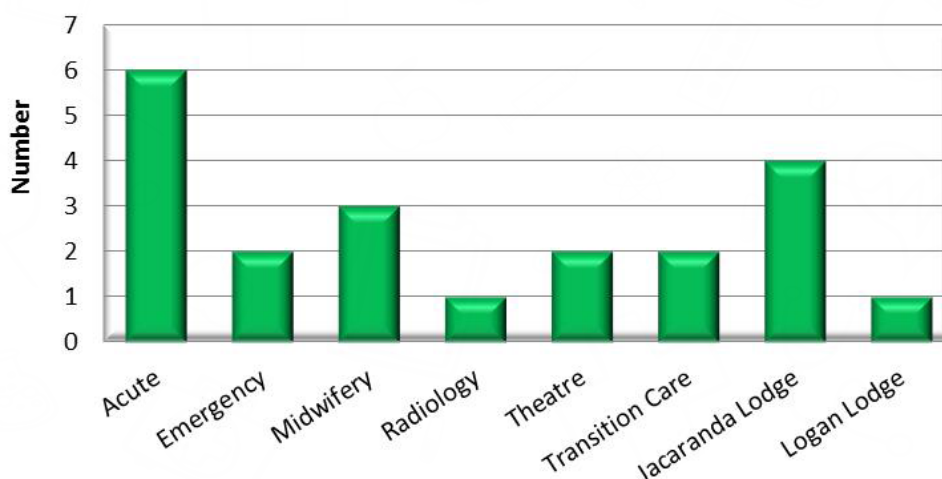
All incidents undergo a full case review, with the staff involved in the incident and the patient/

families as required. On reviewing these incident opportunities for improvement are identified and have led to further education for staff, amending of policies/protocol.

The following additional education sessions have been provided to up-skill staff and refresh knowledge:

- Falls management and neurological observations
- Wound management and assessment
- Trauma Education and assessment

**ISR 2 Clinical Incidents 2017-2018**



# Escalation of Care Process

In 2016-2017 Swan Hill District Health (SHDH) has implemented many different ways to escalate care and to make the process easier for staff to do so.

Trauma Calls - this year the Emergency Department has introduced a tiered trauma call approach, depending on the criteria that the patient meets a Trauma 1 or Trauma 2 Call is made and this then have additional appropriate staff attend to assist with patient care.

We have also introduced MET (Medical Emergency Team) Stickers, Trauma Stickers, Code Blue Stickers. The implementation of these stickers has allowed staff to report the occurrence of the events soon

after it happens. These stickers are placed in the patient's medical history and a copy provided to the Quality & Risk department which allows a case review to be attend at the time of the event or in the 48hrs proceeding the event. All case reviews are shared with the relevant department head, Executive Officer of Clinical Services and the Director of Medical Services for input and recommendations. If recommendations are made they are provided back to the relevant unit managers to implement. All MET, Trauma Calls, and Code Blues are reported at the Morbidity and Mortality Committee as part of the clinical governance process.

MET LABEL (MR/MCL)	
MET Date: ..... MET Call Time: .....	Patient ID Label
MET Arrival Time: ..... Location: .....	
MET call made by: .....	
Designation: .....	
<b>Medical Emergency Team:</b>	
ALS Nurse: .....	Intern: .....
HMO: .....	Clinical Coordinator: .....
Ward Nurse: .....	Ward Nurse: .....
Ward Nurse: .....	Midwife: .....
<b>Reason for MET call:</b>	
<input type="checkbox"/> Observation criteria reached. Please specify observation parameter: .....	<b>First monitored Heart Rhythm</b>
<input type="checkbox"/> Worried	
<input type="checkbox"/> Patient/Family/Carer Triggered Escalation	
<input type="checkbox"/> Sinus Rhythm	<input type="checkbox"/> Sinus Bradycardia
<input type="checkbox"/> Sinus Tachycardia	<input type="checkbox"/> Atrial
<input type="checkbox"/> Ventricular tachycardia	<input type="checkbox"/> Other: .....
<b>MET diagnosis:</b> .....	
<b>Outcome:</b> <input type="checkbox"/> Resolved <input type="checkbox"/> Further Tx required <input type="checkbox"/> Modification to escalation criteria <input type="checkbox"/> Limitation of treatment order	
<input type="checkbox"/> Code Blue <input type="checkbox"/> Death	
<b>Documentation:</b> <input type="checkbox"/> Ongoing treatment Plan <input type="checkbox"/> Frequency of monitoring <input type="checkbox"/> Reportable parameters	
<b>Location Post MET call stand down:</b> <input type="checkbox"/> Remained on ward <input type="checkbox"/> Midwifery <input type="checkbox"/> ED <input type="checkbox"/> Theatre <input type="checkbox"/> Home	
<b>Plan for transfer to another hospital:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Transfer arranged by:</b> <input type="checkbox"/> ARV <input type="checkbox"/> PIPER <input type="checkbox"/> SHDH	
<b>MET stand down Time:</b> .....	
Name: .....	Signature: ..... Designation: .....
<input type="checkbox"/> Copy sent to Quality & Risk	

CODE BLUE LABEL	
Code Blue Date: ..... Code Blue Call Time: .....	Patient ID Label
Code Blue Arrival Time: ..... Location: .....	
Code Blue call made by: .....	
Designation: .....	
<b>Reason for Calling Code Blue:</b> .....	
<b>Code Blue Team:</b>	
Team Leader/ALS Nurse: .....	Intern: .....
SMO: .....	Clinical Coordinator/Supervisor: .....
Anaesthetist: .....	Ward Nurse: .....
Ward Nurse: .....	Midwife: .....
<b>Treatment: Ensure all treatment is documented on the Adult/Pediatric/Neonatal Resuscitation Scribe Sheet</b>	
Time CPR Commenced: ..... Code Blue Stand Down Time: .....	
<b>Outcome:</b> <input type="checkbox"/> Further Tx required <input type="checkbox"/> Limitation of treatment order <input type="checkbox"/> Death	
<b>Documentation:</b> <input type="checkbox"/> Ongoing treatment Plan <input type="checkbox"/> Reportable parameters	
<b>Location Post Resuscitation:</b> <input type="checkbox"/> Remained on ward <input type="checkbox"/> Midwifery <input type="checkbox"/> ED <input type="checkbox"/> Theatre <input type="checkbox"/> ARV/PIPER	
<b>Plan for transfer to another hospital:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Transfer arranged by:</b> <input type="checkbox"/> ARV <input type="checkbox"/> PIPER <input type="checkbox"/> SHDH	
<b>Name:</b> ..... <b>Signature:</b> ..... <b>Designation:</b> .....	
<input type="checkbox"/> Copy sent to Quality & Risk	

TRAUMA LABEL	
Patient ID Label	
TRAUMA Date: ..... Trauma <input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2	Time: .....
Call made by: .....	
<input type="checkbox"/> Walk in <input type="checkbox"/> BIBA <input type="checkbox"/> Pre-hospital notification	
<b>Trauma Team:</b> (Name who is present and time)	
Team Leader: .....	Anaesthetist: .....
MO: .....	NIC ED: .....
Surgeon: .....	Airway Nurse: .....
SUMO: .....	Circ Nurse: .....
HMO: .....	Nurse Supervisor: .....
<b>Reason for Call:</b> (Please tick)	
<input type="checkbox"/> Mechanism of Injury	<input type="checkbox"/> Current haemodynamic profile
<input type="checkbox"/> Injuries Noted	<input type="checkbox"/> Comorbidity (including Age/Pregnancy)
	<input type="checkbox"/> Other: .....
<b>Documentation:</b>	
Trauma chart used <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> Blood Alcohols collected if MVA
	Certificate No.: .....
<b>Outcome:</b>	
<input type="checkbox"/> Discharged home <input type="checkbox"/> Admit SHDH ( <input type="checkbox"/> Ward, <input type="checkbox"/> Operating Theatre) <input type="checkbox"/> Transfer	
Transfer arranged by: <input type="checkbox"/> ARV <input type="checkbox"/> PIPER <input type="checkbox"/> SHDH	
<input type="checkbox"/> Copy sent to Quality & Risk	

# Feeling Worse? Call the Nurse

Patients and their family or carer can escalate their own care by using the Feeling Worse Call the Nurse process. Posters are displayed throughout Swan Hill District Health.



# Advance Care Directives

## Advance Care Planning

Advance care planning (ACP) refers to the way that you can document your personal values and preferences for the type of health care that you would like to receive in different situations. ACP also includes the nomination of a “substitute decision maker” – someone to make health care decisions for you if you could not do this yourself.

This is done ahead of time so your family members, carers and health care professionals can understand and respect your wishes, when your ability to make decisions or communicate is reduced, such as through illness.

The greater use of ACP in the community is a known area for improvement throughout Victoria. Swan Hill District Health (SHDH) is part of a statewide effort to increase ACP.

From July 2016 to May 2017, only 2% of all patients over 75 years old admitted to SHDH, have an ACP or substitute decision maker in place. According to the Victorian Department of Health and Human Services, this increased to 4% from the comparable period of July 2017 to May 2018. An internal audit of all patients over 75 years old admitted to SHDH from July 2017 to June 2018, showed that 9% have an ACP or substitute decision maker.

While achievements have been modest, we have put into place a number of key actions which will see us continue to improve:

- Aligning internal reporting systems with Department of Health and Human Services reporting systems;
- Setting up of an Advance Care Planning Working Party to promote the use of ACP in the local community, with the support of the ACP Coordinator at Bendigo Health (Meaghan Adams) which was gratefully received;
- Provision of ACP training to staff; and
- Review of templates for consumers to use to develop and record ACPs in their medical records at SHDH.

The benefit of ACP can be demonstrated by the example of an elderly woman who used our palliative care service, with a history of dementia and Parkinson’s Disease. She made a Values Directive and Instructional Directive for no resuscitative treatments or hospital admission as she approached death, and appointed her daughter as her Medical Treatment Decision Maker. To support her wishes, her daughter has been supported to care for her at home with frequent and regular District Nursing, Palliative Care and General Practitioner visits. However, there have also been discussions that there may be scenarios where for the safety of both the patient and her daughter, a hospital admission may be unavoidable – but if these situations arise the patient and her daughter will be fully involved, and no resuscitative treatment would be provided.

An important and inclusive component of the Advance Care Planning process is that it is consumer driven and not purely regarding medical health decisions. Advance Care Planning incorporates the values that are important to the person, including their cultural, spiritual and custom needs as identified.



# End of Life Care

## Your life journey

When admitted to our facility for end of life care, patients and their families can be assured that they will be provided with a holistic approach to their care.

All patient care is provided in a multi-disciplinary format with the patients, families / carers, nursing, medical and allied health professionals and community health providers involved in the treatment of the patient from the beginning of their journey. Where possible, a direct to ward admission is facilitated by the palliative care and acute ward staff to reduce the distress on the client and their family/ carers. Access to the specialist Palliative Care team within Bendigo Health via tele-health is to ensure that all pain and symptom control issues are provided within best practice guidelines.

Patients that are identified as requiring end of life care are commenced on an end of life pathway which is an evidence based pathway (Liverpool pathway) to assist staff to provide optimal care for the patients and their families. This pathway ensures staff interacts with the patient and the carers daily

to ensure their total needs are met, not simply their medical needs. Cultural and spiritual needs, family needs and the clients values are important guides to appropriate care being provided.

Throughout the year staff are offered ongoing educational opportunities in regards to palliative care and end of life and to assist with advance care planning.

Several staff have been trained in Advance Care Planning and are able to offer support and assistance to all patients throughout this process. There have been policies and protocols established to support Advance Care Planning, and a recording system in the medical record to easily identify those patients with an advance care plan so that their wishes can be followed. Advance care planning assists all staff to ensure that all the wishes of the patient are known, not simply their medical; but including their spiritual or cultural or community wishes also.



# Logan Lodge & Jacaranda Lodge – Aged Care

## Falls and fall-related fractures:

Staff have implemented a number of strategies to address falls prevention and management. Falls management has been the monthly focus for staff rounding as part of the organisation-wide Hard Wiring for Excellence program and staff have improved their adherence to the policy and procedure protocols for Falls.

The Standardised care process for Falls (Health and Human Services 2018), enables staff to promote evidence-based practice in the prevention of falls for older people who live in residential aged care settings.

Approximately 30–50 per cent of people living in residential aged care fall each year, and 40 per cent of them experience recurrent falls. Falls are commonly due to tripping, slipping and stumbling (ACSQHC 2009). A fall can result in negative outcomes including death, loss of independence and autonomy, immobilisation and depression (WHO 2007).

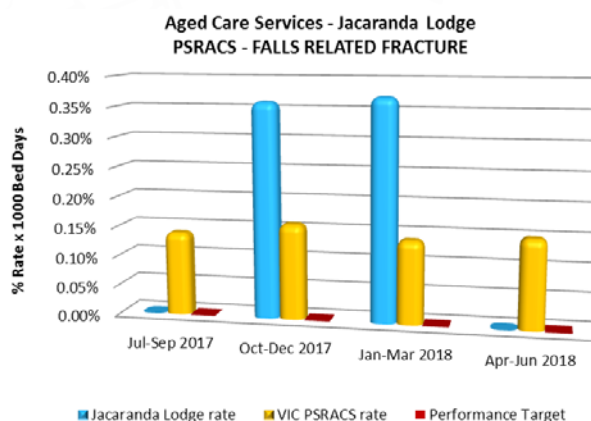
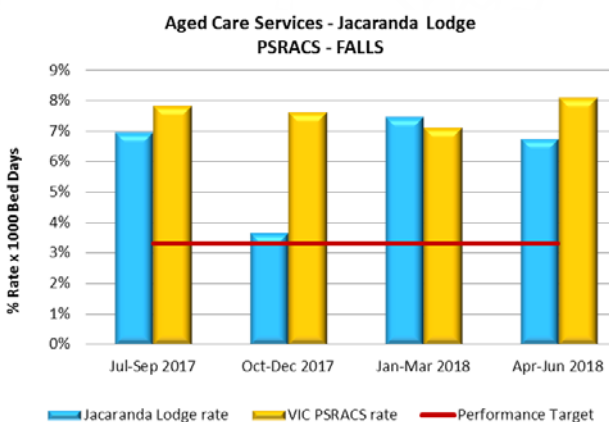
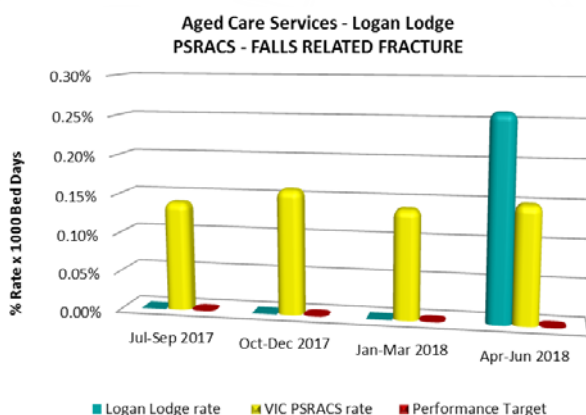
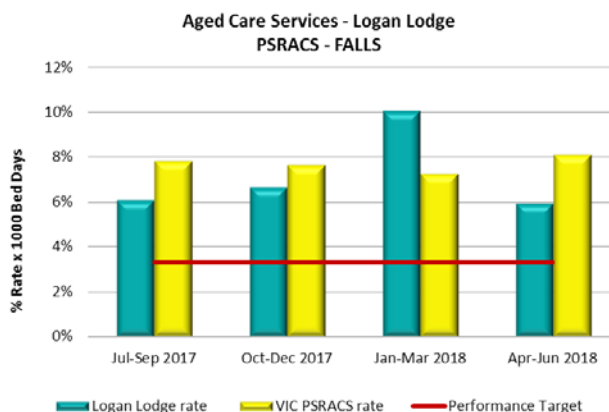
### The standardised care process is best practice and enables:

- Recognition and assessment; Identify a falls risk profile for all residents on admission and ongoing.
- Interventions
- Fall prevention interventions include:
  - injury minimisation and falls surveillance
  - medication review and minimisation, exercise programs
  - Referral processes
  - Prevention programs
  - Evaluation and reassessment
  - Staff knowledge and education

Staff have access to the Full Standardised Care Process.

Staff also have access to information from the February 2018 edition of the Residential Aged Care Communique, which focuses on falls and has pertinent information for residential aged care staff.

There was a significant reduction in the number of falls across both homes from Q3 to Q4. ►





## ◀ Use of 9 or more medicines (Polypharmacy)

Staff have been enabled to access the Geri-connect program. The program has been able to monitor medication use and demonstrate a 31% decrease in medications across the region.

SHDH Residential Care accesses a Consultant pharmacist who reports recommendations to the Resident's General Practitioner (GP).

Our Medication Advisory Committee meets 6 monthly and is mindful of the data regarding the Geri-connect program. The MAC meeting acknowledges medication incidents and has supported the homes in moving toward a Webstercare medication management system.

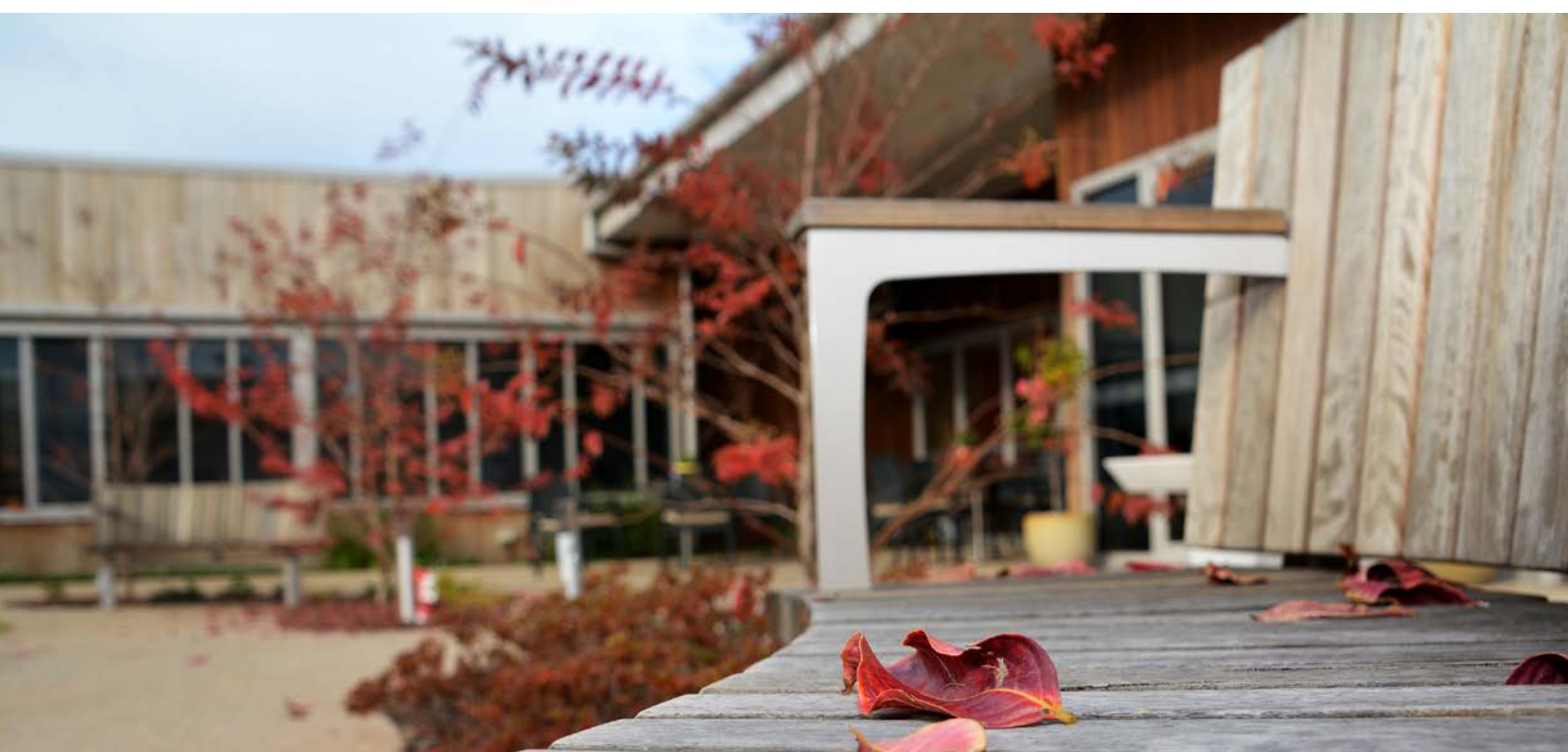
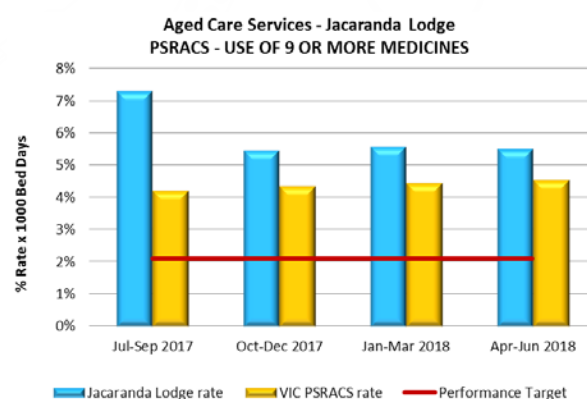
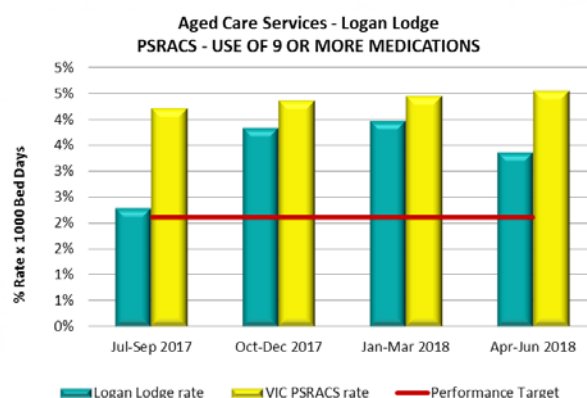
Staff are able to utilise the Standardised Care Process (Health and Human Services 2018) re Polypharmacy and use of nine or more medicines. The information promotes evidence-based practice to the management of medicines for older people who live in residential care settings to minimise the risks associated with polypharmacy.

The number of medicines a person uses will increase where there are multiple health conditions. Careful management of medicines can reduce the risks associated with polypharmacy (DoHA 2012; ANMF 2013).

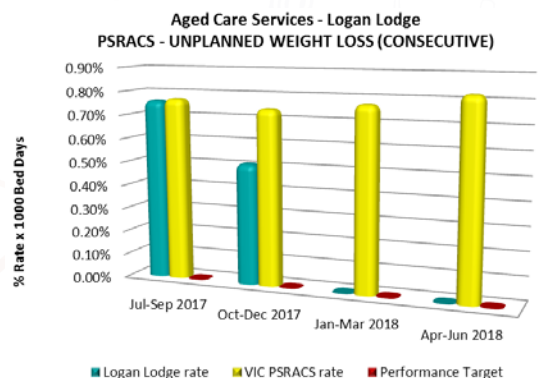
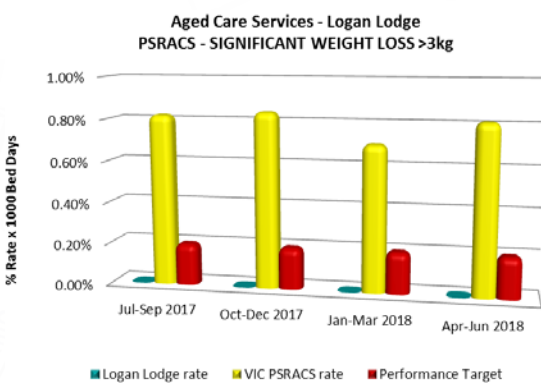
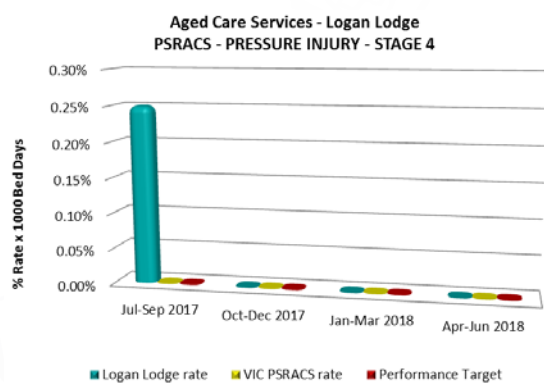
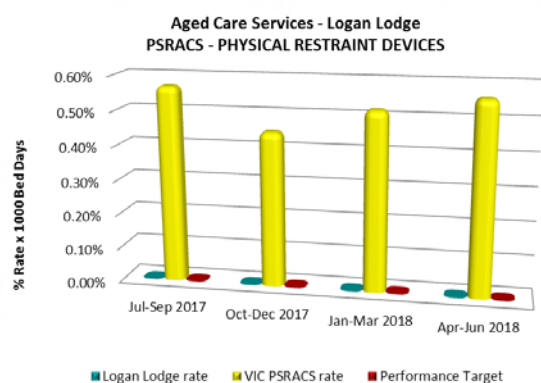
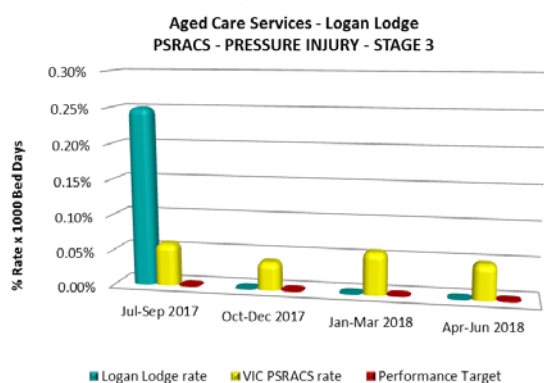
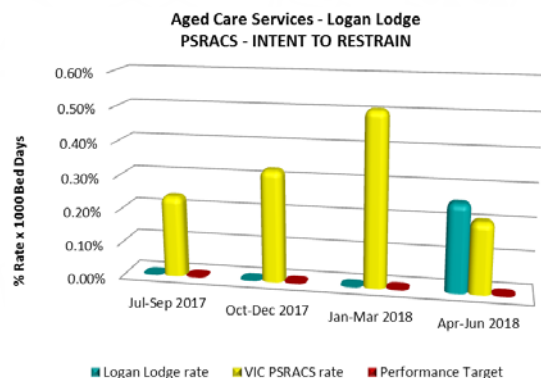
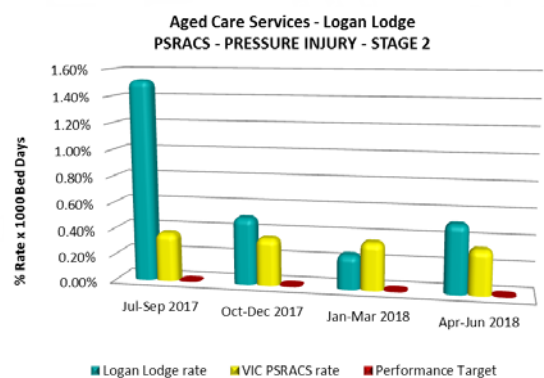
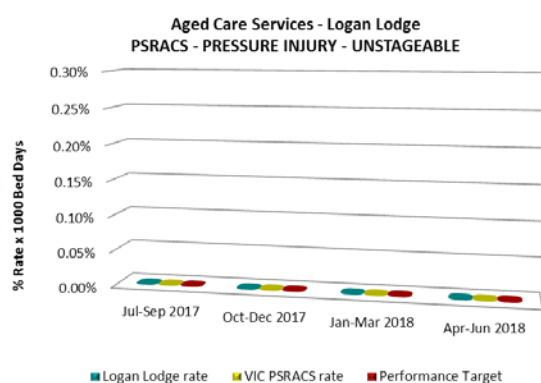
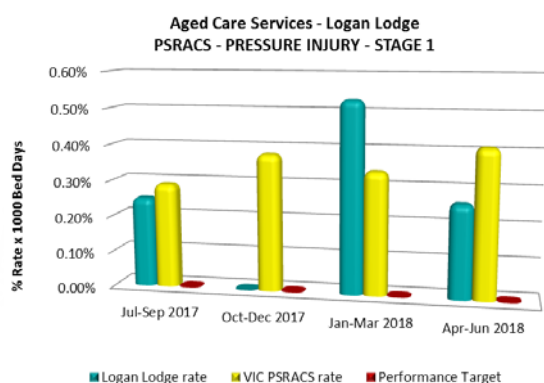
### The standardised care process assists staff in:

- Recognition and assessment: on admission, any time the resident's condition changes, when a new medicine is ordered, or when the resident is taking nine or more medicines
- Interventions
- Referral
- Evaluation and reassessment

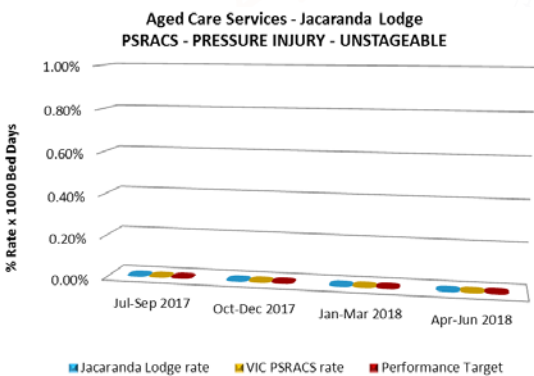
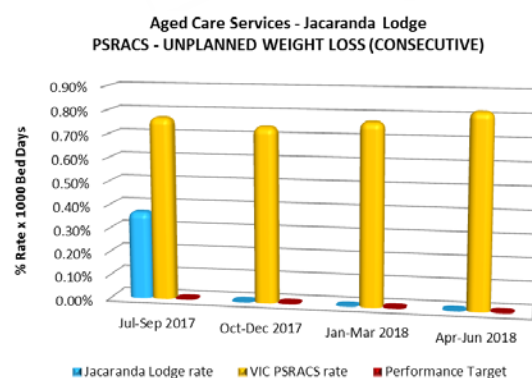
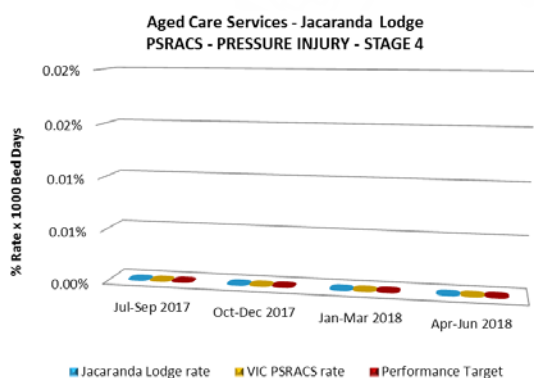
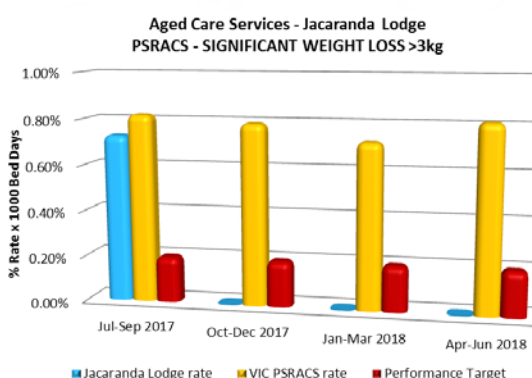
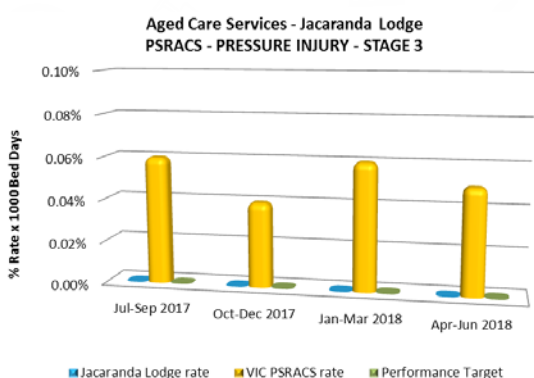
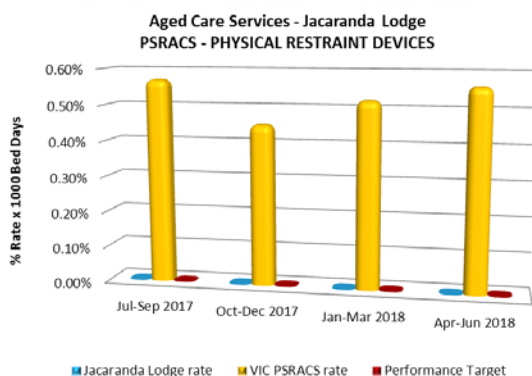
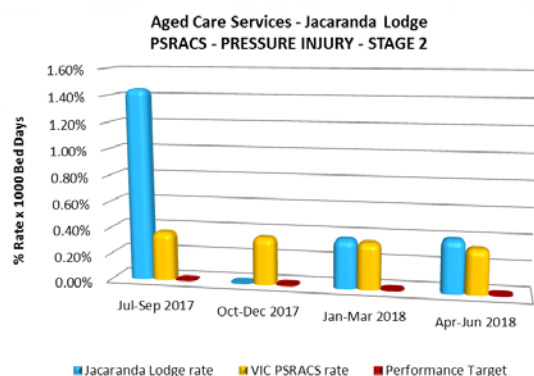
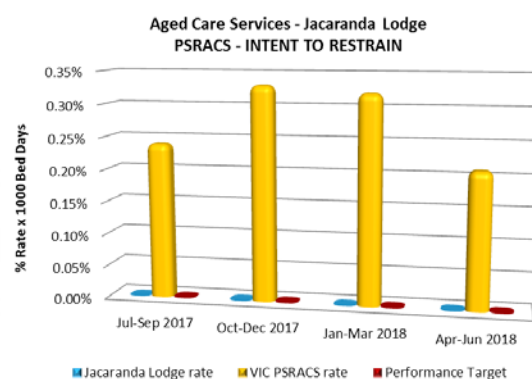
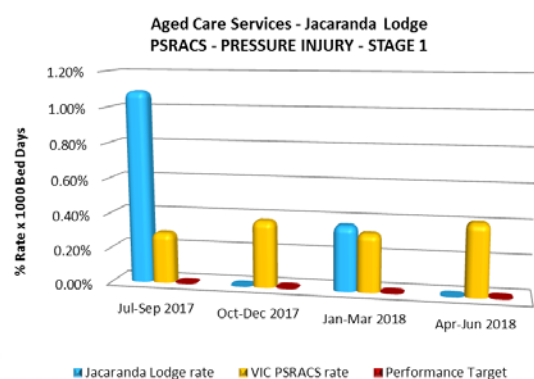
- Resident involvement
- Staff knowledge and education:
  - Safe medication management (legislation, regulations and professional responsibility and delegation in medication management).
  - Contemporary knowledge of pharmacology and health assessments and Clinical judgement regarding medicine use (for example, why administering, how to administer, when to administer or not to administer, recognition of side effects and adverse reactions)



# Logan Lodge - Other Mandatory Reporting



# Jacaranda Lodge - Other Mandatory Reporting





# Our healthy community

## Dental Service

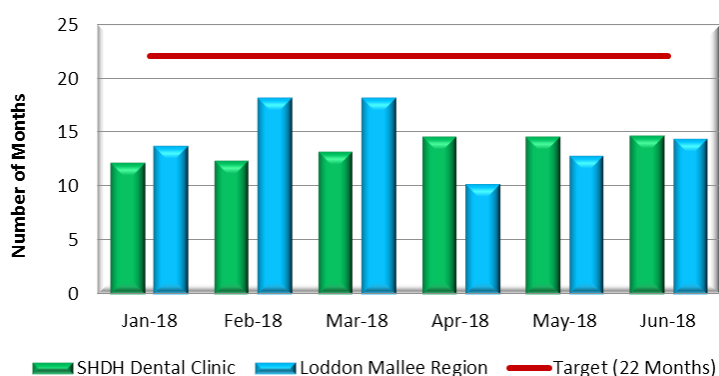
A Swan Hill District Health Dental service is actively involved in the promotion of good oral health. The clinic is a five chair dental practice that offers all general dental services to all patients. We see both public and private patients. The service has a Dental Therapist employed who treats all of our children and is working closely with the SHDH Health Promotion team visiting playgroups, preschools and schools performing screenings for all children and promoting healthy mouths. She is also encouraging families to make a visit to the dentist yearly for general examinations.

We can also offer prosthetic (denture) services. We have a contract prosthetist visiting 1 day per week and are currently interviewing to appoint a full time prosthetist to join our team.

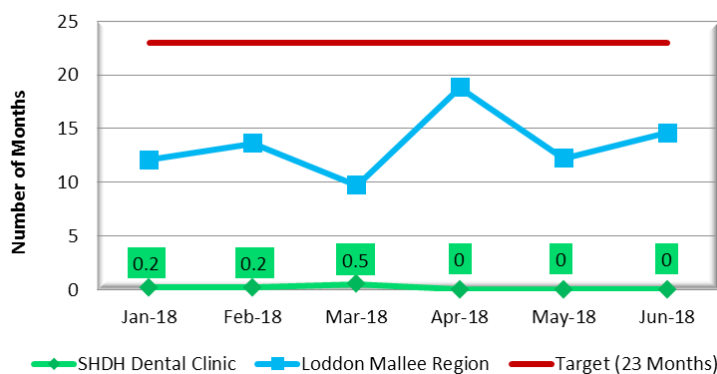
We have a general waitlist of 3 weeks for all patients. The Victorian State target is 23 months. Our denture waitlist is currently at 14.4 months and the Victorian State target is 22 months. In 2017/2018 financial year we treated 4251 patients in 10757 appointments. This is a combination of both general dental and denture patients.

Dental services offer a prompt, efficient and caring service to all their patients.

Denture Wait List Times



General Wait List Times



# Our healthy community

## Falls & Balance Clinic

The Falls and Balance Clinic offers specialist assessment, diagnosis and management of falls and balance issues within the Swan Hill District Health region. The team consists of a Physiotherapist, experienced with Vestibular/ Dizziness and Vestibular rehabilitation, Occupational Therapy and Allied Health Assistants. The clinic's main focus is to reduce the amount of community based falls within the Swan Hill region. This includes reducing a patient's risk of having a fall, assessing why patient's fall, communicating the issue with patient's carers and medical team, as well as reducing the risk of falls occurring in future. Patients may be engaged with the clinic for up to three months and then referred on to other community groups.

The Specialist Clinic also offers a Falls and Balance ten week exercise and education program, which statistically reduces the risk of attendees from falling. During the course of the program attendees also have education from various health professionals; Podiatry, Pharmacy, OT, Physiotherapy, Dietetics to learn ways to reduce the risk of falling. The Specialist Clinic has many community ties to refer patients on for longer term management of their health conditions, such as audiology, ongoing exercise classes, optometry and care within the home.

### Some Patient Quotes from a Specialist Clinic Survey completed in Feb/ March 2018:

- 'I liked the way I could actually lie on the floor and with their instruction was able to turn and getup, the experience gave me confidence as I am not good with balance'
- 'The friendly staff and their caring concerns for us.'
- 'Friendly staff, everything explained, and wasn't pushed beyond our capabilities'
- 'The quality of your staff's advice and knowledge is excellent'

## Group Evaluation:

Overall, the group statics from the last year highlights that participants have had improved self-rated confidence levels and functional balance in a range of objective measures. Some patient comments:

- 'Very helpful & instructions easy to understand. Well Done!'
- 'I found the classes helpful & enjoyable with staff explaining the benefit of each exercise we did.'



# Our healthy community

## headspace



Swan Hill District Health is the lead agency for headspace Swan Hill with Mallee District Aboriginal Service as a consortium member providing 0.2 EFT staffing to headspace Swan Hill.

The Swan Hill District Health Aboriginal Health Promotion and Chronic Disease Program funding allowed for a new designated Aboriginal position with headspace Swan Hill for 2017-2018. The position titled YARN SAFE Worker was created in July 2017 and the position was appointed in August 2017. The YARN SAFE Worker has enhanced the delivery of headspace services to the local Aboriginal community through promoting culturally sensitive practice at headspace and linking the headspace program to community elders, families and young people. The Yarn Safe Program supports the Korin Korin Balit-Djack Strategic Direction 5.1.1 to support the delivery of more integrated seamless services across Aboriginal and mainstream primary and mental health, drug and alcohol, family violence, child and family, and justice service to improve social and emotional wellbeing responses across the promotion, prevention, early intervention, treatments and recovery continuum. The YARN SAFE Worker has facilitated the MDAS Aboriginal Youth Group visiting

headspace and providing feedback on the look and feel of the centre. The YARN SAFE Worker utilises the Lousy Little Sixpence video resource. The YARN SAFE Worker represented headspace at the National Aboriginal and Torres Strait Islander Staff Network Workshop in Melbourne.

For an example of the client work achieved, the YARN SAFE Worker responded to an Aboriginal Young Person who walked in to headspace. This young person was homeless and fleeing a domestic violence family situation. This young person ended up disengaging from services at headspace Swan Hill and their whereabouts was unknown. This young person re-engaged with headspace Swan Hill specifically requesting follow up from the YARN SAFE Worker.





# Our healthy community

## Stepping together for healthy minds

The opportunity arose through Primary Health Network (PHN) Murray funding, to provide Psychological Services (PTS), Primary Mental Health Clinical Care Coordination (MHCCC) and Capacity building, thus enabling Swan Hill District Health (SHDH) to further develop services for the community and the broader region.

This funding facilitates working collaboratively with other health and community services providers, utilising the 'Stepped Care' approach to service provision.

The Stepped Care approach focuses on vulnerable, underserved groups and the whole person and views GP's as the cornerstone of client care. This approach also enables clients to be more accurately assessed in terms of appropriate referrals.

PHN funding has also enabled staff to complete the Applied Suicide Intervention Skills Training (ASIST) program in order to facilitate group education sessions re suicide intervention/ prevention. This program is community based.

SHDH – Counselling Service together with SHDH Primary Health Medical Centre have engaged suitably qualified professionals in order to provide these PTS, MHCCC and capacity building ( e.g. ASIST).



# Our healthy community

## Lungs in Action Program

The SHDH Lungs in Action Program is a Murray Primary Health Network (MPHN) funded program that was implemented to provide an evidence based community exercise program designed to help people with chronic lungs disease or heart failure maintain the benefits achieved through pulmonary and heart failure rehabilitation.

An Allied Health Assistant was employed by SHDH to facilitate the development and implementation of a Lungs in Action group in Swan Hill. Support is also provided by SHDH Exercise Physiologists, both to the Allied Health Assistant, as well as pre and post program assessments for the clients. As an additional initiative a Community Health Nurse was employed to provide Health Coaching for Lungs in Action participants.

Even though the program is still relatively new, a number of positive outcomes have already been shown. These include:

- Feedback from all clients that the program is beneficial. They are all seeing results in their exercise capacity, and all state they are feeling the benefits of being stronger and fitter.
- Each participant is interacting socially with each other more every week.
- All participants are getting more confident as the weeks progress.
- No participants have had a hospitalisation since commencing the program.

Some positive participant feedback includes:

- 'The facilitator is tremendous'.
- 'The highlight of my week'.
- 'The program has its own stamp and I'm very happy with it'.
- 'Enjoys the company'
- 'I like to see the new people I've met down the street'
- 'All exercise is good. Keeps me fit. Is something I will do ongoing. It gives me something to do and people to talk to'.

A number of program successes for the program have been identified. These include:

- Skills of the group facilitator and having a consistent exercise facilitator.
- Including a social component to the program.
- Flexibility of the program—Modifying exercises as required to meet participant needs.
- Conducting the group on a weekly basis.
- Support from Exercise Physiology staff for pre assessments and ongoing for the Exercise Facilitator.
- All of the clients have transitioned from hospital programs and seen the benefits of their rehabilitation programs, and have therefore found the transition to the LIA program easy.

The initial results of the Lungs in Action Maintenance Program have been extremely positive and participant feedback supports this. We look forward to continued successes with the program and further growth and development over time.





### Consumer Feedback Form

1. Where did you find the copy of this report that you read?

2. How much of this report did you read?

☐ All ☐ Most ☐ Some ☐ A little

3. Was the report easy to understand?

☐ Very Easy ☐ Easy ☐ Difficult ☐ Very Difficult

4. Was the report interesting?

☐ Very interesting ☐ Interesting ☐ Slightly interesting ☐ Not interesting

5. Is there any other information you would like to see included or altered in future issues?









**Swan Hill**  
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