

Vision

To be a responsive, relevant and holistic health service

Mission

To provide coordinated services that enhance the health and wellbeing of the community.

Values

Yea and District Memorial Hospital is committed to:

- Integrity
- Respect
- Accountability
- Responsiveness
- Impartiality

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Purpose

The purpose of the report is to inform the community of the quality and safety systems at the hospital (and how they have performed during the year) and any significant activities undertaken during the year.

Welcome

Welcome to our 2010 - 2011 Quality of Care Report. The aim of this report is to communicate to the general public our quality and safety systems, describe what we do and what our achievements have been during year.

During the past two years our Board of Management (BoM) has undertaken a strategic review of our operations. Two key initiatives of this process have been the establishment of a scholarship program and the creation of a new staffing position.

The scholarship program has been developed to support people interested in pursuing a career in areas related to health services.

The creation of the Community Health and Wellbeing Development Officer position reflects the BoM's acknowledgement that, to be a responsive, relevant and holistic health service, it needs to be more than just a bed-based service.

Fundamental to health services these days is the expectation that the organisation meet the requirements of a range of external assessments.

We are participants in accreditation for our acute service and District Nursing through The Australian Council on Healthcare Standards (ACHS).

The Aged Care Standards and Accreditation Agency (ACSAA) oversee our compliance with residential aged care as well as providing annual unannounced support visits to ensure our processes are ongoing.

We are also required to undertake annual internal audits (performed by external providers) of our business systems, food safety program and cleaning standards.

The hospital is also subject to unannounced visits by Worksafe to ensure our systems support patient resident and staff safety in the work environment.

Our ability to meet all of these requirements is only possible because of the commitment of all staff to our quality and risk management process and the dedication of the staff who lead in these areas. We thank them for the professional contribution they make to our organisation

Underpinning this work is a comprehensive education schedule and a suite of electronic information management systems which include the Victorian Health Incident Management System and the residential aged care package Management Advantage.

It has been interesting this year to see an increase in requests for Community Health services, including diabetes education and the dietitian.

The number of people requesting these services decreased markedly following the 2009 bushfires and as an organisation we understood that it would probably take about two years for people to again be able to focus on their chronic health conditions.

Finally I wish to thank all our volunteers for their continued commitment and acknowledge the support we receive from our Visiting Medical Officers and partner organisations.

Lorina Gray

Lorina Gray
Director of Nursing / Manager

Feedback

Feedback about the report and its content is welcomed and can be made in writing to:

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Suggestions on what could be included in the report in the future are also welcomed.

Risk Management

The organisation has continued our extensive investment of time and resources in the area of Risk Management by participating in the Victorian Health Incident Management System (VHIMS).

VHIMS is used by all publicly funded health services in Victoria which means that information collected on hazards and incidents by one organisation can be benchmarked against other similar organisations and across the health system.

The electronic web-based system guides staff through the completion of reports which use standardised language and categories to classify clinical incidents, occupational health and safety incidents and consumer feedback information.

As the system is electronic, reports can be easily created to inform senior staff, management and the Board of incident and hazard trends. The VHIMS system has also been used to report on the management of Y&DMH's risk register. There have been many benefits to aligning the two systems.

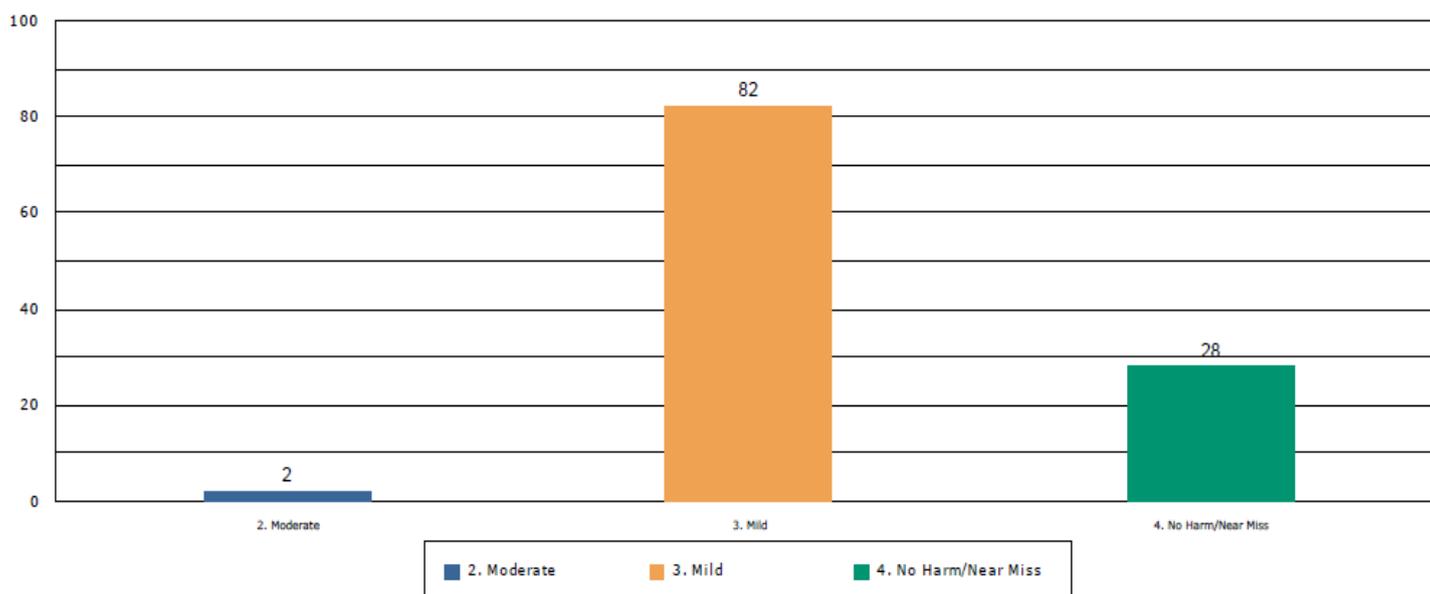
Reporting of incidents and hazards has increased since the commencement of the VHIMS system at Y&DMH, as staff have become more familiar with the online entry method.

Feedback on trends are also provided to staff on a regular basis to ensure good quality of reporting and that accurate information is being captured. Summary reports are also being provided on a monthly basis to the Board of Management.

The following graph represents the breakdown of results for the year into Incident Severity Ratings (ISR).

- The majority of incidents (82) were ISR 3 with a mild outcome
- 28 were ISR 4 (no harm or a near miss).
- 2 were ISR 2 (moderate)
- No ISR 1 incidents (severe or death) were recorded for the year.

Overall Severity (Actual) - Chart



Site Risk Survey

A site risk survey was conducted by Victorian Managed Insurance Agency (VMIA) during the year that involved reviewing the risk profile of our organisation and reducing the potential risk exposure. The aim of the survey was to identify risks together with treatment options, control solutions and activities that will assist with managing risks.

Yea & District Memorial Hospital achieved an overall risk rating of Very Good and the three recommendations made were rated at Medium, and have been addressed.

Summary of Observations

Yea District and Memorial Hospital has achieved an overall SRS rating of Very Good:

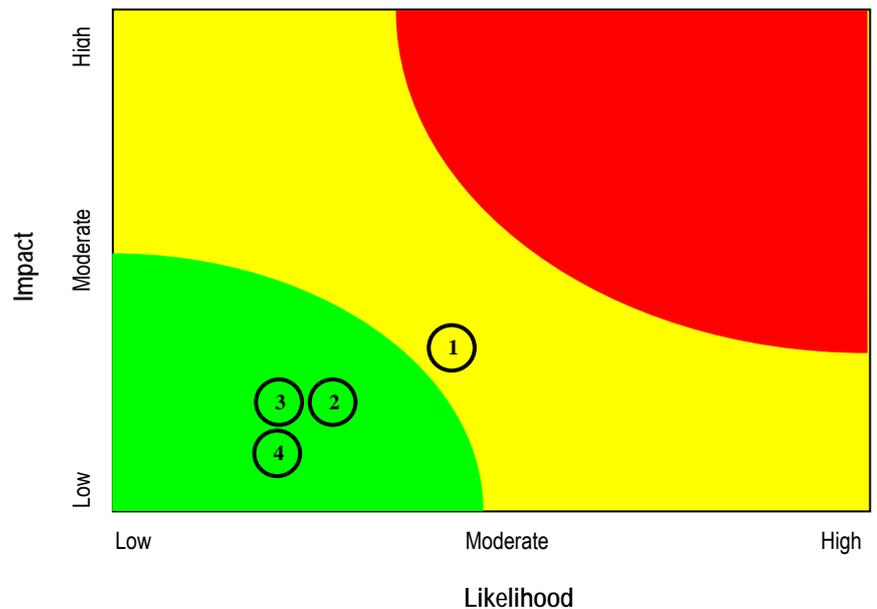
Needs Improvement	Adequate	Good	Very Good
Recommendations made with respect to controlling or treating high or extreme risks, or a significant number of low or medium level risks and/or a number of outstanding treatment recommendations	The site demonstrates risk management systems with a significant, or number of, risks requiring treatment or additional controls	The site demonstrates effective risk management with most risks appropriately controlled with minor recommendations having been made	The site demonstrates effective risk management with risks appropriately controlled and few or no recommendations have been made

Audits

An audit on “Business Continuity & Disaster Recovery Planning” was conducted during the year. The objective of the review was to report on the organisation’s adequacy of processes and procedures relating to the management and operation of business continuity and disaster recovery planning.

The audit results were very positive. Four recommendations were made in this report with only one of these being of a ‘medium’ risk and all three remaining comments being of ‘low’ risk. Again, these recommendations have either been completed or are near completion.

RISK EXPOSURE – Risk Map



LAOS Reporting

The Limited Adverse Occurrence Screening (LAOS) program is focused on identifying, monitoring and addressing adverse events and opportunities for quality improvement in clinical care in small rural hospitals. This is primarily achieved through the review of episodes of care that have occurred within these hospitals. The program aims to contribute to a safer environment for both patients and clinicians.

The selection criteria for LAOS review are:

- Patient death
- Unplanned return to theatre within 7 days
- Unplanned readmission within 35 days of discharge
- Transfer to another acute care facility
- Patient length of stay greater than 35 days
- Any record which has been recommended by a doctor or other health professional for review

Staff Education

Y&DMH prides itself on having an extensive, highly accessible and up to date education program available to all staff. During the last accreditation the surveyors comments included: “the access to online learning and competency packages for staff is exemplary”. They also commented on the “ease” of access for staff.

Feedback on progress is provided on a monthly basis to all staff as well as individually as required. There are currently more than 37 competencies available. The education program was also boosted this year by the commencement of a monthly in-service program called “Yea for Education”.

The topics covered so far have included back care for staff, diabetes management and bowel management. The feedback from these sessions has been extremely positive.

The LAOS reports are presented and discussed by our Visiting Medical Officers (VMO'S) at their monthly meetings with our Director of Medical Services (DMS). This provides an opportunity for learning and sharing of information and directs clinical improvement.

An adverse event is defined as “an untoward patient event, which under optimal conditions is not a consequence of the patient’s disease or treatment”
Department of Health

Residential Aged Care staff also have access to quality education through The Aged Care Channel, a satellite transmitted education package. The programs reflect current world best practice and evidence based research.

The programs are watched live, with staff able to participating in interactive questions and answer sessions, or recorded for later viewing by individuals or staff at special education days.

Quality & Safety

The commitment by the organisation towards quality improvement was well documented and articulated during the most recent accreditation survey including acknowledgement of YDMH’s involvement of staff and consumers in quality projects.

Staff participation in the quality process is the cornerstone “Yea for Quality” program. The program has been running for more than five years and makes sure staff and consumer’s suggestions are objectively discussed and a solution followed up.

Maintenance Program

This year an extensive amount of quality improvement energy has been focused on a review of the maintenance program.

An initial audit was undertaken on the existing maintenance program with the main objective of identifying the capability the of current facilities maintenance management processes and to make sure it was consistent with the industry accepted best practice.

The audit found that the overall control environment surrounding the facilities maintenance processing and compliance with policy and procedures required improvement. Recommendations on how these could be made or controls strengthened within the existing control environment were detailed in the report.

During the year many achievements were made in this area which included the development of clearly defined roles and responsibilities of the maintenance worker and gardener.

Extensive work was put into reviewing the preventative maintenance schedule. Although an online system was investigated, it was finally agreed that a paper based ledger was the most user friendly for all staff.

The corrective maintenance system was also overhauled and is now reviewed on a monthly basis to ensure that all tasks not completed are being appropriately followed up.

Monthly maintenance meetings were also arranged as a result of the review and have facilitated prompt and frank discussion of issues leading to appropriate remedial action when required.

The review and implemented changes have been very successful to date and ongoing improvements will continue as opportunities arise.

1 page of 8 from the Preventative Maintenance Schedule

Victorian Patient Satisfaction Monitor (VPSM)

The Victorian Patient Satisfaction Monitor (VPSM) collects feedback from Victorian adult inpatients and reports this back to the hospitals. It provides organisations with information about how consumers perceive the organisation across a wide variety of areas. These results are benchmarked against like sized organisations for comparison.

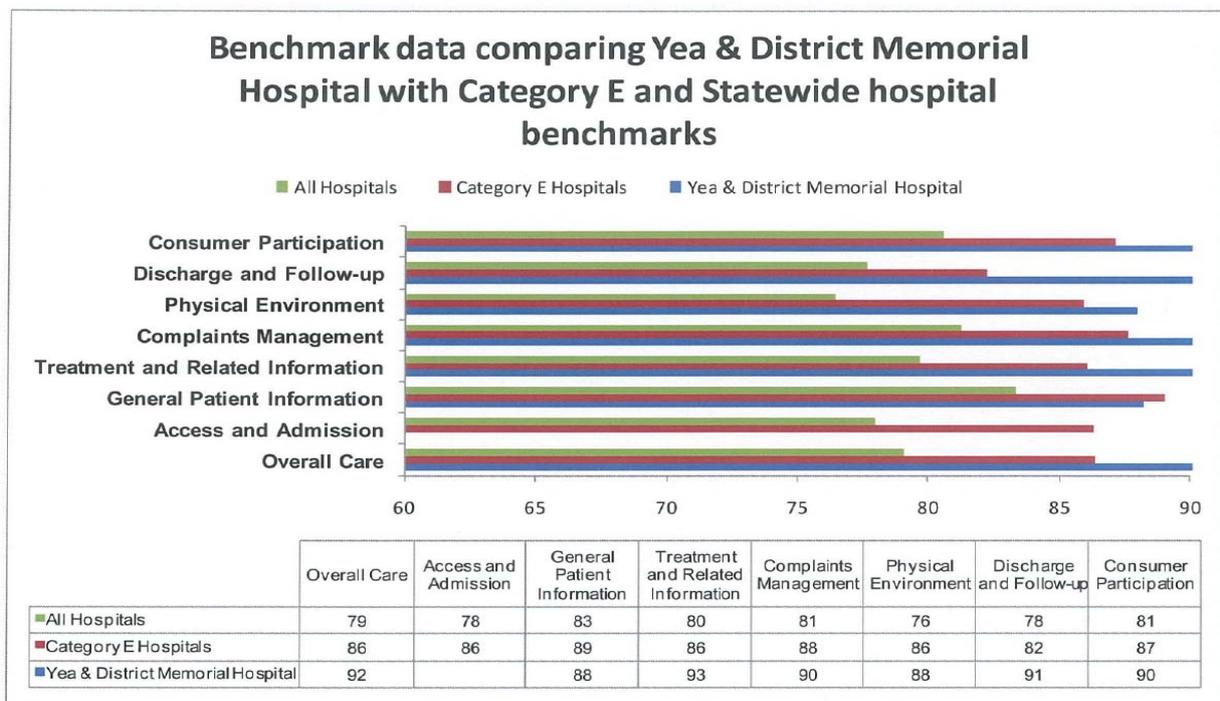
The results from the VPSM surveys assist us with our quality improvement activities. In particular, the verbatim responses from our consumers are extremely useful and have been the catalyst for changes within the facility such as reducing the noise for inpatients. Staff are also given feedback through the dissemination of these results.

Historically, YDMH has performed exceedingly well in the six monthly results provided, with the organisation regularly being either the top or in the top performers in the “Small Rural or E sized” category.

The hospital has again achieved excellent results this year and has been rated highly by our consumers in most areas in comparison to all Victorian hospitals including liked sized organisations.

Victorian Patient Satisfaction Monitor – Wave 20: January 2011 to June 2011

SECTION 3: Summary Indices Results



Accreditation

Hospital Accreditation

YDMH is required to demonstrate that we have a robust quality and safety system through participation in an externally conducted accreditation program. The achievement of accreditation is public recognition that the health service has demonstrated they have met the 47 standards they are assessed against.

External assessment is conducted by the Australian Council on Healthcare Standards (ACHS) organisation against the following principles:

- A consumer focus
- Effective leadership
- Continuous improvement
- Evidence of outcomes
- Striving for best practice

The organisation was awarded four years accreditation from July 2010 until 2014. All of the six recommendations from the previous survey have been actioned with many of these being fully implemented or in progress.

Aged Care Accreditation

Aged Care Standards and Accreditation Agency (ACSAA)

Both Rosebank Nursing Home and Rosebank Hostel are fully accredited with the Aged Care Standards and Accreditation Agency (ACSAA) until August 2012.

The annual unannounced assessment visit from ACSAA occurred on 23 May 2011, with the assessors report showing they were satisfied the facilities continue to meet the standards they require for provision of quality care to our residents.

District Nursing Accreditation Home and Community Care (HACC)

In March 2011, the Community Care Common Standards (CCCS) replaced the HACC National Service Standards as the basis for accreditation of HACC service providing agencies.

There are now three standards:

- Effective Management
- Appropriate Access and Service Delivery
- Service User Rights and Responsibilities

These standards have eighteen expected outcomes.

A quality review process conducted once in every three yearly cycle, aims to encourage service providers to review, refine and improve service delivery.

The review process involves:

- self-assessment ,
- an on-site visit,
- a quality review report and
- an improvement plan to be developed and acted upon within the next year.

The process takes twenty weeks from notification of the quality review to completion of the improvement plan. Yea District Nursing Service has not yet received notification of the quality review, however it is expected within the next year.



Infection Control & Cleaning

Yea Hospital continues to have two Infection Prevention and Control staff members, one qualified in the area of Infection Control and another who has completed an accredited short course in Infection Control with a focus on immunisation and hand hygiene. Both are Division 1 registered nurses.

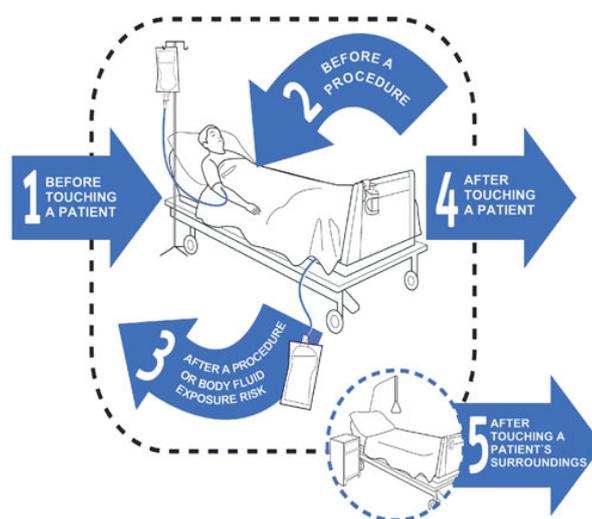
Infection Prevention and Control is essential for monitoring and providing a safe and pleasant environment for all patients, residents and their visitors as well as staff health. Infection Control is a complex area which overlaps with Occupational Health and Safety and has responsibility for the following areas:

- Food Safety
- Cleaning Standards
- Staff Immunisation/Health
- Waste management
- Linen management
- Storage and use of Sterile Stock /Single use items.
- Micro-organisms identified in specimens
- Antibiotic usage
- Hand Hygiene
- Outbreak Management
- Blood borne infections
- Urinary tract infections
- Surveillance
- Developing and reviewing policies and procedures to reflect current standards, regulations and legislation.

Hand Hygiene

Hand hygiene continues to be monitored and recorded by the Victorian Nosocomial Infection Surveillance System (VICNISS) with reports submitted quarterly.

Data is collected nationally by Hand Hygiene Australia and collated to get international comparisons.



'My 5 moments for Hand Hygiene' © World Health Organization 2009. All rights reserved

Hand Hygiene Compliance Rates

Overall Compliance Rate Acute July 2010 - June 2011

National Compliance Rate is 71.3% June quarter 2011 which indicates Yea is well above national level.

Correct Hand Hygiene Actions	Total Moments	Compliance Rate	LCL	UCL
169	203	83.3%	77.5%	88.7%

Compliance Rate by Moment

Moment	Correct Hand Hygiene Actions	Total Moments	Compliance Rate	LCL	UCL
1 Before touching a patient	84	97	86.6%	78.4%	92%
2 Before Procedure	19	19	100%	83%	100%
3 After Procedure	19	22	86.4%	66.7%	95.3%
4 After Touching Patient	24	27	88.9%	71.9%	91.1%
5 After touching Patient Area	23	38	60%	44.7%	74.4%

LCL- Lower 95%Confidence Interval

UCL- Upper 95%Confidence Interval

VICNISS Data 2010 - 2011

What	Number
Methicillin-resistant Staphylococcus Aureus (MRSA) infections	0
Vancomycin-Resistant Enterococci (VRE) infections	0
Clostridium Difficile Infection (CDI)	0
Sharps injuries/needle stick wounds	0

Food Safety

The hospital kitchen continues to provide up to 60 meals a day covering the acute ward, Rosebank Nursing Home, Rosebank Hostel, staff as well as Meals on Wheels for the Yea and Kinglake area.

The Department of Health requires that our kitchen and food services are the subject of an external audit each year. The kitchen is also registered by the Murrindindi Shire Council.

The audit result was complimentary with some minor suggestions for improvement, including a review of the food safety program to maintain up-to-date and easier recording of Hazard Analysis Critical Control Point (HACCP) information.

All kitchen staff were updated with training certificates compliant with healthcare facilities HLTFS207B.

Antimicrobial Stewardship in Australian Hospitals

To assist the appropriate use and management of antimicrobials, the Australian Commission on Safety and Quality in HealthCare has developed an innovative publication for use by hospitals. A full program is to be developed according to The Therapeutic Guidelines and future outcomes evaluated.

Cleaning

The External Cleaning Audit for 2011 indicated the hospital maintained its high standard of 95.2% with all areas compliant with Cleaning Standards Victoria. Many thanks to our Hotel Services staff who work hard at it!

Staff Health and Immunization

Influenza vaccination was again offered and was taken up by many members of staff. Whooping Cough (Pertussis) is the latest community spread disease with revaccination of parents and grandparents of babies recommended.

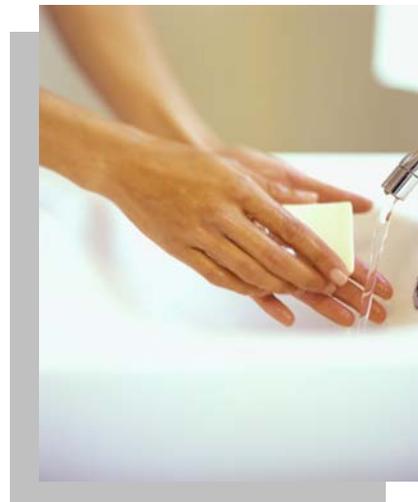
There have been no influenza outbreaks recorded throughout the Complex during the past year.

Infection Control

Hume Region Infection Control Compliance Audit for 2010-2011

- Organisation 91.5%
- Clinical 95.8%

Both were a slight improvement on previous years.



Occupational Health & Safety (OH&S)

The year has seen the Occupational Health and Safety Committee meet regularly to discuss and implement change via feedback through our various reporting systems.

One of these systems is our housekeeping audits that are conducted by a variety of staff across the organisation. Some of the areas these audits look at are that floors, passageways, entrances and exits are clear of any obstruction. Are the rooms uncluttered? Are areas adequately lit? These measures are taken to promote a safe environment for everyone.

No Lift

One of the projects undertaken has been a complete review of our No Lift Equipment used extensively throughout the facility. Staff input over all shifts has been paramount so that compliance is achieved.

Manual handling purchases during the year have included:

- two new floor line beds,
- one comfort chair,
- a set of floor line mats and
- an armchair recliner.

As the needs of the residents in our aged care areas change the equipment that is available has enabled them to stay in their own environment.

Staff No lift compliance has continued throughout the year. A back care session was conducted by the a registered physiotherapist.

Hazards

The two main systems used to identify hazards are VHIMS and the maintenance register. The maintenance department's process for identifying equipment that requires repair or replacement is timely and effective.

The staff have embraced the uptake of VHIMS and the computer based system has improved our response time to hazards and risks.

Hazardous Substances

Chemical use has been reduced with the implementation of the new chemical supplier. The supplier comes on a regular basis to audit the

dispensers, equipment and supply and provides education to staff.

Falls Prevention

There is a continued commitment in residential and acute care to falls prevention. All residents entering the residential aged care facilities are assessed using the Falls Risk Assessment Tool (FRAT).

The tool asks questions like:

- Have you had any recent falls?
- What medications are you on?
- Is your footwear appropriate?
- Do you need assistance or a walking aid to mobilise
- Do you have any problems with your eyesight.

A FRAT re-assessment of each resident is done every six months. Residents are also seen by the physiotherapist annually or as required. Part of this assessment includes an individual exercise program which promotes mobility, strength and wellbeing for the residents.

Falls Data

During the 2010-11 period there were twenty six falls related incidents:

- 8 were in Acute (No fractures)
- 3 were in High Care (No fractures)
- 15 were in Low care (2 fractures were sustained)

Medication Errors

During 2010-11 there were 16 medication errors reported across the organisation. These involved incidents such as eye drops opened but not dated, an issue with a medication chart, a particular medication not being available.

No incident resulted in harm to any resident or patient.

Worksafe

During Worksafe visits during this period we have been found to be compliant.

Pressure Ulcer Prevention

Staff at Y&DMH remain committed to the initial and continual assessment of all patients admitted into their care.

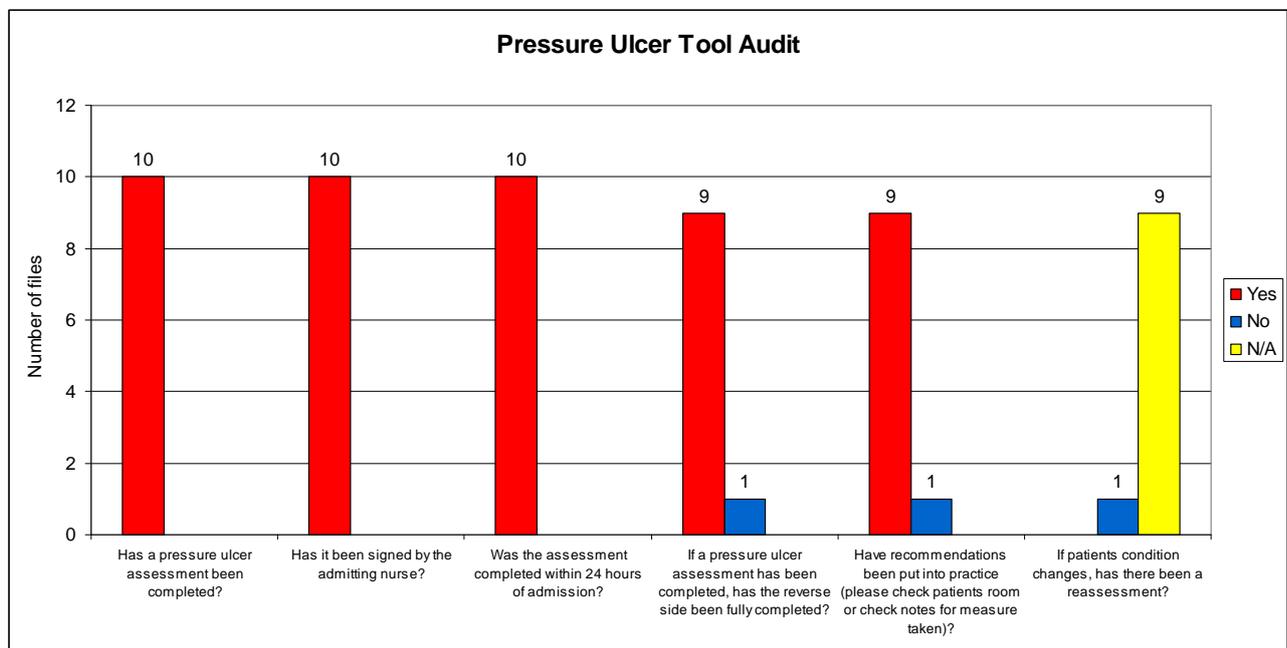
The hospital has implemented a flow chart based on the Braden Risk Assessment Scale. An audit of ten randomly selected patient files, completed in June 2011, indicated an excellent rate of compliance by staff in use of the new chart.

Staff assess a patient's initial care needs on admission and review this on a daily basis. The patient, or delegate, work in conjunction with staff and jointly sign the patient's care plan. Allied Health professionals are included in the assessment process, if required.

Staff continue to be educated in the identification and prevention of pressure ulcers. All care staff are required to complete the compulsory education on pressure ulcer prevention on a yearly basis.

Patients themselves are educated about strategies to prevent pressure ulcers on admission to the ward and have access to the Victorian Quality Council's brochure *Move, Move, Move* - a copy of which is kept by each bed.

The hospital is pleased to announce that with this continual assessment, evaluation and care, there have been no pressure ulcers reported in the hospital for the last 12 months.



District Nursing

Yea District Nursing Service provides nursing care in the home. Registered nursing staff make home visits to people who live in Murrindindi Shire in areas such as Yea, Flowerdale, Glenburn, Molesworth, Strath Creek, Highlands and Kinglake.

The service operates from the Yea & District Memorial Hospital and any person who considers that they are in need of nursing care at home may contact the hospital to access the service.

Nursing care involves a diverse range of activities including:

- wound care
- management and administration of medications
- education and monitoring of chronic illness such as diabetes
- clinical skills such as catheter care or peripheral intravenous catheter care
- support for palliative care clients and their families.

Active Service Model

Yea District Nursing Service is committed to ongoing quality improvement and throughout the year YDN have continued with our major project – implementation of the Active Service Model (ASM).

The ASM approach to service delivery aims to improve client outcomes by achieving a more independent lifestyle for clients. This is done through promoting social inclusion – encouraging participation in social activities and community engagement.

Review of the action plan submitted to the Department of Health last year has enabled us to monitor our progress in implementing the ASM.

Measurable outcomes have been achieved in promoting understanding of the ASM. An online education package is available to staff and completion rates provide an indication of the level of awareness in the organisation.

Additional staff training in health coaching techniques supports our ongoing implementation of the ASM approach.

ASM Priorities for this year are:

- to work with clients in goal setting:
- clearly identifying what the client would like to achieve by having the service provided
- developing strategies to achieve their goals, improving independence and
- establishing social and community connections.

Active Service Model - service delivery which aims to improve client outcomes by achieving a more independent lifestyle for clients.

This is done through promoting social inclusion – encouraging participation in social activities and community engagement.



Professional Education

Quality of care is dependent on the level of skills and knowledge of staff. Ongoing professional development has been supported by the organisation. Members of staff have attended training in wound care, palliative care, infection control and health coaching.

A new innovation for this year has been the introduction of webcasts on the internet. Webcasts enable staff participation in education sessions via the internet. This is particularly useful because it is interactive – participants have the opportunity to discuss issues with clinical experts. It is also valuable because it eliminates the need to travel and enables more staff to attend the sessions.

Wound Care

Wound care has remained a major focus of training. The Hume Region Wound Care Project has organised specialist clinicians to provide education sessions which have been attended by Yea staff. New equipment, such as the Visitrak which is used to measure wound size has also been provided through this program.

Staff membership of the Australian Wound Management Association has been continued. New guidelines for the management of venous leg ulcers will be released in October 2011. This will impact on the treatment nurses provide and it is vital that clinicians are aware of the details of the new guidelines.

Client Satisfaction

The response rate for the client satisfaction survey was pleasing and YDN appreciate the effort made by those who took the time to complete the survey. The results will enable us to benchmark our performance against like agencies in the Hume region but more importantly it has enabled us to identify key aspects of service delivery which are valued by clients.

The coming year

Our endeavours for the coming year will be directed at maintaining a reliable, flexible service which is responsive to client needs, whilst implementing the ASM plan.

Our goals for the coming year will be to raise the levels of client independence, to meet challenges with a positive attitude and to work for the best interests of clients.

Thank You

Throughout the year staff enjoyed a cordial relationship with clients and without exception clients and families have been courteous and considerate. In particular YDN would like to thank those people who responded to the client satisfaction survey. Their input is valued and will assist in ensuring that YDN continue to improve the service.

Client Visit Summary

© Uniti 2011

Yea and District Memorial Hospital
Yea and District Memorial Hospital
District Nursing & Community Health

01/07/2010 to 30/06/2011

Category	Clients	Visits	Minutes	AvMin
Community health high	0	0	0	
Community health low	0	0	0	
Community health medium	0	0	0	
Extended Aged Care in Home	4	165	4095	24.8
Hospital-in-the-Home	1	5	240	48.0
Linkages	0	0	0	
Pensioner	35	1248	46655	37.4
Post-acute Care	17	74	2955	39.9
Private	1	11	375	34.1
Special charge	5	7	460	65.7
TAC	1	13	480	36.9
Veterans' Affairs	11	243	8460	34.8
Work Cover	0	0	0	
Total	75	1766	63720	36.1

Other Time and Kilometres

Kilometres:

23590

Residential Aged Care

The residential aged care area at Yea & District Memorial Hospital has both a low care facility (Rosebank Hostel) and a high care facility (Rosebank Nursing Home). These are both located on the same premises as the hospital.

Both facilities are fully accredited with the Aged Care Standards and Accreditation Agency (ACSAA) until August 2012.

Following on from work commenced in 2010, staff are in the final stages of moving from paper to electronic resident documentation. This is being done with a computer program called Management Advantage (Manad). Staff have embraced this change and are now seeing the benefits of the new system, with the ability to access information quickly and easily. The added bonus of electronic records is that data is more readily available for reports and analysis.

Aging in place - Some aged care homes offer both low level care and high level care, which allows a person to remain in the same home even if their care needs increase.

Rosebank Hostel

The low care facility has 15 residents, each with their own bedroom and attached ensuite. As the organisation is committed to the 'Aging in Place' policy there is currently a mix of low care and high care residents. Residents have access to a number of allied health professionals, including podiatrist, physiotherapist, occupational therapist, diabetes educator, speech therapist, audiologist, optometrist, psychologist and dietician. Residents also have an annual pharmacy review to ensure their medications are the most appropriate for their care.

This year a medication endorsed enrolled nurse (EEN) has been rostered on each morning and evening shift along with a PCA (patient care attendant). This has worked well with the EEN able to administer medications to the residents. A registered nurse continues to be available to assess unwell residents and handle any concerns that the EEN needs assistance with.

Throughout this year Rosebank Hostel has farewelled six residents, some to the nursing home and others passing away. As a result staff have welcomed new residents who have settled in well and now see Rosebank as their home.

In late 2010 we farewelled our Diversional Therapist, Glynne, who left after many years of contributing to the daily lives of our residents. As part of the process of appointing a new activities coordinator, the facility made some changes to the program and 2011 has seen an expanded range of activities available to the residents. The feedback from residents about the new program has been very positive.

Y&DMH welcomes Sharon to the position of Activities Coordinator and acknowledge with gratitude the volunteers who have supported her in running a varied and interesting program for all our aged care residents.



Staff continue to expand their knowledge and skills and have been busy completing online competencies as well attending external education sessions.

A number of education topics have been covered internally this year including: how to take a wound swab, diabetes update, pain management in wounds, Hepatitis B and C, Elder Abuse, use of the Visitrak system in wound care, back care for staff, use of the Carendo care chair and information on bowel management.

Continuous quality improvement remains a high priority for all our staff and during 2010/11 included such things as:

- Replacing the remaining standard resident mattresses with pressure reducing mattresses to aid in maintaining optimal skin integrity and minimises the risk of pressure ulcers
- Purchase of a new large screen TV
- Setting up a staff work area with a computer in the hostel area for improved access to computer programs required to complete documentation
- Replacing the hostel kitchen crockery
- Installation of sun blinds over the sky lights in the corridors to reduce heat in the warmer months (these were also installed in the nursing home)

Rosebank Nursing Home

Our high care facility has 10 residents, with each resident having their own bedroom and attached ensuite.

As part of our commitment to No Lift Policy the facility has tracking in the ceiling of each bedroom to ensure that residents who are unable to climb out of bed by themselves can be moved using the Voyager Lifter System. Along with the use of slide sheets this helps staff transfer residents with minimal risk to both the resident and staff.

Our staffing in high care has a mix of registered nurses, enrolled nurses and patient care attendants to make sure quality care is received by all residents.

Rosebank Nursing Home had minimal changes in residents this year, with only one resident passing away and the admission of one new resident following this.

All high care residents have access to the same range of allied health professionals as hostel residents. The close proximity to the local doctor's surgery means residents are able to have a review by their doctor when required.

Some examples of continuous quality improvements in the nursing home this year include:

- An upgrade of the nurses' office and installation of a second computer for staff
- Purchase of a new large screen TV in the lounge
- Purchase of another floor line bed and electronic arm chair for residents
- Review and implementation of a new menu by the dietician for all residents

Residential Aged Care Satisfaction Survey

Results from our annual residential aged care satisfaction survey showed that residents and /or their families/representatives from both the hostel and nursing home are overall very satisfied with the care and services provided by Y&DMH.



Yea Community Health Services

Community Health and Wellbeing

The role of the Community Health and Wellbeing Development Officer is to link the community with things they need to improve health and wellbeing outcomes. The position is unique to the region and to the current health model, but is proving a successful strategy to link health and wellbeing into community thinking and activities.

The position is loosely framed to assist community groups and organisations with health and wellbeing planning, funding applications, advocacy and other resource management as required.

Through this position, the hospital has also been actively involved in establishing some new projects in the community. Each project is driven by a need identified by the community and matches the priorities of federal, state and regional health organisations.

These projects aim to improve social connectivity, physical activity, community capacity and community education.

Some of these projects include:

- Light'n Up,
- Mental Health Awareness
- Children's Hub
- Monday Night Club
- Heart Foundation Walking Group.



The Light'n Up project involved 45 businesses and 10 different community partners to make lanterns for the shop windows for Christmas.

Light'n Up

The aim of this project is to link diverse community groups and businesses in a common meaningful activity.

A total of 346 lanterns were made by children, teenagers, adults and older people from 11 community groups in the Yea area – each lantern representing the efforts of one individual. These groups included three local primary schools, the high school, kindergarten, playgroup, Yea Women's Room, two reading groups for children and local aged care hostel residents.

The lanterns were then displayed in the windows of 45 businesses in the Yea CBD between 3rd December 2010 and 31st January 2011. The lanterns were lit with rechargeable LED lights to minimise costs and promote sustainable living. Each business shop-front housed 3-18 lanterns.

As well as local businesses a large range of community agencies and groups were involved including: Berry St, Murrindindi Shire Council; Yea Business and Tourism association; Yea Community House; 100K North; Rotary Club of Yea; Friends of Yea Railway; The Great Vic Bike Ride Organisers and the Yea Community Market.

The organisation and storage of 346 lanterns was significant, however the project was easy to roll out and had a large uptake of in-kind contribution. For example, the press release was picked up by Yea Chronicle and Flowerdale Flier, whilst a local website Yea.com also published an article.

Support from businesses was significant (98% of Yea shop-front businesses participated) and integral to the success of the project.

Businesses reported tourist appreciation of the project and one business reported a tourist returned to Yea with their friend to show them the project. There are also anecdotal reports of children "dragging" parents to shops to see their lanterns.

Unexpected outcomes included increasing physical activity as families promenaded looking for lanterns and increased relationship building between shop-owners as lanterns were swapped to accommodate friends and relatives lanterns.

Mental Health Awareness

A series of seminars and workshops have been held with qualified speakers talking on a range of subjects around mental health awareness and minimising risk of onset of mental health issues. Subjects have ranged from "Dealing with the Consequences of Long-term Stress" to "You Are Worthy".

All sessions have been well attended with over 100 community members benefitting from the information. A communication database has been developed from these sessions as part of the on-going service of keeping community members informed of upcoming health and well-being programs.

Monday Night Club

A group of executive members from local services groups were concerned about the on-going community fall-out from the 2009 fires. They came together to try to develop some structure to improve efficiencies and minimise volunteer burnout.

Y&DMH was able to fund a facilitator to assist the group in planning and together with the Murrindindi Shire Council; the Monday Night Club was formed.

This project offers key community people the opportunity to come together to learn about what others are trying to achieve in the community and to discuss "hot topics" with other community members in a balanced and supported environment.

Meetings are held monthly and 12-14 people attend.

Children's Hub

The hospital has been actively involved in helping the community find the common ground to establish long day care for Yea and surrounds.

Early Development Index data for Yea and surrounds suggests a need for more support for families is required.

Building an environment to support long day care is a strategic way of achieving better services and support to 0-8 year olds and their families. Access to reliable, in-venue care is a proven determinant of mental health in communities.



Yea Pre-School committee meeting with Children's Hub committee to discuss licensing arrangements for long day care.

Heart Foundation Walking Group

Having a regular, low cost, safe exercise option in our community is a priority for all.

The Heart Foundation Walking Group has been a success for walkers looking for that extra bit of encouragement in maintaining an exercise plan.

The group walks three times a week at varied times to suit the varied needs in our community. Yea Community House is partnering this project and offering volunteers to assist in the group leading roles.

Fifteen regular walkers currently use the group.

Lower Hume Primary Care Partnership (PCP) - Health Promotion

The local health promotion program is summarised in the Community Health Plan 2009 - 2012.

This plan is the product of all health promotion agencies planning and working towards a common goal.

The priority of mental health and wellbeing has been established through recognition of local needs and linking them to local, state and federal government priorities.

The local health promotion vision is "to promote positive mental and physical health within the Murrindindi Shire, by creating supportive environments and increasing psychological wellbeing and resilience".

Engaging with Community

Yea & District Memorial Hospital is one of the largest employers in the local area and it is connected to and influenced by the community it serves. The hospital makes every effort to be a responsive, relevant and holistic health service by engaging with the local community on topics related to health and wellbeing.

Traditionally healthcare has been about going to the doctors when you are sick and the hospital when you are *really* sick (or there is an emergency). However there is a growing understanding that healthcare can be more than this, it can be about being a healthy person in a healthy community. People want to be part of the decisions that help them stay well or help them through tough times in their life, whether it be mind, body or spirit.

Y&DMH has a variety of ways it involves people in decision making about their health and the services provided by the hospital.



Yea Hospital and Rosebank Auxiliary

The fundraising year started with the Wedding Gown Extravaganza / Afternoon Tea, a fashion parade of wedding gowns through the ages, organised and presented by Val Borrie. Cooperation and support for the event came from Auxiliary members, Val's friends and the wider community.

It was a fabulous occasion, very well attended and thoroughly enjoyed by all. The event proceeded very smoothly - a tribute to Val's preparation and the great teamwork of the Auxiliary members. The Extravaganza was the 'talk of the town' for several weeks afterwards.

The annual raffle, another beautiful painting donated by Meg Heres, was also very successful. Meg, through her paintings, has been the major benefactor of the Auxiliary over many years and we thank her most sincerely for her support of the Hospital and Rosebank.

The Auxiliary again hosted the morning teas for the residents and The Entertainers on their visits to Rosebank. Stricter food safety regulations means the hospital must now provide the food for the morning tea; however the trading table sales have continued.

The carols evening in December was another happy, lively occasion where the Auxiliary provided supper for all in attendance. However, it has been decided that in 2011 the function will be held in the afternoon rather than the evening as staff have found some residents are too tired to attend after other Christmas activities and the extra visitors the festive season brings. Hopefully the new time slot will suit everyone.

In February the Auxiliary welcomed two new members - Val Hauser and Fiona Tinney. The Auxiliary hope they enjoy their involvement.

The Progressive Luncheon was held in April. Unfortunately the main course venue was cancelled due to inclement weather and as a result both the main course and dessert were held at the Murrindindi Shire Council chambers in Yea. Sincere thanks go to Bruce and Pauline Callander for the use of their lovely garden and garage for the first course.

The luncheon proved to be very successful, despite the weather, with delicious food donated by Auxiliary members. A happy atmosphere prevailed with lots of chatter and laughter. Leanne Pleash was the guest speaker - thank you Leanne for your interesting talk.

Funds raised by the Auxiliary this year have purchased the following items:

- New digital televisions for the Rosebank Hostel resident's lounge and for patient rooms in the hospital
- A new CD player for Rosebank Nursing Home
- An automatic fish feeder and net for the fish tank in the hostel
- Various items for activities in the hostel including bocce balls, Wii console and games and an André Rieu DVD

Warm congratulations are extended to two of our Auxiliary members. Val Borrie was named the Murrindindi Shire Citizen of the Year for 2011 at the Australia Day celebrations in January and Margaret Mahon has recently received a Life Membership from Red Cross. Both ladies are tireless workers for the Yea community in many capacities and their awards are richly deserved.

Thanks go to Lorina Gray, DON /Manager, Heather Luke, Nurse Unit Manager - Residential Aged Care and Sharon Fern, Activities Coordinator for their interest and cooperation in Auxiliary matters and especially Yvonne Padgett, Special Projects Coordinator, for her help and advice in planning Auxiliary major functions.

Finally, thank you to all members of the Auxiliary for their friendship and hard work, especially Mary Coonan, Vice President, Ruth Crockett, our Secretary and Joan Baumgartner, Treasurer.



Rosebank Volunteers Group

Our volunteers at Rosebank have had a very busy year.

New activities have been introduced to the activities program including dominoes, men's afternoons, birthday high teas, animal visits, carpet bowls, riddles and quizzes and golf putting to name a few. Our regular activities are still as popular as ever and are being well attended by long term and new residents alike.

A big hit this year, was the introduction of the Wii Consol which was generously donated by the Yea Hospital and Rosebank Auxiliary.

This year volunteers underwent training in Brain Gym exercises presented in a session presented by Kinesiologist and registered nurse, Cynthia Leitinger.

Theme days are always popular at Rosebank with a number of volunteers being on hand to help. This year residents celebrated St Patrick's Day with a visit by some Irish dancers, Melbourne Cup Day with a local version of Rosebank Races and Fashions on the Field, as well as the football grand final and footy tipping BBQ and trophy presentation.

It is wonderful to see new volunteers signing up to be part of our busy team. Everybody has something to offer, whether they have a one-on-one session with a resident or something more involved such as leading an activity group, helping on outings or taking a resident to an appointment.

Y&DMH values every contribution made by our volunteers. They are generous with their time and dedicated in their service. Without their support our residents would not have as many interesting and varied activities to look forward to.



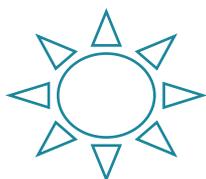
Organisation Snapshot

Y&DMH is committed to enhancing the health status of the community it serves through the achievement of clinical excellence and the provision of high quality health services.



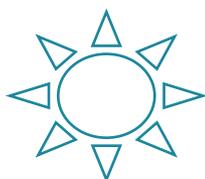
The organisation is comprised of four key areas, Acute, District Nursing, Residential Aged Care and Community Health. The Acute area has 10 beds. Rosebank Nursing Home and Rosebank Hostel provide the residential aged care service. The nursing home has 10 residents and the hostel 15 residents.

Y&DMH has responsibility for the provision of community health services to the west side of the Murrindindi Shire. Housed in The Grace Bennetts Centre, Yea Community Health has a range of services available including a diabetes educator, dietitian, occupational therapist and a psychologist. A speech pathologist and counsellor are available in Kinglake only.



Community members also have access to an extended range of health services onsite at the hospital as several private providers utilise consulting rooms on a permanent or regular basis. Private services available to the community include podiatry, audiology, physiotherapy, pathology collection, ultrasound, optometry, echocardiography and psychology services.

Staff from all areas of the organisation also work in partnership with other local service providers, such as Alexandra District Hospital, General Practitioners, Murrindindi Shire Council, Mitchell Community Health Services and other visiting services, with the aim of providing the best model of care for people seeking to improve their health outcomes.



Y&DMH is also a member of the Lower Hume Primary Care Partnership and is working together with other agencies to address the catchment wide health priority of mental health promotion.



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