

Yea & District Memorial Hospital

Quality of Care Report 2007 – 2008



Quality of Care Report 07/08

Purpose

The Quality of Care report is produced each year as part of the Annual Report and is a requirement of the funding Yea & District Memorial Hospital (Y&DMH) receives from the Victorian Government.

The Quality of Care report is primarily written for the community serviced by Y&DMH. This may include patients, carers and clients of Y&DMH, Yea Community Health Service and Yea District Nursing Service.

The purpose of the report is to inform the community of the quality and safety systems at the hospital, the activities undertaken during the year and the services available to the general community through the hospital, residential aged care, district nursing and community health.

Community feedback about the report and its content is welcome and can be made in writing to:

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Special Projects Coordinator
Yea & District Memorial Hospital
45 Station Street
Yea VIC 3717

Suggestions on what could be contained in the report are also welcome.

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Community Participation

With its long history of community participation in the development and continuation of its services, Yea & District Memorial Hospital holds a unique position in the community.

The organisation has benefited from the contribution of community members in a variety of different areas over the years. The role community members play in the planning, development and evaluation of the services provided Y&DMH is greatly appreciated.

Some of the current ways the community are involved in the health service include:

- Victorian Patient Satisfaction Monitor
- Complaints, Compliments and Suggestions
- Diabetes Support Group
- Buds & Blossoms
- Community representation on the Patient Care Review Committee
- Volunteer Group

Cultural Diversity

The Government recognises the importance of ensuring that Victorians from culturally and linguistically diverse (CALD) backgrounds have full and fair access to health services.

Funding is provided to all Victorian public acute hospitals to assist them to develop a planned and integrated approach to CALD service delivery. Y&DMH has implemented a Home and Community Care (HACC) CALD plan and an organisational plan for patients, resident and clients.

2007/08 CALD Plan achievements:

- E-Learning package was developed to educate staff on relevant sections of the “using interpreter services” information. To-date 18 staff have completed the training.
- Discussions were held with VicRoads and Murrindindi Shire which resulted in a review of the directional signage for the hospital. One new sign was erected and one existing sign was relocated to a clearer location.
- Y&DMH commenced external signage improvement with a larger, clearer sign being ordered for the junction of Melba Highway, Miller Street and Station Street.
- A review of the Accessing Interpreter and Translating Services Policy found that it was up-to-date and inline with organisational requirements.
- Signage on accessing and using interpreters was updated around the organisation in key areas, as outlined in the 2007/08 CALD plan.
- New flip charts on how to access ONCALL interpreting service were distributed to key areas in the organisation, as outlined in the 2007/08 CALD plan.

Volunteers

Volunteers are an integral part of the service provided by Yea & District Memorial Hospital. Most volunteers work in the residential aged care areas of Rosebank Hostel and Rosebank Nursing Home, however Community Health also benefits from volunteer involvement.

Rosebank

The aim of the volunteer program at Rosebank is to enhance quality of life and maintain the independence of our residents. The dedicated community members that make up the volunteer program willingly give of their time to help design and implement recreational and leisure programs for individuals and groups.

Volunteers fall under a number of categories including program implementation, fundraising, bed making and regular visitation.

Residents are regularly asked to provide feedback about the types of activities they would like to have access to. Twice a year, residents complete a more formal "preference activity sheet". Activity groups are then formed based on the information collected and volunteers often take responsibility for running these groups.

Activities take place in a safe and comfortable environment and provide an opportunity for valuable personal interaction. Volunteers support residents and acknowledge their importance as individuals in their own right.

Regular activities include Power Pals, discussion and reminiscing sessions, quizzes, poetry reading and craft. Residents are always keen participants in the Footy Tipping competition which culminates in an award presentation afternoon tea.

Musical entertainment is provided by Val Hauser, Russell Hogg, John Wyatt and Graeme Cohill who are part of a monthly roster. In 2007/08 residents have also enjoyed entertainment from The Alexandra Singers, The Entertainers, Yea Primary School and Sacred Heart Primary School.

Residents also enjoy outings to interesting attractions courtesy of volunteer drivers. Recent destinations have included the Schoolhouse Gallery and Kerrisdale Heritage Railway and Museum. Allan Downs also visits twice a week to take out two of Rosebank Hostel's male residents for a social stroll down the street. Volunteers from St Vincent de Paul also take residents out for lunch on a monthly basis.

Volunteers support staff to implement the Fresh Air and Sunshine program, assisting to move residents outside on pleasant days. A number of residents have a keen interest in gardening and volunteers help them access the raised garden beds and water their gardens.

The Buds & Blossoms group continues to connect young with old. Staff, residents and participants continue to appreciate the role the volunteers play in bringing this wonderful activity to life each week.

Church of England and Presbyterian church services are held once a month and Father Vincent from Sacred Heart visits every Friday.

Volunteers have a monthly meeting where they discuss upcoming activities and volunteering support needs. They also receive information and training on topics such as dementia, communication and new hygiene practices like the alcohol skin rub implemented in early 2008.

In late 2007 a change to the Aged Care Act 1997 required all staff and volunteers who have unsupervised access to resident in aged care to undergo a police check. Volunteers have this police check paid for by Y&DMH to enable them to continue their valuable service.

Community Health

Volunteer bus drivers enable community members to travel to Seymour each week for the Gentle Water Exercise Group at Seymour Sports and Aquatic Centre. The group is jointly facilitated by Yea Community Health and Murrindindi Shire Council and caters for people who may need a gentler form of exercise for a variety of reasons.

Quality and Safety

Risk Management

The incident and hazard identification system is the main method used to identify risks at Y&DMH.

In early 2008, an emphasis was placed on having all staff complete an in-house Risk Management training package. At 30th June 2008, 61 per cent of staff had completed this training. 74 per cent of Registered Nurses Division 1 have accessed and passed this competency.

The focus on educating staff on Risk Management has also extended into the Quality and Risk Newsletter (Hospital Happenings) that is distributed amongst staff on a monthly basis. This has been an excellent communication tool that allows for timely information and feedback. The newsletter was evaluated by staff in May 2008:

- 96% of staff agree or strongly agree that the newsletter has useful information
- 93% of staff agree or strongly agree that the newsletter is enjoyable to read
- 90% of staff agree or strongly agree that Hospital Happenings is an ideal way of informing staff about quality and risk management.
- 86% of staff agree or strongly agree that the newsletter is enjoyable to read

Continued participation in projects such as the North East Division of General Practice Small Rural Hospital Limited Adverse Occurrence Screening (LAOS) Project actively promotes quality improvement and assists the organisation to improve patient safety and avoid system errors.

The risk management manual was reviewed extensively through the 07-08 period and during this time was aligned with the ACHS EQuIP 4 Criterion for ease of tracking and reporting.

Staff Credentialing

It is of utmost importance that all staff delivering services have appropriate qualifications, skills and competencies.

Visiting Medical Officers must have qualifications and registration checked prior to commencing at the hospital by the Credentials Committee, which is a sub-committee of the Board of Management.

Nursing staff have their qualifications and registration checked on commencement of employment and then registration is checked annually.

Continuing education is strongly supported and encouraged by management, with all staff encouraged to attend education sessions which enhance quality of care and job satisfaction. Education programs are both externally sourced or provided internally.

All staff must achieve compulsory competencies in areas such as:

- Basic Life Support
- Privacy and Confidentiality
- Minimal Lift
- Fire Safety

The organisation is also committed to providing education for people in the local community. The past year has seen a number of tertiary and secondary students undertaking placement at the hospital/extended care centre including; nursing, personal care, medical, pharmacy and school work experience students.



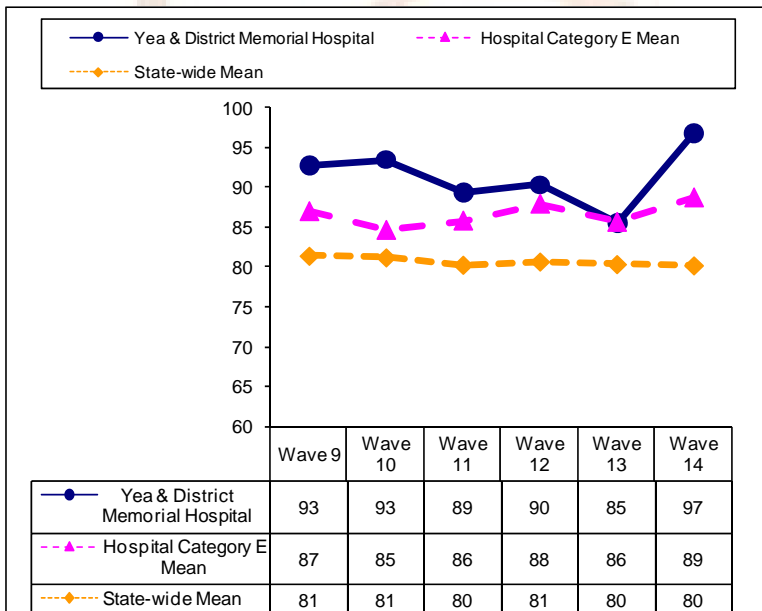
Continuous Improvement notice board in main staff room

Complaints and Suggestions

Y&DMH welcomes complaints and suggestions, seeing both as a way of addressing issues and improving standards of care. There has been a complaints process in operation for many years which has recently been reviewed and updated.

The most recent VPSM results from November 2007 to February 2008 indicate that Y&DMH have a 97% satisfaction rating by patients in this area.

The following graph outlines the complaints Management Index for period 2005 to 2008:



Medication Errors

Patient safety is at the top of the health agenda at Y&DMH. All discrepancies and medication errors are followed up and investigated. During the 2007/08 year there was one medication error that resulted in an adverse outcome and 14 medication errors which resulted in no adverse outcomes for patients / residents.

"Yea for Quality"

YFQ is a group of staff from around the organisation that meet once a month to discuss the ideas, issues or complaints raised by staff, volunteers or patients. All staff are encouraged to put in their ideas or suggestions.

Forms and more information are on the board in the main staff room. In the 2007/08 period there was 37 comments or suggestions put to YFQ.

What has "Yea for Quality" achieved in 2007/08?

- Improved staff education and safety in the administration of the needle exchange program.
- Archiving, storage and destruction of hospital patient records in accordance to legislation making more room in the hospital.
- Improved communication when senior staff need to be contacted.
- Improved and more consistent thickened fluids for residents with swallowing difficulties.
- Closure of sunroom as an inpatient room to allow for inpatients, visitors and staff to use this room as needed for relaxation and training.
- A review of external signage for the hospital in conjunction with Vic Roads.

Hospital Accreditation

Y&DMH was accredited through the Australian Council of Healthcare Standards Evaluation and Quality Improvement (EQUIP) model in September 2006.

This process consists of a four year cycle, with recommendations potentially resulting every two years from a Periodic Review and an Organisation Wide Survey. These recommendations are then used to develop a Quality Action Plan. The next phase in the cycle for Y&DMH is the Periodic Review due in December 2008.

In further enhancing the organisation's ability to learn and benchmark with other liked sized organisations (E- size Hospitals), the Quality Manager at Y&DMH participates in the "Quality Management Network".

These meetings have contributed to the organisation's knowledge and resource base as well as providing many opportunities to benchmark key clinical areas. This has given rise to opportunities for improvement.

Some of the key areas that have been enhanced by participation in this group include:

- The development of the "Smoke Free" hospital grounds process in readiness for legalisation change in 2009.
- Resources for staff training in the area of fire safety.
- Access to a variety of clinical audit tools.
- Sourcing of appropriate clinical practice guidelines.

Nursing Home Accreditation

Aged Care Standards and Accreditation Agency (ACAA)

Rosebank Hostel and Rosebank Nursing Home were both accredited in all 44 standards on 17th May 2006.

During the most recent support visit by the Aged Care Standards and Accreditation Agency on 25th September 2007 the aged care facilities were again compliant in all of the standards.

District Nursing Accreditation

Home and Community Care (HACC)

A successful review was last completed in 2004, with a further review to occur in December 2008.

Victorian Patient Satisfaction Monitor (VPSM)

What you said about us

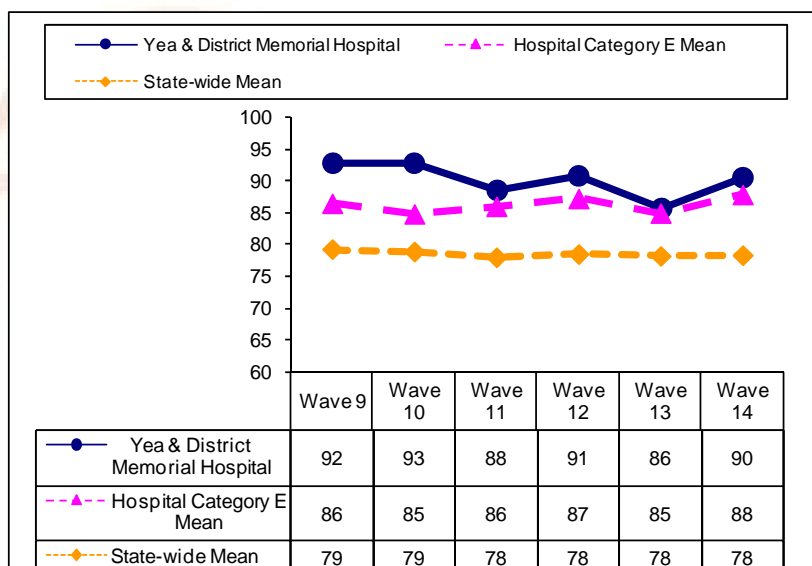
The Department of Human Services patient satisfaction survey has been conducted in all Victorian public hospitals since October 2000. Results of this survey are reported on a six monthly basis. Our hospital has continued to stay above the category average for like-sized hospitals in all the main care indices.

When asked about the best things about their stay in Yea hospital, feedback from the survey included:

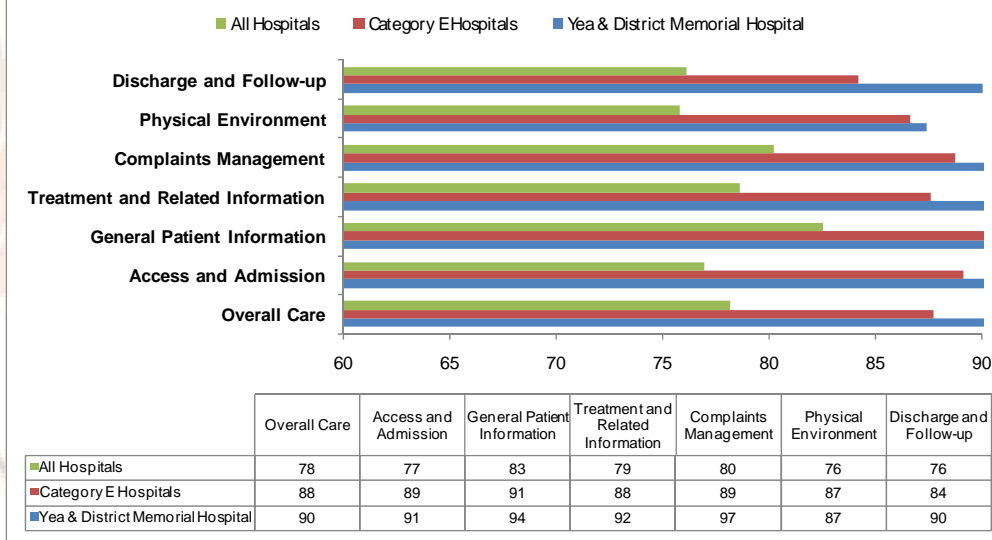
"The Yea Public Hospital is the very best place to be if one is ill."

"Small hospital, dedicated staff, especially the nursing staff. Cheerfulness of all. Encouragements given, interest taken."

Overall Care Index for period 2005 to 2008 (From VPSM report for September 2007 to February 2008)



Benchmark data comparing Yea & District Memorial Hospital with Category E and Statewide hospital benchmarks



Infection Control & Cleaning

Infection Control is essential for monitoring and providing a safe and pleasant environment for all patients, residents and staff. Y&DMH has one registered nurse qualified in the area of Infection Control.

The Infection Control Nurse is a member of the Victorian Infection Control Professionals Association and the Hume Region Infection Control Group and attends regular meetings in the Hume Region to network and keep up to date with the current changes in infection prevention and control.

The Infection Control Nurse also receives relevant magazines, literature and is on the Department of Human Services mailing/ email list to receive policy and procedures updates and to be notified of new policies as they become available.

Infection Prevention and Control is tabled at Patient Care Review Committee and from there to the Board of Management.

Infection Control is a complex area which overlaps with Occupational Health and Safety in several areas and incorporates these responsibilities:

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

Staff Health

Staff at Yea are encouraged to have vaccinations offered by The Department of Health which include Hepatitis B and Measles. Influenza is a yearly option, with a further encouragement from DHS to achieve better compliance over the next two years. We had an increase to 65% uptake this year.

Hand Hygiene

Yea participated in the Victorian Quality Council Hand Hygiene Project this year with a big increase in using alcohol based hand rub lotions. Ongoing visitor participation in the project was also encouraged to protect relatives/ friends in acute and aged care from hand born infections and bugs.

This is also a water saving process as hand washing with running water is not required as often.

Food Safety

Food safety is a very important component of infection control and is audited yearly by an external auditor to aid in registration of the premises as a hospital standard kitchen. The External Audit was compliant in all aspects in 2008 with no review required. All kitchen staff are required to hold Food Handling Certificates and one staff member to hold a Food Supervisor Certificate to comply with food handling regulations.

There is also ongoing education provided to staff by the dietician and speech pathologist in regards to care of patients with specialised requirements as well as updates of current practices.

Waste Management

Continual effort is made to reduce our waste as much as possible including recycling cardboard boxes and giving shredded paper to a local animal shelter. Council recycling protocol is followed and a garden mulcher is used for trimmings from the garden. Composting is continuing and worms are also on the agenda thanks to our enthusiastic maintenance staff.

Gastro Outbreak

There were two gastro outbreaks during 2007/08, which were quickly contained and proved to be community type viral gastro. One outbreak was in the Nursing Home and the other in the Hostel. Both cases affected residents and staff. The outbreaks were managed following government guidelines.

Clean Pleasant Environment

Regular internal cleaning audits are done in the Hospital using the Department of Human Services Audit tool and an external audit is done yearly and reported back to DHS.

We have very conscientious in-house cleaning staff who work very hard at keeping our facility in a clean and pleasant state as can be seen by audit results below.

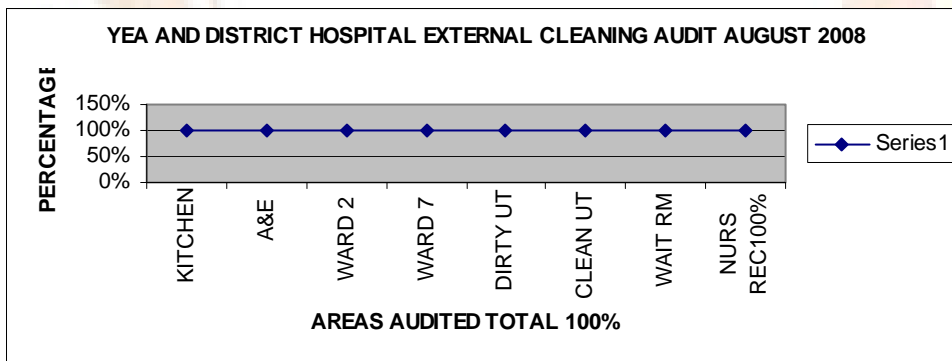
Risk Assessments

Audits and surveillance are done to identify practices, issues, risks, policies that require change, updating or do not comply with current standards or regulations, best practice and occupational health and safety requirements.

An external audit was conducted in September with results pending but no issues requiring immediate remedy identified.

Audit results are posted on the staff room notice board and passed to Patient Care Review Committee and acted on according to the level required.

Type of Audit	Year of Audit			
	2005	2006	2007	2008
External DHS		91%	94%	100%
Internal	94%	94%	96%	98%



Occupational Health & Safety (OH&S)

Yea & District Memorial Hospital aims to have a proactive approach to Occupational Health and Safety in accordance with the Occupational Health and Safety Act 2004 which states that 'All people – workers and the general public – should have the highest level of protection against risks to health and safety that is reasonably practicable in the circumstances.' (S3Part4)

Y&DMH conducts the OH&S Program with reference to the Occupational Health and Safety Act 2004, relevant Regulations, Industry Standards and Guidelines.

Y&DMH has an Occupational Health and Safety Committee which meets at least six times a year. There are six Health and Safety Representatives (HSR) and a Contact Officer.

Employee Rehabilitation

Employee Rehabilitation is provided to staff at Y&DMH through the Human Resources department at Goulburn Valley Health. No staff required this service during the 2007/08 year.

Safety Audits

Internal safety audits are undertaken monthly by the HSRs. There are Hazard Report forms which enable the immediate reporting of hazards by staff. There is a maintenance request book so that staff can request maintenance action.

NoLift/Manual Handling

NoLift procedures are utilised by nursing and personal care staff. Staff are required to complete a yearly competency in this area. Three trainers have recently attended the Victorian NoLift Coordinators Network and as a result Compliance Monitoring is to be implemented.

Manual Handling Risk Assessments

Online manual handling education and competency testing has been implemented for non clinical staff in 2007/08, 11 out of 20 staff have completed this to date.

Manual Handling Risk Assessments are undertaken:

- To identify tasks which involve hazardous manual handling
- Assess the risk of Musculo Skeletal Injury (MSD) associated with these tasks
- Eliminate the risk of MSD or, if this is not practicable, reduce the risk.

In 2007/08 risks that were assessed included:

- Showering a resident in High Care
- Moving a bed often in High Care
- Toileting a resident in Low Care
- Weighing fully dependent Residents/Patients with the Ergoscale (New equipment.)

Risk Management Involved:

- Changes in Manual Handling procedure
- Changeover of beds
- Changes in equipment used
- A procedure in place for using the Ergoscale

Manual Handling Equipment Purchases 2007/08 included:

- 2 x Jomor Electric Hi/Low 'Venus' Beds
- 2 x Liftcare Protean Series 2 Beds with self help poles
- 1x Bed Alarm
- 2 x Vernachair Commodes
- 4 x Wheelchairs
- 1 x BMH Portable Ergo Scale (Special DHS Grant)

Hazardous Substances

Hazardous Substances are stored in accordance with the Occupational Health and Safety Act 2004 and according to Worksafe Guidelines. The HSR's in each area check storage and labelling of Hazardous Chemicals as part of the monthly safety audit.

Material Safety Data Sheets (MSDS) for the hazardous and dangerous goods stored and used at Y&DMH are held in the locked Manifest cupboard in the ambulance bay. This enables easy Emergency Services access.

Copies of the MSDS for all the chemicals used or stored in a particular work area are also kept in folders in that area. MSDS were reviewed in October 2007.

Worksafe Victoria 2007/08

A Worksafe Inspector visited to review the *Management of Ambient Temperature Action Plan*.

Another attended an OH&S meeting to discuss the OH&S Act 2004 and the importance of OH&S consultation.

Fire Warden Training

Registered Nurses who work 'in charge' (10 Nurses) attended fire warden training in January 2008. Other staff (25) completed online competencies.

Incident Reporting

There were 201 incidents during 2007/08.

Of these incidents, 13 involved staff, four had minor or superficial outcomes and the remainder had no adverse outcome. There were no musculo-skeletal injuries reported in this period.

All incident reports are entered onto the Riskman database to enable data to be readily accessed and trends identified.

In 2008/09 the incident reporting system is to go online with staff directly entering incidents onto the Riskman database.

Contractor Management

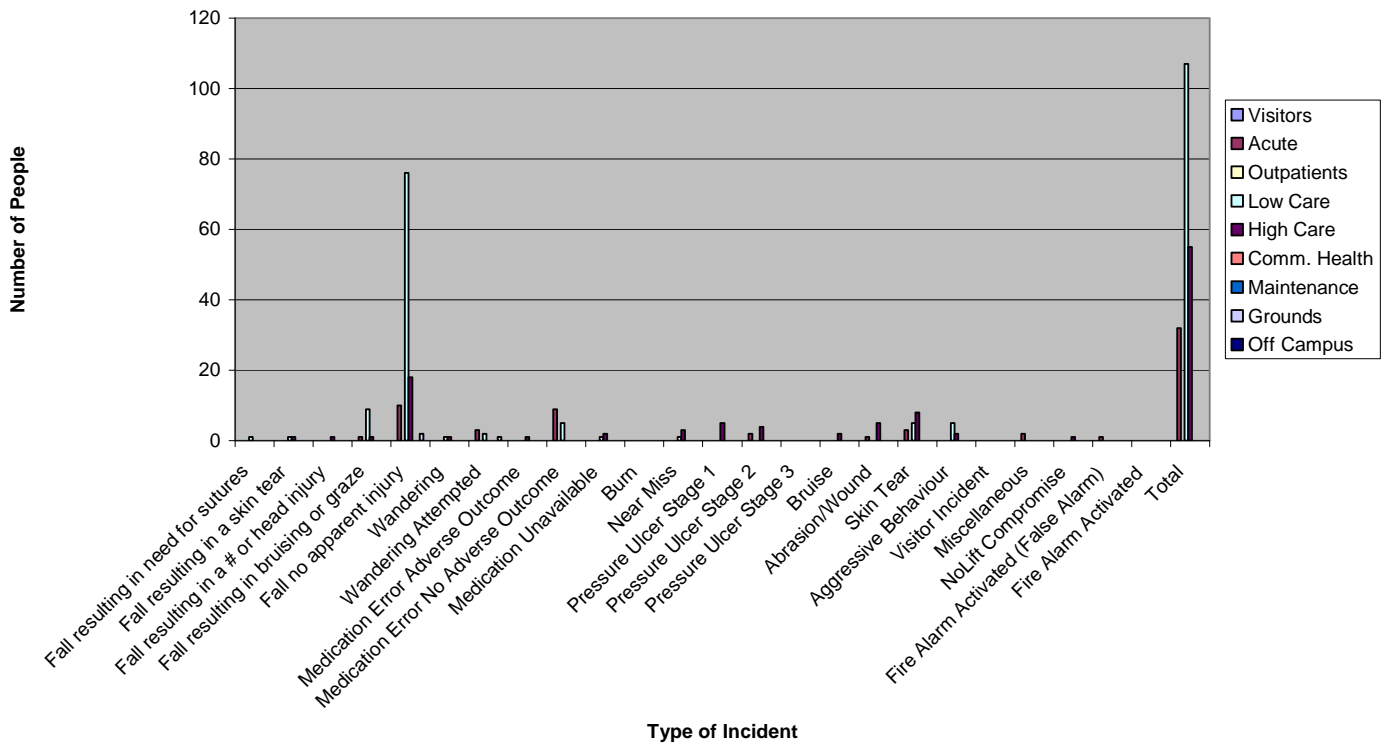
Contractors are required to sign in and out at the reception counter and to wear a Y&DMH identification tag.

There have been no incidents related to contractors in the 2007/08 year.



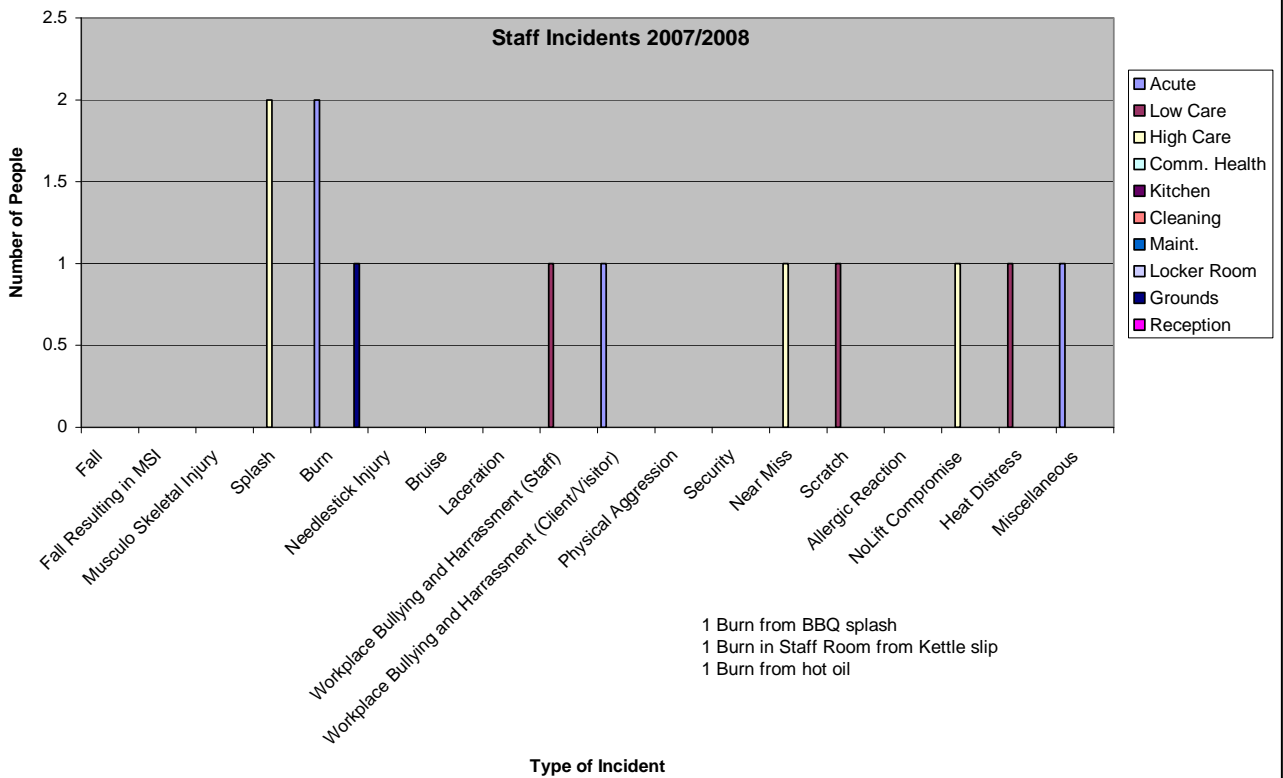
Jeanie Peters, cook and member of the Hotel Services team, in the gleaming kitchen at Y&DMH.

Incident Reports 2007/2008



Note: # is the nursing symbol for fracture

Staff Incidents 2007/2008



Falls Prevention

A Fall is 'A sudden, unintentional change in position causing an individual to land at a lower level, on an object, the floor, the ground or other surface' (Abbreviated).

Falls include: slips, trips, falling into other people, being lowered, loss of balance, and legs giving way.

If a patient/resident is found on the floor, it should be assumed that they have fallen unless they are cognitively unimpaired and indicate that they put themselves there on purpose.

(The Victorian Quality Council Guidelines for Minimising the Risk of Falls & Fall-related Injuries 2004)

In the Acute setting at Y&DMH Falls Prevention status is assessed on admission and changes in status monitored daily and the care plan updated as required. Referrals to appropriate ancillary services are made. e.g. podiatry, optometry, physio.

In the Aged Care setting the Falls Prevention program has been integrated into the admission and ongoing appraisal system so that assessments and referrals are done as part of the ongoing care of each resident.

Rosebank Hostel (Low Care) remains the area with the greatest number of falls. Residents in low care self initiate mobilisation which increases the risk of falling but also gives them the ability to move independently (this is very important for their feeling of well being and their physical fitness).

The staff at Yea and District Memorial Hospital and Rosebank work hard to ensure that corridors and bedrooms are not cluttered and that they are well lit so that the residents have good visibility.

Patients and residents are strongly encouraged to wear safe footwear and use their walking aids to reduce the risk of tripping.

Y&DMH and Rosebank is committed to the assessment of Falls Risk and the implementation of Falls Prevention Strategies to minimise the risk falls and falls injuries for the patients and residents.

Falls Prevention Equipment Purchase 2007/08:

- 1 Bed Alarm to ensure staff are alerted when a wandering patient/resident gets out of bed.



Division1 Nurse, Sue Hall, part of the nursing team that assesses falls risk on admission.

Falls data 2007/08

Of 194 recorded incidents during the 2007/08 year 136 were falls.

There were 12 in acute (10 with no apparent injury), 98 in low care (76 with no apparent injury), 24 in high care (one resulting in a fracture, 18 involved no apparent injury) and 2 in the facility's grounds (also with no apparent injury).

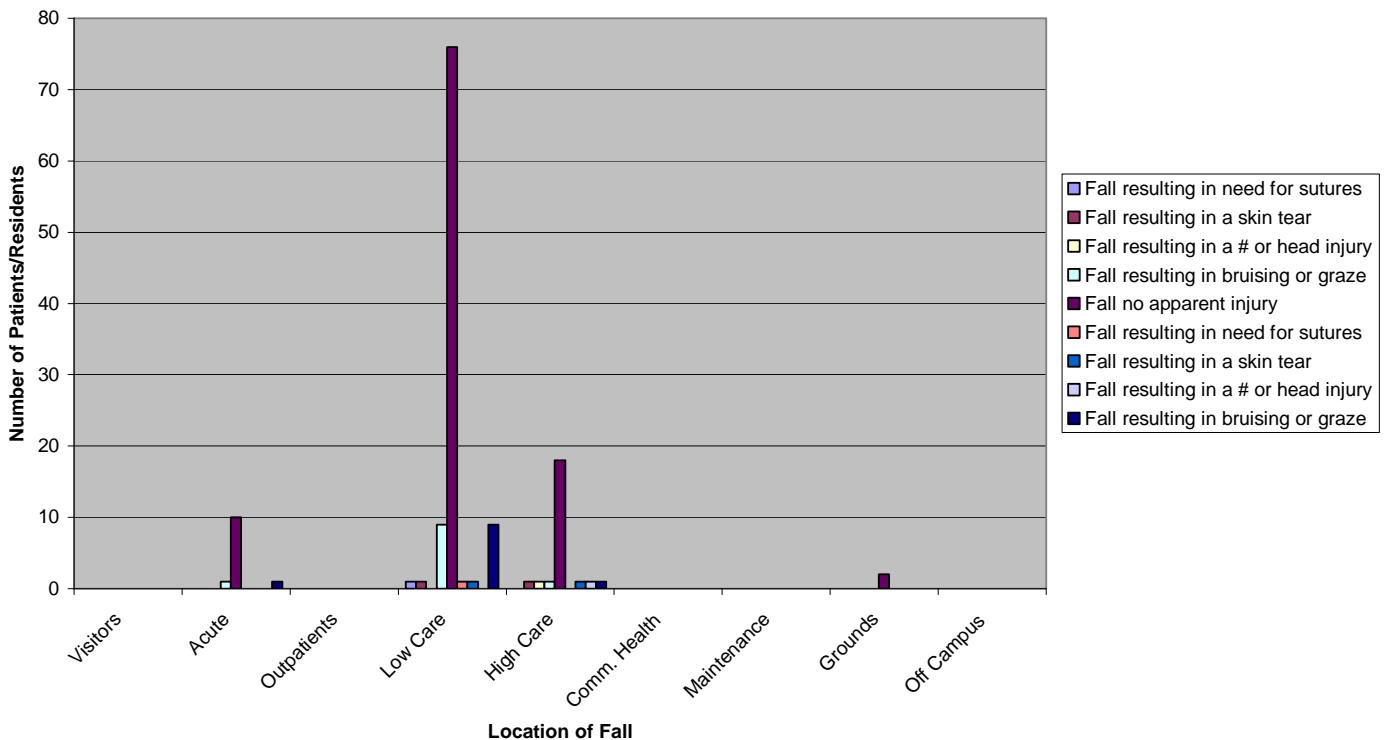
These statistics demonstrate that the majority of the falls did not involve injury to the patient /resident but do not show the risk reduction achieved because the resident was found on the floor beside a floor level bed. (i.e. patient/resident did not fall from sitting or standing).

It is planned that the 2008/09 statistics will demonstrate the number of incidents where the 'fall' was risk managed with the floor level beds.

Location	Acute	Low Care	High Care	Grounds
Fall resulting in need for sutures	0	1	0	0
Fall resulting in a skin tear	0	1	1	0
Fall resulting in a # or head injury	0	0	1	0
Fall resulting in bruising or graze	1	9	1	0
Fall no apparent injury	10	76	18	2

Note: # is the nursing symbol for fracture

Falls Data 2007/2008



Pressure Ulcer Prevention

Pressure ulcers (or bedsores) are areas of skin that have been damaged by constant pressure or friction. People with reduced mobility, such as hospital patients who spend long periods of time in bed, may be at risk of developing pressure ulcers on bony areas such as the heels, elbows, the back of the head and the tailbone (coccyx).

Pressure sores can be difficult to treat but can be prevented by a relatively simple assessment and ongoing monitoring process undertaken by nurses. Untreated, pressure ulcers can lead to serious skin damage which requires surgery – extending the patients stay in hospital and the potential long term health impacts.

Y&DMH participates in a state-wide monitoring program overseen by the Quality and Safety Branch of the Department of Human Services. All patients admitted to Y&DMH have a pressure ulcer risk assessment completed within 24 hours of admission. If they are identified as being “at-risk” of pressure ulcers, management strategies are documented in the patient notes or in their care plan.

In addition, patients admitted to Y&DMH have access to pressure relieving mattresses during their stay.

Online Competencies

In early 2008 an online competency for Pressure Ulcers was made available to staff. This detailed training package enabled staff to update their knowledge on the prevention and treatment of pressure ulcers. 25 staff have completed the training package.

Outcomes for 2007/08

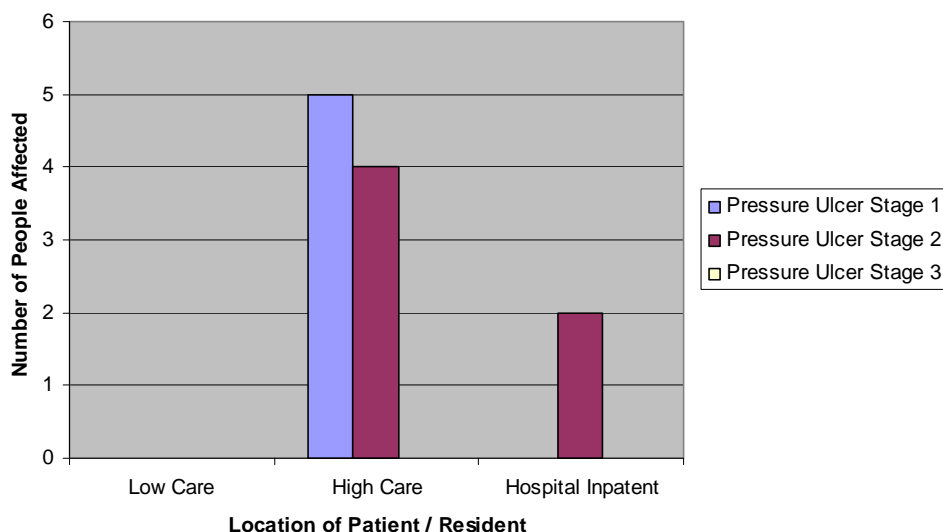
Y&DMH had positive results from their efforts to reduce the incident and severity of pressure ulcers for both hospital patients and residents in residential aged care.

There were no cases of stage three pressure ulcers reported during the year and no pressure ulcers reported for residents in Rosebank Nursing Home.

An increase in the number of Stage 2 pressure ulcers in Rosebank Hostel and among hospital inpatients may be attributed to improved staff education and clarification of ulcer stage characteristics.

Rather than being a negative outcome this may demonstrate a more vigilant approach by nursing staff to ulcer identification / treatment and better outcomes for patients and residents.

Pressure Ulcer Prevention Program 1 July 2007 to 30 June 2008



Continuity of Care

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 three key areas, Acute, Residential Aged Care and Community Health. The Acute area has 10 beds and an accident and emergency area. 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, support / access worker, women's health worker, occupational therapist, a psychologist and a speech pathologist and counsellor (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, spirometry, echocardiography and psychology services.

Staff in 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.



District Nursing

The district nursing service provides “nursing care in the home” for residents in the Murrindindi Shire. The service is available for those who require nursing care and may be unable to travel to centre based health care services. This may include the frail, elderly, disabled or those unable to access transport.

A variety of nursing care is provided including:

- post acute care for those recently discharged from hospitals
- wound or medication management support and monitoring of the frail and aged
- carer support with liaison and referral to other services and health care providers.

Overview of 2007 – 2008 services

During the past year, we have travelled almost 30,000 kilometres and made 2,900 visits (an increase of 19% on the previous year).

As part of an ongoing commitment to quality improvement, the district nursing service will be involved in the Home and Community Care accreditation process.

A client satisfaction survey is currently being distributed and will provide people with the opportunity to have their say. It is to be hoped that participation rates will be high and we encourage all clients to put forward any suggestions they may have.

Client Visit Summary

Category	1 Jul 07 to 30 Jun 08			
	Clients	Visits	Minutes	AvMin
Pensioner	54	1,367	50,283	36.8
Veterans' Affairs	17	1,240	27,284	22.0
Extended Aged Care in Home	4	118	3,580	30.3
Special charge	5	103	2,934	28.5
Post-acute Care	15	47	1,685	35.9
TAC	1	34	1,045	30.7
Work Cover	1	19	760	40.0
Hospital-in-the-Home	2	6	255	42.5
please fill in description	1	2	50	25.0
Totals	100	2,936	87,876	29.9

Rosebank Hostel

Rosebank Hostel, as part of the Yea & District Memorial Hospital, provides low level residential aged care for the local community and surrounding districts. Single room accommodation with ensuite bathroom is provided for 15 residents. Three of the rooms are fitted with an overhead tracking system allowing for residents with higher care needs to be cared for in line with our “no lift” policy and a commitment to ageing in place. Residents are cared for by personal care attendants and division 1 registered nurses, with access to a range of allied health services.

The Hostel achieved compliance in all standards during a spot check conducted by the Aged Care Standards and Accreditation Agency in September, 2007. Our current three year accreditation expires in August 2009.

Five new residents have been welcomed over the year as others have moved on to nursing homes or passed away. We have been able to offer a period of respite care in between accommodating permanent residents. We have also welcomed some new staff members following resignations and retirements. We continue to make welcome students on work placement.

‘Buds & Blossoms’ continues to be a popular activity with our residents, one of a range of activities facilitated by a dedicated band of volunteers.

Ongoing staff education continues with staff attending in-house training sessions on communicating with family and friends of a dying resident, grief & loss, diabetes, speech pathology, pandemic influenza, outbreak management eg: gastro, hand hygiene, gluten free diets, e-learning, ACFI and documentation guidelines. Key staff members attended a 2 day training session in the new Aged Care Funding Instrument (ACFI).

‘Yea for Quality’ continues to be a well utilised forum for staff from all areas to air their ideas for continuous improvement with some very good outcomes for residents achieved over the past year.

Rosebank Nursing Home

Rosebank Nursing Home, as part of the Yea & District Memorial Hospital, is a dedicated high care facility providing an essential service to our members of the community who require 24 hour 7 day a week nursing care. The facility has 10 beds, all of these are single rooms and have an ensuite bathroom attached.

Our staffing includes registered nurses (both Division 1 and Division 2 nurses) to ensure that all our resident's needs are met. In addition all residents have access to a number of allied health services, such as physiotherapy, speech pathology, dietician, diabetes education, podiatry, palliative care, audiology and optometry.

In March this year the new ACFI (Aged Care Funding Instrument) commenced replacing the old RCS system. The ACFI is the tool that is used by the government to assess the level of funding required by each resident. This has necessitated that the appropriate staff receive training and we are now starting to feel more comfortable with the new system.

As part of our three year accreditation by the Aged Care Standards and Accreditation Agency we had a spot audit by the Agency on 25th September 2007 resulting in compliance with all standards. As part of their recommendations we have developed an infection reporting register.

Quality improvement continues to be an important focus and the monthly 'Yea for Quality' meetings have been beneficial in finding solutions to many suggestions or complaints by staff, residents and visitors.

Some areas that have been or continue to be addressed for Rosebank Nursing Home in the past year are:

- Completion of the review of the food menu. Residents have commented that overall they like the new menu.

- A new process has been developed to ensure that the thickened fluids for our residents with swallowing difficulties are of the right consistency.
- Due to some concerns over clothing labelling we are in the process of introducing a new clothes labelling system that will enable residents clothing to be more easily identified.
- A review of continence products used has been successful in ensuring that each resident is using the most suitable product for their needs.

We recognise that it is important for staff to continue to update their skills and knowledge and over the past 12 months have had staff education in the following areas: swallowing difficulties (including suitable diet and fluids for these residents), Responding to grief and loss, Hand hygiene, Wound management, Bowel management, ACFI and documentation.

Some additional improvements this year include:

- Purchase of new Hi Low beds that provide a safe environment for our residents
- The arrival of a new weighing sling that can be used in conjunction with our lifting system and enables us to accurately weigh residents regularly
- The purchase of new commode /shower chairs has been purchased with assistance from the Yea Hospital and Rosebank Auxiliary.

Staff continue to remain focused on how we can improve and maintain the best home like environment possible whilst ensuring optimal care is provided for our residents.



Yea Community Health Services

Yea Community Health Services (YCHS) has continued to grow and build on existing programs and alliances within the community.

Services currently provided through YCHS are:

- diabetes education
- occupational therapy,
- counselling
- community and access worker
- dietitian
- women's health nurse

All these services are provided on a part-time basis, however with the exception of the women's health nurse, clients can be seen in less than five days if an urgent appointment is required.

In addition to these, speech pathology and counselling are both provided in Kinglake. Other services are provided to Yea and surrounding districts by Mitchell Community Health Services.

Health Promotion

Y&DMH and Alexandra District Hospital are midway through their joint Health Promotion (HP) Plan, which runs from July 2006 to July 2009. This plan has 3 key priorities:

- Physical activity
- Food and nutrition
- Mental Well Being and Social Connectedness

An annual report has already been sent to the Department of Human Services (DHS), with the second annual report due in September 2008. DHS fund and review the HP plans in the region and have provided us with some useful feedback.

The implementation has been driven by the Health Promotion Committee, which is made up of representatives from both hospitals. The Committee assists with the ongoing monitoring and evaluation of the plan, and has also produced a layman's version of the plan for access by the community. The plan has already gone through some changes, with several initial activities not possible due to inadequate staff resources or a

lack of support from project partners. With the support of DHS, the development of relationships with other local education, health and welfare services is seen as a priority for Y&DMH for future health promotion activities to be successful.

Local activities that have continued include:

Yea Gentle Water Exercise Group

Y&DMH assists this program by coordinating volunteer bus drivers and has an average of eight participants weekly.

Buds & Blossoms

This popular program continues to be with the support of our enthusiastic volunteers, with an average of fifteen participants of all ages.

Healthy School Canteens

Y&DMH is supporting Yea High School with the implementation of the Victorian Healthy School Canteen Guidelines.

Kids Go For Your Life (Kids GFYL) Accreditation for early childhood services

Yea Kindergarten has independently achieved Kids GFYL Accreditation, which means that it actively promotes healthy eating and physical activity within its programs and community.

Y&DMH has and will continue to serve as a resource for healthy lifestyle promotion, for example providing education sessions for parents. This is a fantastic example of population focused health promotion, whereby all members of the community will receive the same experiences and consistent messages that promote healthy lifestyles.

Y&DMH is supporting Kinglake Kindergarten to move towards this accreditation, with an AGM presentation in November 2007.

Promoting respectful family relationships in Kindergarten setting

With local kindergartens priorities lying with Kids GFYL Accreditation, Y&DMH has focused mainly on developing relationships with these services in respect to mental health, and supporting them where they feel it is required.

Case Study:

Sarah's Kitchen - feeding the stomach and soul

How it all began...

Community Kitchens is not a soup kitchen or a cooking class. Participants pay for food and generally cook 3-5 meals for themselves and their families at each session. Most importantly, group members decide what they are going to cook. Men living alone in Yea were identified as being at risk of poor mental health outcomes due to social isolation and economic disadvantage.

Community Kitchens was identified as a strategy to increase their opportunity for social inclusion within the community. Working with partners Berry Street Victorian and Yea Community House, Y&DMH have provided the coordination support to set Sarah's Kitchen up, advertise for members and support the volunteer facilitator. In addition to media promotion, face-to-face invitations from general practitioners, allied health workers and other welfare agencies were used to target this group.



What is the situation now?

During 2007, five men attended Sarah's Kitchen on a regular basis. Anecdotally we received positive feedback from the men attending Sarah's Kitchen, with an early comment from one participant, who said he had been in Yea for many years "and this is the first time someone has asked me over to his place for dinner". Later in the year a Charles Sturt University Student undertook phone and face-to-face interviews of kitchen participants and our volunteer facilitator. This indicated that members had made new friendships within the group.

In 2008, member numbers reduced and the remaining men decided to open up the group to women, which has worked well. On average 3-4 members attend the group. Due to personal commitments we lost our initial volunteer facilitator, but have been lucky to have a second take on the very important role. Both facilitators have done a fantastic job at keeping the group active and members enthusiastic.

The Yea Community Shed has received funding to upgrade the exhaust system, while Y&DMH has donated \$150 worth of cookware, to support this fantastic program.



Quality of Care Report 2007 / 08

Development

Thanks to the staff at varying levels who have contributed to the development of the Quality of Care report.

Distribution

The Quality of Care Report will be distributed in the following ways and locations:

- At the Y&DMH Annual General Meeting
- Mailed to Residents of Rosebank Nursing Home, Rosebank Hostel and /or their family
- Displayed at Y&DMH Reception and in the sitting room for ultrasound and day procedures
- Available on request

Interested community members may also pick up a copy of the Annual Report / Quality of Care from the Yea & District Memorial Hospital reception area.

Evaluation

Formal evaluation of the Quality of Care Report will be conducted to inform the development of the 2008/09 report.

Evaluation will be conducted through:

- Feedback response form
- Telephone survey of two aged care resident families
- Board member feedback
- Community Representative Feedback

Annual Report / Quality of Care (Annual Reports) Feedback

1. How did you come to read the annual reports?

They were sent to me
 I received them at the Annual General Meeting
 I picked them up at the Hospital Reception
 Other _____

2. How did you find the layout of the 2007 / 2008 annual reports?

	Excellent	Good	NA	Poor	Very poor
Font size	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amount of information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pictures / photos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Graphs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. How easy to read was the information in the reports?

	Very Easy	Easy	NA	Difficult	Very Difficult
Administration Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Auxilliary Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Board of Management Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DON / Manager Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Care Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Report of Operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. How did you find the content of the annual report?

	yes	no	NA
Information was easy to understand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technical terms were explained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The information was interesting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Would you like more or less information in the following areas?

	More	Less	Amount is fine
Community Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection control and cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Falls monitoring and prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pressure wound monitoring / prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinical governance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Risk management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Auxilliary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Volunteers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rosebank Nursing Home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rosebank Hostel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
District Nursing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other areas of interest _____

Please
Place
Stamp
Here

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