

Omeo District Health

Quality of Care Report 2014-2015



OUR MISSION

To promote and enhance the health and wellbeing of the people of Omeo and district.

OUR AIM

To provide the most effective and efficient physical, emotional and social care possible through the delivery of services that are accountable to individual and communities need.

OUR OBJECTIVES

To ensure the Health Service is accessible to all and continues to develop within a Best Practice model in response to the community's identified need.

To provide a coordinated continuum of health care to the communities of Omeo and district, encompassing aged and residential care, community care and appropriate acute services.

To maximise health and wellness for all community members.

To provide a well maintained, safe and pleasant environment for patients, residents, staff and visitors.

Message from CEO/DON

On behalf of the Board and staff I am pleased to introduce the Omeo District Health 2014-2015 Quality of Care Report.

The Quality of Care report outlines the Health services and achievements over the past 12mths and how these have improved the level of care to our community. Throughout the report you will find information on our systems, processes and activities and how these collectively ensure that your health service is a safe, dynamic and high quality organisation.

This year ODH continued to build on existing services but has further taken the opportunity to implement a few additional improvements that will build on our already high standard of care. These include but not limited to;

- Our first visiting cardiologist clinic
- The appointment of a Mens Shed coordinator
- The development of a Community Advisory Committee
- Significant achievements in our Health Promotions through the implementation of the Integrated Walking Tracks project.
- Further embedding our Dementia Friendly environment program
- Redevelopment of our facility through a building project that has resulted in all private rooms for our residents.
- Review of our Quality reporting systems that assure improved governance.
- Commencement of a clinical educator.

The report demonstrates the broad range of services available and the ongoing commitment by staff to attain the highest level of service as expected by the community.

The Omeo Medical Centre continues to provide a regular service at Omeo, Swifts Creek and Ensay. A range of Locums continue to provide an effective service and ongoing positive feedback has been received regarding the enjoyment of an Omeo placement.

It would be remiss of me to not acknowledge the valuable contribution that community members make both directly and indirectly to our organisations. Our dedicated team of volunteers often visible in the community as volunteer drivers or through our SHINE committee are an essential part of our service and actively contribute to the maintenance of our beautiful gardens and fund raising opportunities that facilitate the purchase of equipment.

A culture of continuous quality improvement ensures that aged care, acute care, community and allied health services' programs and activities, are reviewed on a regular basis. ODH continues to maintain all Accreditation requirements.

Last but not least mention should be made of our dedicated Board and staff. The contribution made either through voluntary service or through responsibilities of employment are not to be understated. We see regularly the "above and beyond" efforts of our team as they seek to improve and deliver the highest standards of care to the members of our community.

ODH is fortunate to have a dedicated and committed employee group. The people that serve the organisation provide an exceptional level of care and support to residents, clients, carers, community members and to their co-workers. I sincerely thank all members of staff, including those who have left ODH in the past year, from all areas, for their contribution as individuals to the organisation.



ALS

Advance Life Support

Advanced Life Support (ALS) is a set of life-saving protocols and skills that extend Basic Life Support (basic CPR) to further support the circulation and provide an open airway and adequate ventilation (breathing).

The staff at Omeo District Health participated in 2 practical training sessions. The first session, held last November with Ambulance Victoria Mica Paramedic in the Urgent Care Room was very interactive.

The second session, in June this year and in collaboration with the Bairnsdale Regional Health Education Team consisted of a theoretical component and competency based learning. It was a full day of practice with various simulation scenarios.

Congratulations to 6 of our permanent part time and 2 of our casual registered nurses (RN's) for achieving competence, with three nurses currently taking part in the training session.

Jackie Hughes has recently completed ALS instructor training with the Australian College of Critical Care Nursing and is a great support to all RN's.





Creating a Dementia Friendly Environment

A better way of living at Lewington House

In 2014 ODH received funding to make improvements in our aged care facility so that our residents have a better quality of life while living in their home Lewington House.

A multi-disciplinary project team (CEO/DON, Nurse Unit Manager, Quality Manager, Support Services Supervisor, Diversional Therapist and Enrolled Nurse) participated in the Department of Health, Public Sector Residential Aged Care Services (PSRACS), Support for Change Project to Create a Dementia Friendly Environment. The main project commenced in April and was completed in October 2014. The ongoing project continues today with staff improving the residents environment so they can make better choices.

The purpose of Creating a Dementia Friendly Environment is to offer residents with short term memory loss individual daily lifestyle choices, encourage resident independence and empowerment to achieve a more constructive, positive day.

Our objectives were to reduce resident behaviours of concern and to reduce and improve staff stress levels.

During the setting up stage of the project the team realised that some of our staff had no dementia training, particular those working in support services or were new to aged care. We provided two internal training sessions and one external session for our staff to attend to become more familiar with working with people with dementia and/or some form of memory loss (cognitive impairment). 2 days training at "Montessori for Dementia" brought new energy to the project and a shift to an old mindset brought words such as 'the capability of our residents' and enabling our residents'. Our staff were changing their perspective and looking at what the residents can do instead of what they can't do. Our staff became more creative and initiated ideas that help the residents make their own lifestyle choices.

Environmental improvements were:

- ✚ Increased staff awareness and attitude
- ✚ Signage in the residents' kitchen to identify where to access milk, sugar, cups, etc.
- ✚ Signage in the hallways to point the way to different destinations.
- ✚ Identified and implemented individual resident jobs (the ones they like to do) such as setting tables and rolling bandages.
- ✚ The staff voted for the white shirt/blouse for the nursing uniform to identify the nursing staff more easily. Part of a recommendation from 'Montessori for Dementia'
- ✚ Next to arrive is a new shopping trolley.



Governance

The Board of Management

Health service boards are a long standing Victorian institution whereby hospital governance is provided at 'arm's length' from the government. Omeo District Health is fortunate to have the governance oversight provided by a board of community members.

Each Board member at Omeo has applied for a director's position and has been appointed by the Governor-in-Council on the recommendation of the Minister for Health. Members of our board are all volunteers and perform their duties without payment. All directors bring their own worldly experience to the organisation and contribute to the hospitals strategic direction.

Essential to the qualities of being a board member are a robust understanding of the community they represent with additional expertise in varying areas of practice.

The Board members at ODH possess a broad range of skills that benefit deliberations including Finance, Business, Law , Education and Community and Public service.

Board members monitor the performance of the health service to ensure effective and accountable risk management and quality systems are in place. An excellent example of this is representation on the ODH Quality committee whereby members are involved in overseeing KPIs across the entire organisation. The probing and questioning around these KPIs ensure clinical outcomes are monitored and actioned, Occupational Health and Safety issues addressed as well as receiving reports and audits from across the health industry and looking for opportunity to implement learnings from these at ODH.

This year the Board monitored significant funding impacts due to changing policy, participated in Risk management training as it pertains to the Healthcare industry , undertook self-assessment to strengthen board capability, provided oversight for the aged care redevelopment, reviewed facilities and equipment and implemented the role of clinical educator.

The direct involvement of community members on boards ensures that the needs of the community are represented in the strategic direction of the organisation. The Board takes a keen interest in Community Health promotion opportunities and actively encourages and supports staff in achieving the goals as set out the strategic plan.

A supportive board contributes to the positive culture of the workplace and regular site visits ensures that the board remains familiar with the grass roots delivery of care and the needs of the staff and clientele.



The Men's Shed

Community Health

The High Country Men's Shed, located in Omeo is an informal space in which any interested members of the community can come together to share knowledge and technical skills, work on projects (individual or community) or have a cuppa and a yarn with other like-minded shedders. The 'shed' which was officially opened in July 2012 over time has gained momentum and to date has successfully engaged 12 regular members aged 49-54. In March 2015, Omeo District Health appointed Wayne Airs as the Men's Shed Coordinator and since this date the High Country Men's Shed has seen an increase in community membership with a total of 251 visits from members in 2014-2015.

There has been a lot of activity happening at the shed including:

- Lawn mower repairs
- Chainsaw repairs
- Chair repairs
- Kids table and chair set
- Picnic Table for fundraising raffle
- A fishing trip to the Mitta Mitta river
- Movie day
- Hand tool- use and repair ticket with Omeo Primary School Children.
- BBQ on Tuesday and Thursdays
- Soup day on Tuesdays.

The shed has also seen a number of improvements to the facility that

- A casual sitting lounge area
- A wide screen TV and satellite installed
- Project board
- Radio overhead power
- Laptop and wireless internet as part of the Beyond Blue 'Connecting Men's Shed Initiative'.
- As well as regular OH&S tasks.

Thanks to donations from local residents and businesses that have been able to contribute to the sheds activities and operation.

For more information check out our Men's Shed website at:

<https://www.theshedonline.org.au/mens-sheds/profile/high-country-men's-shed> or drop by for a visit.

The shed is open every Tuesday and Thursday 10am-2pm. All welcome.

**Lou-anne Mooney, Health Promotion Worker; and
Wayne Airs, Men's Shed Coordinator**

CAC

Community Advisory
Committee

An opportunity for
Consumer involvement

Under legislative requirements, Omeo District Health is required to create a Community Advisory Committee. The purpose of the committee is to act as an advisory body to the Board of Management in providing a central focus for all strategies relating to consumer involvement within the hospital's activities.

Membership for the committee is drawn from responses to public advertisement and comprises a balanced representation from community members. Committee members are expected to be active in the community and have a sound understanding of local and regional issues. There are no formal qualifications required. Because all community members are deemed consumers of the services provided by ODH, the committee expects their voice to be listened to and their views respected. The committee meets quarterly and is chaired by the Quality and Safety coordinator and attended by the Chief Executive Officer/Director of Nursing. Encouragement and recognition of consumer input is vital.

The committee works towards integrating consumer, carer and community views into all levels of the ODH. It also advocates to the Board of Management on behalf of the community, consumers and carers as well as ensuring that information received from the Board is considered and timely advice is delivered.

From time to time the opportunity arises for members to participate in regional Community Advisory Consultative forums. These provide for the exchange of information and act as a gauge in measuring one's own performance against the others. Considering the short time this committee has existed, and from observations made at such regional forums, ODH is focused and has clear and positive directions with achievable results in sight.

Since the inaugural meeting in November last year, the committee has seen to the improvement of signage in and around the hospital grounds. New safety railing has been installed and subject to some financing, safety lighting in the medical centre car park will be enhanced. In addition, the Acute Patient Information Booklet is being revised and rewritten into a more user friendly version by the committee. The ongoing renovations to the nursing home have and are been conducted in consultation with the committee. Parking allocations for the Omeo Medical Centre have been revised to reflect actual requirements.

Other long term objectives include the assessment of patient meals and if required, constructive suggestions; appraisal of performance indicators such as complaints, falls, urgent care presentations, compliments and medication errors. I trust the reader will not think that this is just another committee, but that rather the successful operation of this committee is symbiotic for ODH as well as the community. It is a chance for the community to have its say and for ODH management to consider the community's expectations.

Edwin Perry.



Integrated Walking Track

Mapping Pilot Project

Omeo District Health and its collaborative partners officially launched the Omeo Region Walking Track and Trails Mapping Project.

The project that began as part of the High Country Physical Activity Plan in 2011 focused on undertaking a coordinated approach to the mapping of local town, state forest and national park walking tracks/trails as well as the development of resources that would help promote these walks and the opportunity for people to walk.

The project recognized the benefits to health and wellbeing for the local community through improvements to exercise and recreational opportunities as well as for tourism.

The main outcomes of the project included:

- Maps- A Regional map guide 'Omeo Region Walking Tracks and Trails' Brochure.
- Track Notes for Bentley Plain Walks, Swifts Creek Town Walks, Cassilis Walks, Omeo Town Walks, Oriental Claims and Benambra Town Walks; and

Signage located in Ensay, Swifts Creek, Cassilis, Omeo and Benambra.

Key partnerships included:

- East Gippsland Shire Council (EGSC)
- Omeo District Health (ODH)
- Department of Environment, Land, Water and Planning (DELWP)
- Parks Victoria (PV); and
- Omeo Region Business and Tourism Association (ORBTA)

Access the track notes and maps via <http://www.eastgippsland.vic.gov.au/walks> or pick up a hard copy from your local Information Centre, Parks or Department of Environment, Land Water and Planning (DELWP) Offices.

Lou-anne Mooney
Health Promotion Work



Quality and Safety

Accreditation

Accreditation Standard	Status
National Safety & Quality Health Standards	100%
National Safety & Quality Health Standards – Dental	100%
Community Care Common Standards	100%
Aged Care accreditation Standards	100%
Royal Australian College of General Practitioners Standards	100%

Patient Safety and Incident Reporting

At Omeo District Health the staff use the Victorian Health Incident Management System (VHIMS), or as the staff call it 'Riskman', to record and track all incidents from the patient, families, visitors and staff. As well as clinical incidents such as falls, pressure injury, and medication incidents, the system is designed to be used for Occupational Health and Safety (OH&S) issues, non clinical incidents, feedback- compliments and complaints, and quality improvement suggestions. VHIMS is used to collect data and record responses taken to ensure patient safety. This information is then used by staff to determine trending, take action to rectify the situation or to minimise the likelihood of a similar incident happening again.

VHIMS is able to measure the severity of the incident into the 4 following categories:

1. Severe
2. Moderate
3. Mild
4. No harm/near miss

Staff are trained to use the reporting system during the orientation program and ongoing training on an individual basis. Staff are encouraged to complete the VHIMS e-learning package to ensure that they are aware of their role in identifying and responding to incidents to maintain a safe environment and to make sure that patients, Residents, staff and all clients are safe.

Preventing and Controlling Healthcare Associated Infections

Omeo District Health recognises the importance of infection control measures within the facility. We have many mechanisms, through which we ensure that our infection rates are maintained at a low level, including:

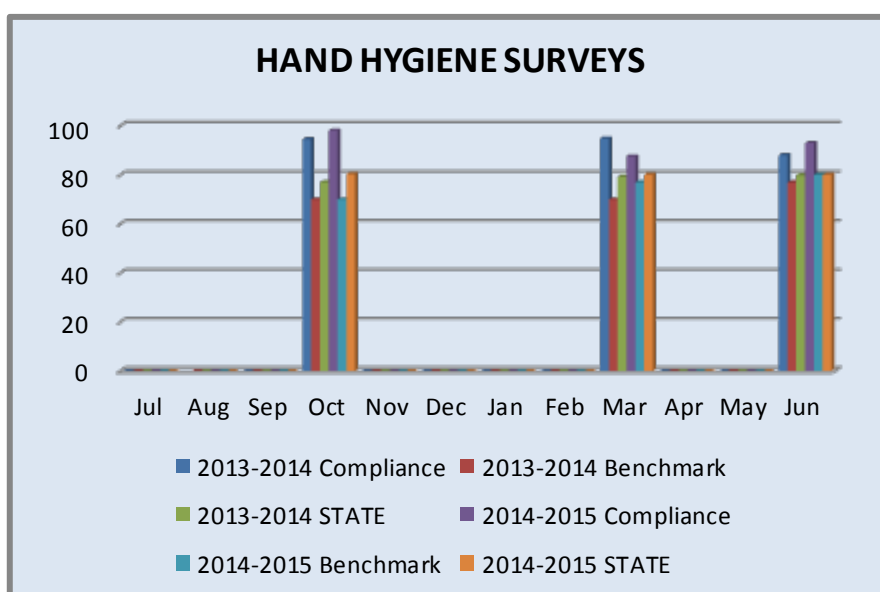
- ✓ Participation in the Victorian Hospital Acquired Infection Surveillance System (VICNISS) which aims to identify and benchmark acquired infections occurring in Victoria. Our results for hospital acquired infections was nil for the last 12 months.
- ✓ Education sessions on infection control have been conducted throughout the year. It is mandatory for all staff to attend at least one session per year to ensure that everyone has a working knowledge of infection control relevant to their position.
- ✓ The staff orientation program also contains an infection control component and is completed on commencement of employment.
- ✓ The Rural Infection Control Practice (RICPRAC) Group compliance audit tool helps us identify areas where we meet standards and areas in which we need improvement. Each audit is referenced to the Australian Standards.

- ✓ We conducted one internal food safety audit resulting in compliance with the Food Act 1984.
- ✓ Two external independent food safety audits were completed resulting in compliance in both audits.

Hand Hygiene

We participate in the Victorian Hand Hygiene Program in which report our hand hygiene compliance with adhering to the “5 moments of hand hygiene” and the correct usage of the hand rub product and hand washing technique according to the World Health Organisation (WHO) guidelines.

Our Infection Control Coordinator is continually auditing our hand hygiene practices. Over the past 12 months we have not only reached but surpassed the Department of Health benchmark of 80% compliance.

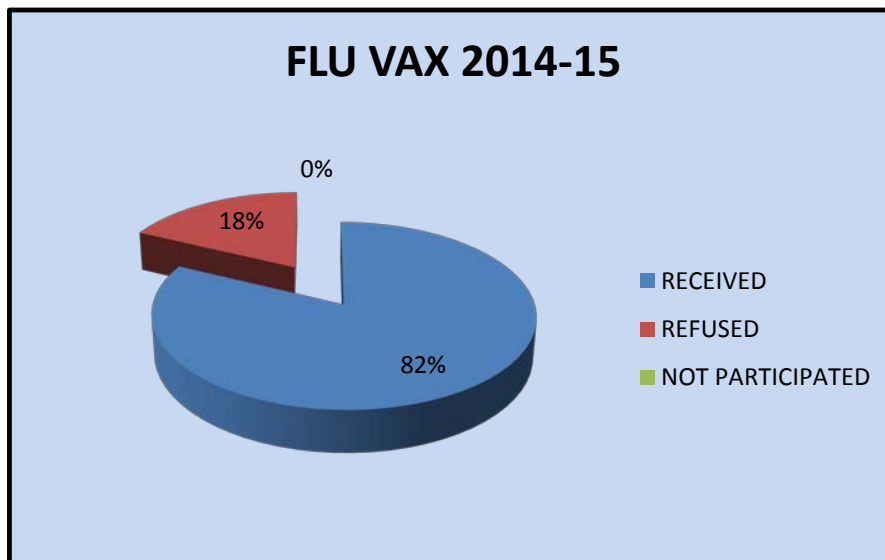


Immunisations

The seasonal influenza vaccination program reduces the prevalence of the influenza viruses in the healthcare facility and to a lesser extent in the community.

We offer a vaccination program to resident, inpatients and the staff of ODH.

Our staff are educated and encouraged to participate in the seasonal influenza vaccination program. 100% of our staff participated in 2015.



Antimicrobial Stewardship

At ODH we have developed, implemented and are regularly reviewing the appropriate prescribing and use of antibiotics.

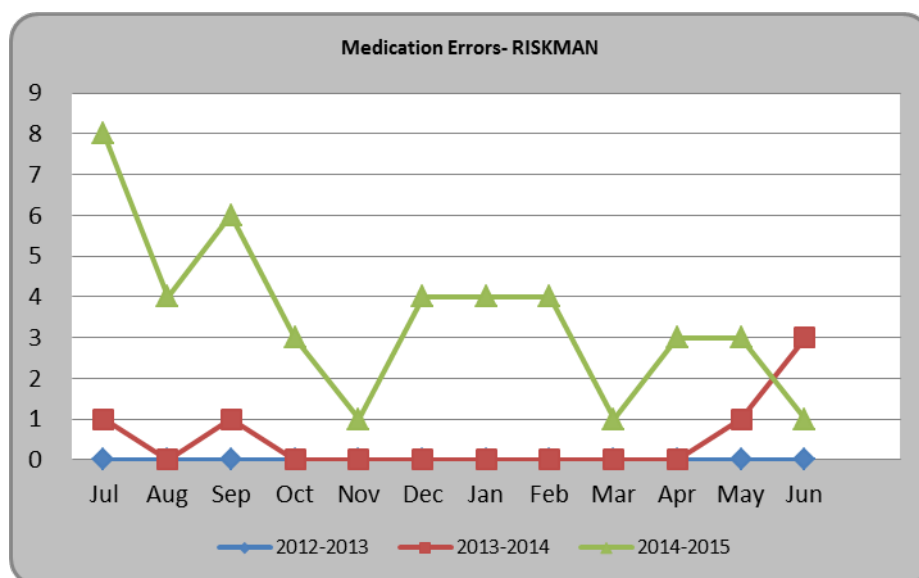
This program assists with decreasing antibiotic usage if they are not appropriate or beneficial to your treatment. As a result we are contributing to decreasing the development of antibiotic resistant drugs.

What is antibiotic resistance? Using antibiotics when they are not needed (for example for colds and flu) can lead to antibiotic resistance. Bacteria have “antibiotic resistance” when they cannot be killed by an antibiotic. Remember, it is the bacteria that are resistant – NOT YOU! Even very healthy people who have never taken antibiotics can become infected with antibiotic resistant bacteria from other sources.



Medication Safety

Omeo District Health has a comprehensive governance framework providing guidance for medication safety across the organisation. Policies and procedures assist the staff with utilising a safe medication management system. The National Inpatient Medication Chart (NIMC) and the Medication Management Plan provide the staff with tools that ensure consistency in practice and a collaborative approach with the patient.



All errors were investigated and rectified with no adverse event for patients, residents and clients. Staff have received extra education on reporting systems and this may have resulted in increased reporting in the last 12 months.

Preventing Falls and Harm from Falls

Did you know that many older patients fall while in hospital? While some falls cause no injuries, others can cause serious harm. Falls can also result in you fearing further falls and make it harder for you to stay independent.

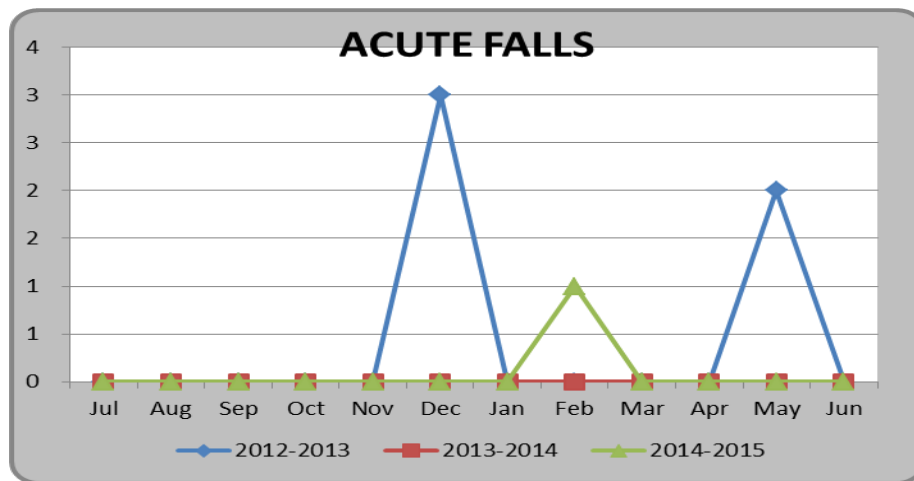
There are usually a number of reasons for someone falling. These may include poor balance, incontinence, unfamiliar environments and obstacles, poor eyesight, unsafe footwear and some medicines, to name a few.

There are a number of ways to reduce your chance of falling.

Staff will help you to stop falling by:

- helping you to settle in, keeping your surroundings safe, and providing you with falls prevention information
- assessing your risk of falling and discussing the results with you
- developing and implementing a falls prevention care plan suited to your needs
- referring you to other staff who specialise in different areas
- organising visits by occupational therapists or physiotherapists to your home before or after discharge, to help make your home safer, or to suggest changes to it or equipment to help you move safely.

Everyone has a role to play in preventing falls.



Preventing and Managing Pressure Injuries

A pressure ulcer is a sore, an area of skin that has been damaged due to unrelieved and prolonged pressure. They are also known as pressure sores or bed sores.

In the community we do not often see pressure injuries, however, in healthcare facilities they are a more common occurrence due to the lack of mobility, nutritional status, changes in skin and underlying tissue structure and the less effective immune system of the residents and inpatients.

Strategies that we have in place to minimise the risk of developing a pressure injury are:

- ✓ **Manage Moisture** – Use moisture barrier on skin, use pads that absorb and hold moisture away from your skin, address why you have excess moisture and offer bedpan/urinal/ or toilet regularly for incontinent patients.
- ✓ **Manage Nutrition** – Increase protein intake & increase calorie intake to spare proteins, supplement with multi-vitamin (A, C & E), act quickly to stop any deficits in nutrition and consult a dietitian.
- ✓ **Manage Friction & Shear** – Elevate foot of bed to reduce slipping down, use monkey bar when indicated, use slide sheet to move patient and protect elbows and heels if exposed to friction.
- ✓ **Other General Care Issues** – No massage or rubbing of reddened bony prominences, no doughnut type devices, maintain good hydration, implement turning schedule, provide pressure reduction support surface if bed ridden or chair bound and encourage maximum mobility.

At Omeo District Health there have been no reported incidents of pressure injury in 2 years.

Aged Care Clinical Indicators

Clinical indicators measure aspects of service provision which contribute to the quality of care and services given by ODH and are benchmarked with the state.

These aspects are:

1. Prevalence of Pressure Injuries
2. Prevalence of Falls and Fall-related Fractures
3. Incidence of Physical Restraint
4. Incidence of Residents Prescribed Nine or More Medications
5. Incidents of Unplanned Weight Loss

At Omeo District Health we review and measure our performance against the Public Sector Residential Aged Care Services Indicators.

At Lewington House the clinical indicators are reviewed and reported to the Department of Health on a quarterly basis. Our results are better than the state average with no pressure injuries, no unplanned weight loss and no restraints used in the 2014-2015 reporting period.

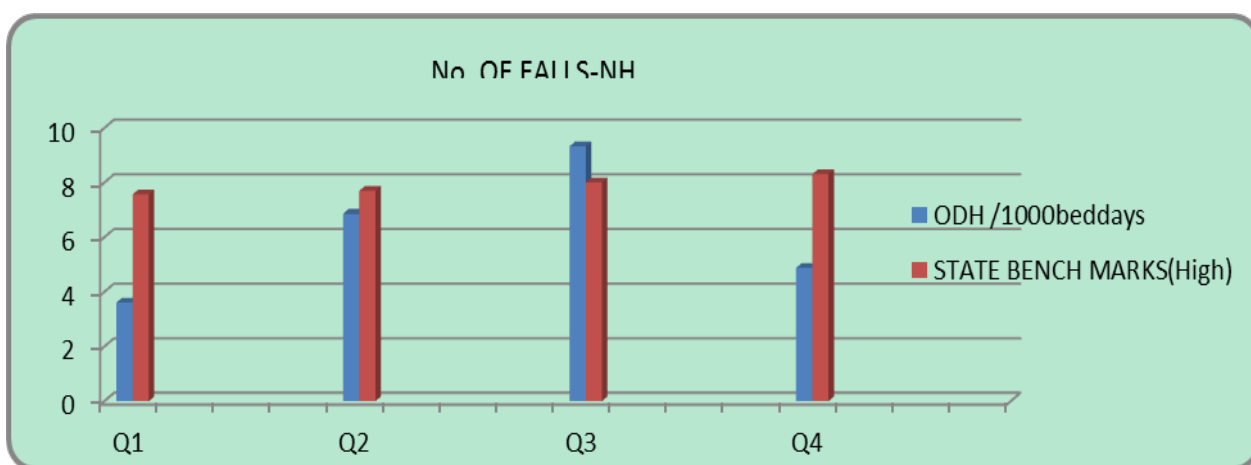
Falls

Falls risks are identified early on admission and throughout the resident stay. Strategies are put in place to reduce /prevent the risk of falls.

Strategies such as:

- High/Low beds
- Bed Poles
- Appropriate seating, with adjustable chairs.
- Sensor Matts
- Specialised equipment such as wheelie walkers
- Access to physiotherapist
- Exercise groups and strength building sessions with our allied health assistant.

On-line training on falls prevention is mandatory to all clinical staff on an annual basis. Ongoing monitoring of falls occurs through the recording and reporting of falls incidents through the Victorian Health Incident Management System (described above). Each incident is investigated and appropriate strategies put in place to address any identified issues and to minimise the risk of further falls occurring.

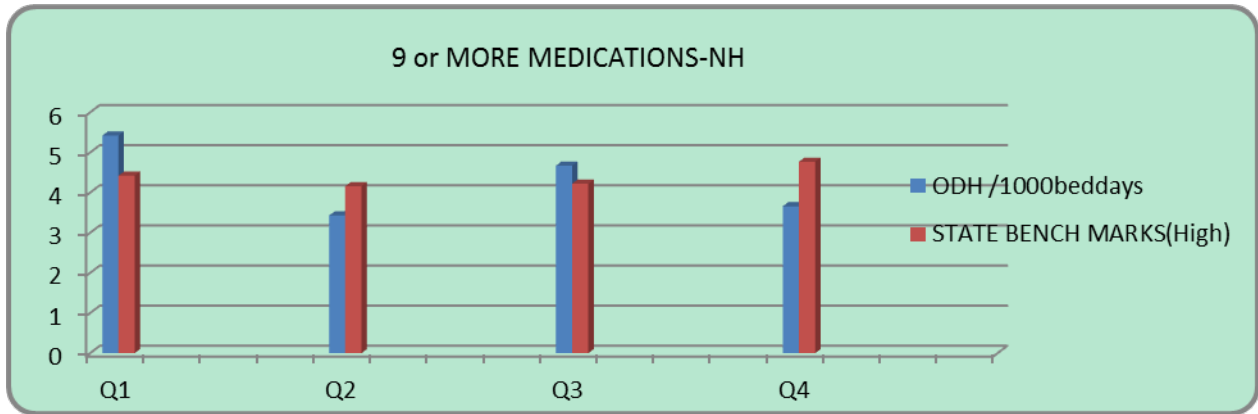


Multiple Medication Use

Medications are managed in a safe and correct manner.

All new residents are assessed on admission and yearly to determine what level of assistance they require. We like to promote independence and at times the resident is able to self medicate (if they are safe to do so) and in that case the resident will have a three month review to ensure that they are still up to the task.

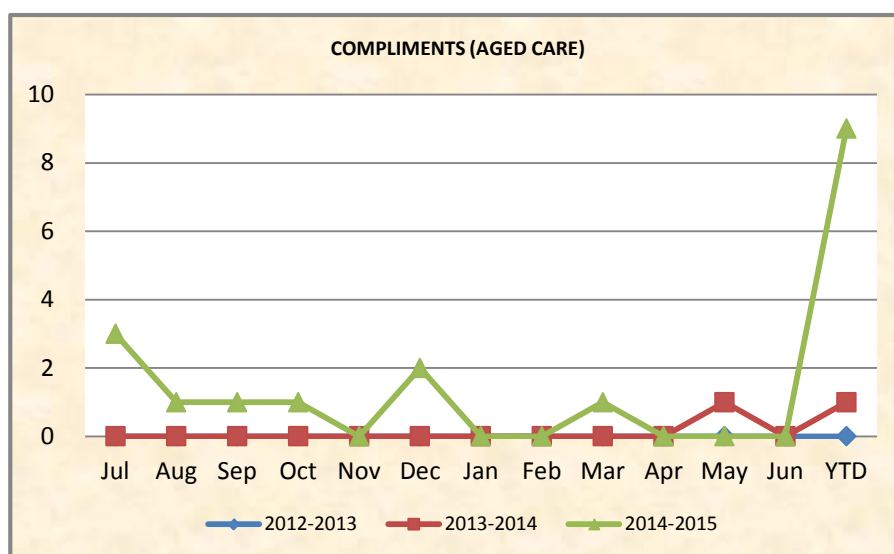
Medications are administered by qualified staff, medication charts are audited on a regular basis for compliance, appropriate storage of medicines is adhered to, and a clinical pharmacy review is carried out annually to ensure safe use of the mixture of medicines the residents use.

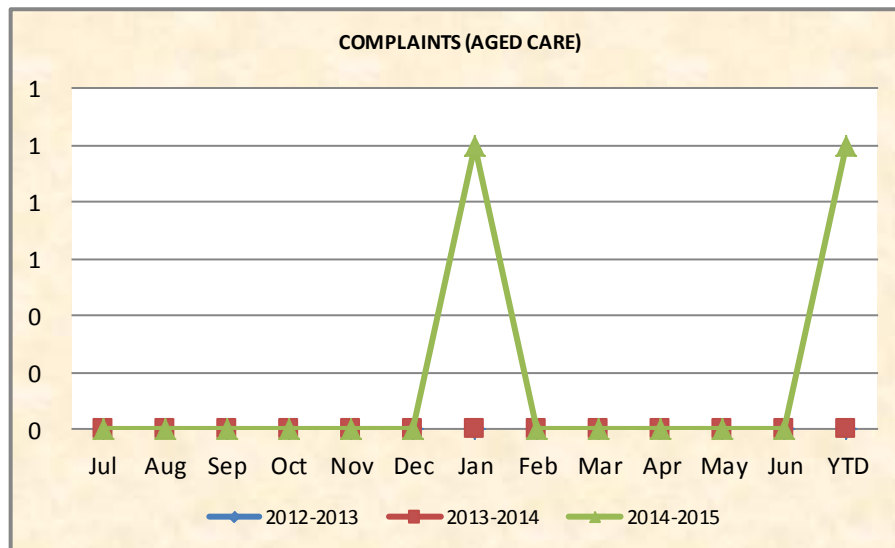


Consumer Feedback

At Omeo District Health we welcome feedback from our patients, residents, clients and visitors. We consider feedback important as it helps the organisation to provide the best service possible. During the year Omeo District Health conducts surveys to obtain feedback from our stakeholders. In 2014-2015 the following surveys were completed:

- A Resident Satisfaction Survey
- Quick survey forms by inpatients, outpatients, community clients and medical centre clients.
- Community Health Needs survey
- Individual thank you cards via mail and email.





All complaints received at the organisation are investigated and responded in a timely manner to make sure that all issues are acknowledged, addressed and resolved. Information received through the feedback process help the organisation evaluates our service delivery and implement initiatives for improvement.

Dental Health Services

Dr Lex Bertrand and Patrick Mattu have continued to provide skilled Public and Private dental services throughout the year.

This year ODH faced the challenge of transferring to Commonwealth Child Dental Benefits Scheme (CDBS). The CDBS has been well received by the community and ODH continues to promote this as an important care option.

It is anticipated that the dental service will continue into 2016 under the current model with the delivery of public and private dental services. Crucial to this model being provided at Omeo is the ongoing Gippsland wide collaboration of the Graduate Dental Program. This association with the broader Gippsland dental services allows ODH to provide additional capacity for public patients and is seen as a key component of dental care at Omeo.

Clinical safety audits are completed on a regular basis.

These include the following items:

1. Hand hygiene observation audit – 100% compliance
2. Dental Infection Control – 91.4% compliance with 5 recommendations for improvement implemented.
3. Batch tracking Audit – 100% compliance
4. Sterilising – 97.1% compliance with 2 recommendations for improvement implemented

Our Services: Providing Continuity of Care

Omeo District Health provides broad-based health and support services to Omeo, Benambra, Swifts Creek, Ensay, Dinner Plain and surrounding districts.

Acute Care

4 Acute beds for general medical care
Emergency Stabilisation in Urgent Care Centre

Residential Aged Care

10 High Level Care Beds
4 Low Level Care Beds
Aged Care Assessment
Diversional Therapy
Respite Care
Virtual Visiting program for Residents
Gentle exercise program for Residents

Allied Health & Community Services

Chronic Disease Management,
Diabetes Education
Counselling / Social Work
Dietetics
Emergency Housing
Podiatry
Foot Care
Health Promotion and Education
Information and Referral
Kindy Gym
Occupational Therapy
Physiotherapy
Speech Pathology
Youth Program
Allied Health Assistant
Community Transport
Volunteer Program
Community Gym and Exercise Classes
Pre-employment physical testing program service
In-venue day care program

District Nursing Services

Equipment Hire
Home Visiting
Palliative Care
Post-Acute Care Program
Respite Care
Post Discharge Support
Transitional Care program in the community

Home and Community Care

Domestic Assistance
Home Maintenance
Home Respite
Meals on Wheels
Personal Care

Sub-Acute Care

Rehabilitation
Transitional Care Programme

Visiting Services

Maternal & Child Health
Continence Service
Wound Consultant
Ophthalmologist

Medical Services

Omeo Medical Centre

Dental Services

Public / Private Dental Services

Planned Activity Group

Supporting Portfolios

Administration
Environmental & Food Services
Infection Control
Maintenance & Gardens
Occupational Health & Safety
Pathology
Quality

Use of the Facilities

Community Group Meetings
Omeo Playgroup
Optometry Services
Swifts Creek Community Centre

Ancillary Services

Radiology

Tell us what you think?

Where did you get this report?

☐ At the hospital ☐ In the Mail ☐ Other

What did you like most about the report? _____

What did you like least about the report? _____

Do you think the report is?

☐ Easy to understand ☐ Difficult to understand ☐ About right

Any other comments? _____

Thank you

Your feedback helps in the development of future Quality of Care Reports.

Please send completed forms to:

CEO/DON
Omeo District Health
PO Box 42 Omeo 3898
Phone: 03-51590100
Facsimile 03-5159 0194

