Inglewood & Districts Health Service

Quality Account Report
2015 - 2016





On behalf of everyone at Inglewood & Districts Health Service (IDHS), we are proud to present our 2015-2016 Quality Account.

The Quality Account is prepared for patients, carers, residents and community members to keep you up to date on how we are travelling at IDHS. As you read the following pages, our staff are continuously involving consumers in their care, to improve the quality and safety of the care we provide. We hope you find the information inside interesting as we highlight the continued improvements to the quality and safety of our services.

We'd love to hear what you think about this Quality Account, or how we're going in general, so please feel free to drop us a line at admin@idhs.vic.gov.au or give us a call on (03) 5431 7000.



Quality Account Report Feedback

The Consumer Advisory Committee (CAC) reviewed the Quality of Care Report (2014-15) and were satisfied with the content. The members suggested additional routes for circulation, and local business owners offered to display the report to encourage the community to take a copy. The report is to be presented at the Annual General Meeting in November 2016.

Consumer, Carer and Community Participation

IDHS is committed to encouraging participation from the whole community in the planning of services. A very proactive Consumer Advisory Committee has been in place for some time. The members provide information and advice regarding service and program planning and information provided to consumers.

The cultural responsiveness of the Victorian health system is in place to address the six standards resulting in a whole organisation approach. Cultural awareness training is provided; accredited interpreters are available as required. IDHS has been fortunate to have appointed an administration staff member through the Koolin Ballit trainee program.

IDHS is committed to improving the Health Literacy of our community. "Health Literacy is the degree to which a person has the capacity to communicate, obtain, process and understand health information and services to make appropriate health decisions" (Health Literacy Report to Inglewood & Districts Health Service May 2016). The report offered a number of recommendations around signage, noticeboards, and main entrances.

To strengthen health services response to family violence, policies and procedures have been developed and implemented. Welfare staff have attended education sessions and information has been circulated to staff. An elearning package is to be implemented in the near future.



IDHS Community Health Team provides many Health Promotion and Community Engagement programs. Services are based on population health data and directed through an Integrated Health Promotion Plan. Our key population groups are economically and socially disadvantaged and have limited transport.

Programs held are:

- Rural Health Promotion
- youth programs
- rural health days
- quit smoking
- oral health and nutrition programs.

Rural Health Days and Men Matters are two initiatives that have had good reviews from the community, improving community experiences and health outcomes. Participant's comments about change in behaviour included: "visit GP more often" and "Do bowel screening test"

Quality and Safety

IDHS is committed to providing a satisfactory consumer and staff experience by responding to consumer and community feedback and complaints. All consumers and their families are encouraged to provide feedback in the form of satisfaction surveys, cards, letters and verbal communication. All complaints are responded to within seven (7) days.



The Victorian Healthcare Experience Survey has once again ratified our commitment to quality and excellence in patient care as have our own patient and resident satisfaction surveys which indicate a high level of general satisfaction. In addition to the VHES we have introduced a Satisfaction Survey which can be benchmarked with other small rural health services

"For my first stay here everyone was wonderful and professional" - Acute patient

"Thank you for the care and support you gave Dad" - District Nursing Service

Staff satisfaction is measured at annual Performance Development reviews, ad hoc meetings and through the "People Matter Survey". The survey indicated public trust, customer satisfaction; best practice approaches, providing high quality services to the community and commitment to patient safety. Issues identified in the survey have been addressed through the implementation of the Studer System and Working Hard with You (WHY) Program to implement strategies and promote a positive workplace culture.

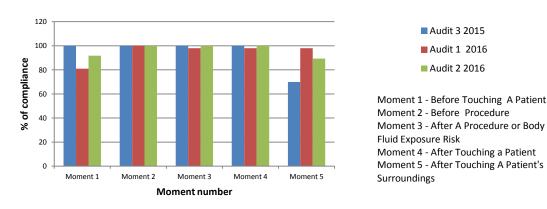
A Healthy Together Achievement program at IDHS - "Better You Better Us" aims to assist staff to quit smoking, increase physical activity, eat healthy and reduce alcohol intake. IDHS has been recognised as a healthy workplace achieving the state benchmark in the program for physical activity.

This last year has been particularly challenging but rewarding with the successful achievement of two Accreditations. An Aged Care Accreditation was conducted by AACQA (Australian Aged Care Quality Agency) in August 2015 for both the Hostel and Nursing Home. IDHS passed all 44 standards. The organisation wide survey occurred in March 2016 under the National Safety and Quality Health Service Standards (NSQHS) was conducted by Australian Council on Healthcare Standards (ACHS). The organisation passed the accreditation that includes 256 actions to be met across all 10 standards. We received no recommendations for further action which is testament to the quality systems that are in place at IDHS.



Hand Hygiene is critical in the prevention and control of healthcare associated infections. Regular audits conducted by trained auditors, ensure staff rub their hands with an alcohol based solution or wash their hands with soap and water. IDHS exceeded the Department of Health & Human Services (DHHS) target of 80%, achieving average 89% compliance. These results are fed back to staff as part of continual improvement in quality of care in our organisation.

1DHS Audit results for Hand Hygiene Australia 5 moments June 2015 - July 2016



Staff influenza immunisation program protects our patients and residents from the seasonal flu. Complications from the flu can be serious and even deadly, or those who already have a medical condition or a weak immune system can be severely affected. 75% of healthcare workers were immunised for influenza, equalling the (DHHS) target.



Medication Safety - Medications are the most common treatment in healthcare. Errors do and can occur. IDHS is committed to medication safety and the wellbeing of patients/residents. Regular auditing of the medication management system includes the storing, prescribing, and administering. Staff are trained in medication use, and patients and carers are provided with relevant information to reduce incidents. Improvements involving medications include, standardised medication charts, a list of high risk medications and a medication management plan.



Preventing Falls and Harm from Falls - IDHS monitors falls across the organisation. Our data indicates falls in the acute area are rare while in aged care falls remain below the state average.



Pressure Ulcers - A pressure ulcer is a lesion caused by continuous pressure resulting in damage to the skin and underlying tissue. Residents and patients, who are unable to reposition themselves, have poor nutrition and mobility are at the greatest risk. Systems and procedures in place include: risk assessment, skin inspections, avoiding friction, use of pressure relieving equipment such as air mattresses, compliance with policies and guidelines by nursing staff. Once again our rate of pressure injuries in the aged care facility is well below the state average.



Blood and Blood Products - Treatment with blood can be high risk. This is why there is strict criteria and best practice guidelines in place. Staff training includes taking of blood, compatibility reports reporting adverse reactions, transport, and safely administering the blood. Compliance of the relevant criteria is conducted by concurrent audits. Blood transfusions are infrequent at IDHS, only two for this year.

In the Nursing Home and Hostel clinical care is monitored through the five Public Sector Residential Aged Care quality indicators (PSRACS). These include pressure ulcers, use of physical restraint, multiple medication use, falls and fractures and unplanned weight loss. IDHS falls and medications are below the state average in the quarter of April to June 2016.

Falls at IDHS Hostel Results for April to June 2016



The trending graph, demonstrates a decline in falls over a 5 year period.

9 or more medicine use at IDHS - Hostel Results for April to June 2016



The trending graph, demonstrates a decline in the number of medications used over a 5 year period.

Continuity of Care

IDHS is committed to ensuring consumers are satisfied with access to services including transfers as required and discharge planning that meets their needs. At IDHS discharge planning occurs from admission and patients with ongoing complex needs or chronic conditions may be referred to District Nursing or HACC services or to a Community Health program such as Cardiac Rehabilitation, Diabetes Educator, Physical Activity or Strength Training. In addition the Transition Care Program (TCP) clearly demonstrates a growing demand. The program has been very successful in offering frailer patients an opportunity for additional support to transition home or into residential care following a hospital admission. Patients are provided with up to twelve (12) weeks of residential care in the hospital where they are supported and encouraged to regain full independence, or they are supported at home. Physiotherapy, nursing support and counselling is provided through the program.

Advance Care Planning (ACP) is a plan for future health care and end of life care. It assists family members and loved ones in discussing what is important to an individual's quality of life if they were unable to make their own decisions. A patient with an



ACP had his wishes respected enhancing the quality of care by avoiding the incidence of inappropriate and unwanted invasive medical treatments.

The benefits of ACP (from the Advance Care Planning Australia website 2016)

- "You continue to have a say in your medical care, even if you become too sick to speak for yourself.
- You will have peace of mind, knowing that you are more likely to receive the medical treatment you would want, and not receive the treatment you would not want.
- Your family and friends are relieved of the burden of having to make decisions without knowing your choices in a highly stressful situation.
- Research and anecdotal evidence also show that if doctors inform people about possible future treatments and listen to their wishes, better end of life care follows.
- Studies conducted in a range of healthcare settings suggest that advance care planning can improve individual
 and family satisfaction with care, reduce the number of people transferred from nursing homes to hospitals and
 reduce stress, anxiety and depression in surviving relatives" (Advance Care Planning Australia website 2016)



For further information regarding ACP - contact your GP, nursing staff, or www.advancecareplanning.org.au

IDHS is proud of the quality of care we provide for our patients, residents and community members. We embrace all of the aforementioned systems and processes as mechanisms to ensure our standards of service delivery, safety and quality are continually improving in response to the needs of the community.

Services offered by IDHS

- Acute Care
- Residential Aged Care
- Community Services
 - **Nursing Services**: Community Health, Community Mental Health and District Nursing, Diabetes Educator.
 - Social Welfare Services: Social Worker and Alcohol and Other Drugs Worker.
 - Social Support Services: Planned Activity Groups, Volunteer Visiting and Volunteer Transport.
 - **Community Development:** Health Promotion/Education, Capacity Building, Strength Training, Youth Services.
 - Allied Health Services: Physiotherapy, visiting services Podiatry, Dietetics and Occupational Health.



What is the role of the consumer representative?

The role of a consumer representative is to provide an individual perspective primarily based on their own knowledge, experience and skills as an individual consumer of health services; or as someone supporting a consumer of health services. Individual consumers are motivated to become involved in partnerships for a variety of reasons, including positive and negative experiences within the system. A consumer representative also provides a consumer perspective, but their input is often informed by feedback and the views of other consumers as well as their own experience and opinions.

TIP SHEET
Standard 2:Partnering with Consumers
Australian Commission on Safety and Quality in Health Care

If you are interested in joining our Consumer Advisory Committee please complete the form below

Name		
Preferred Telephone number _		
Email address	 	

