Your Health Service - Your Way

Quality of Care Report
2012-2013
# Your Health Services

## Acute

**Inpatient Services**
- Medical / Surgical Ward
- Maternity
- Haemodialysis

**Perioperative Services**
- Theatre
- Day Surgery
- Central Sterilizing Dept (CSSD)
- Pre-admission

## Urgent Care Centre

## Community Services

**Community Nursing**
- Barwon Post Acute Care
- Birregurra Community Health Centre
- Cancer Link Nurse
- Continence Resource
- Diabetes Education
- Home Nursing
- Hospital Admission Risk Program
- Hospital in the Home
- McGrath Breast Care Nurse
- Palliative Care
- Wound Management Resource

## Allied Health

- Adult Day Activity Centre
- Community Dental Clinic
- Community Rehabilitation Service
- Health Promotion
- Nutrition
- Occupational Therapy
- Physiotherapy
- Podiatry
- Restorative Care
- Social Worker
- Speech Pathology
- Women's Health

## Family and Community Programs

- Alcohol and Drug Service
- Barwon South West Children's Resource Program
- Barwon South West Homelessness Services
- Colac Neighbourhood House
- Child FIRST
- Family Support
- Family Violence / Women's Counselling
- Financial and General Counselling
- Traditional Housing
- Youth Development Program
- Youth and Children's Counselling

## Visiting Services

- Barwon Community Legal Service
- Centre Against Sexual Assault
- Drink Driver Education Program
- Family Planning
- Gambling Financial Counselling
- Prosthesis and Orthotics
- Victims of Crime
- Oncology Review

## Orthopaedic

- Gynaecology Clinic

## Residential Aged Care

- Corangamarah - High Care Aged Care Facility
- Respite Care

## Diagnostic Services

- Pathology
- Radiology / Medical Imaging

## Co-Located Services

- Department of Human Services Child Protection Pathways
- Time for Youth
- Jigsaw - Adolescent Mental Health Service

## Medical Services

- Clinical Governance
- Medical Records
- Pharmacy

## Corporate Services

- Administrative Services
- Engineering Services
- Environmental Services
- Executive Services
- Food Services
- Staff Development
It is with pleasure that the board and the team of Colac Area Health present the Quality of Care Report to our community for the 2012–13 financial year.

During 2012-13 The Colac Area Health Team:

- Finalised improvements to the theatre complex that support surgery, make the complex more efficient and importantly will assist with increased demand.
- During 2012-13 the haemodialysis unit was relocated. While not purpose-built, it is more comfortable for all haemodialysis patients who now have the benefit of a better facility than the cramped conditions previously experienced.
- Improved community access to medical services. In partnership with medical clinics and Barwon Medicare Local established an After Hours Medical Clinic 5 days per week, expanding on the historical weekend clinics.
- With assistance from Blue Ribbon Foundation improved access to consultant support by installing telemedicine facility in Urgent Care to assist clinical review of ill patients.

- Improved and strengthened our Restorative Care service to aid patients returning home after a lapse in their daily living capacity by assisting individuals regain independence and delaying institutional care.
- Improved alcohol and other drug services productivity by streamlining internal processes to the benefit of clients.
- Established a Healthy Lifestyle Clinic to address the rising concern of obesity, to promote health literacy and our individual health and wellbeing self-management responsibility.

Key projects and initiatives that the Board will be pursuing during 2013-14 include:

- Complete construction of the Youth Health Hub to house youth-specific services for young people.
- Strengthen mental health services in the Colac-Corangamite District by pursuing specific mental health funding.
- Improve the inpatient palliative care facility to better reflect patients’ and families’ expectations and provide a more patient and family-friendly environment.
- Implement a “Kinda Wide Smiles” early intervention and prevention service across Colac Otway Shire.

I look forward to letting you know our achievements against these ambitions in our 2013-14 Quality of Care Report.

Geoff Iles
CHIEF EXECUTIVE OFFICER
Food in the Colac Otway Region

BACKGROUND TO COMMUNITY FOOD SECURITY NEEDS ASSESSMENT

The Colac Otway Shire Food Security Needs Assessment was conducted in 2012, to support development of strategic actions to create a more ‘food secure’ community. The information collected in the needs assessment included: mapping of retail outlets; food production and transport; community consultation; stakeholder consultation; and completion of the Victorian Healthy Food Basket Survey. When collated it started to build a picture of the causes of food insecurity for people in the Colac Otway Shire.

The three priority areas are:
- Cost of food
- Transport of and access to food
- Limited food skill and knowledge

An assessment of the international, national and regional literature (primary, secondary and grey) was also undertaken to identify what the evidence was saying were the most effective ways of addressing these priority areas.

COMMUNITY FOOD SECURITY NEEDS ASSESSMENT

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BACKGROUND TO COMMUNITY FOOD ACTION PLAN – COLAC OTWAY

Food security is defined as ‘the state in which all persons obtain nutritionally adequate, culturally acceptable, safe foods regularly through non-emergency sources’.

Population data for the Colac Otway Shire (COS) shows that eight in every one hundred people in the region ran out of food over a twelve-month period and were unable to replace it. This figure is higher than both the Barwon South West Region and Victorian averages of food insecurity rates. This data is supported by findings that over half the COS population is not meeting the daily recommended fruit intake levels and an even greater amount are not meeting the daily recommendations for vegetable consumption. In addition, over half of the COS population is classified as overweight or obese. Population data also shows that rates of food-related chronic disease, such as heart disease and diabetes, are following an increasing trend in Victoria.

These statistics supported the start of a comprehensive needs assessment process as a partnership between Colac Area Health, Colac Otway Shire and Otway Health.
Medication Safety

Become a resistance fighter! Resistant bacteria are a serious enemy.

What can you do to help?

- Do not expect your doctor to prescribe antibiotics for everything that ails you
- If you do have a bacterial infection take the full course, don’t keep a few for next time
- Give your body a chance to get better without pills. Rest and fluids often help your natural healing process to occur
- Don’t stockpile antibiotics

Remember antibiotics will not kill viruses such as colds and flu.

Telehealth

In 2013 the Urgent Care Department received a generous donation from the Victoria Police Blue Ribbon Foundation enabling us to purchase equipment to provide Telehealth.

Telehealth is a video conferencing system that has the potential to:

- Provide people in rural remote areas with better health outcomes
- Provide support to GPs and nurses working in rural and remote areas with better access to expert clinicians

Offsite expert clinicians are able to log in and see the patient and discuss the patient’s treatment with Colac-based staff

Telehealth is about ‘reducing the gap’ in healthcare often experienced by people living in remote areas, thus assisting in making the healthcare system more efficient and equitable for all.

What is a pressure injury?

A pressure injury is an area of skin that has been damaged because of:

- Unrelieved pressure
- Friction or shear sometimes from poorly fitting shoes
- Presence of constant moisture

They commonly occur on the heels, toes or buttock.

How to prevent pressure injuries?

- Apply moisturiser twice daily
- Use mild, pH neutral, non-irritant skin cleaners and body products
- Protect skin exposed to friction
- Check your skin regularly and seek help if you have any sore, blistered or red skin
- Eat a nutritious diet
- Use pillows and foam wedges to protect bony prominences
- Avoid heel or sacral contact with hard surfaces
Interview with Jeremy Barren, Chairperson

Why did you want to join the CAH Community Advisory Committee?

Having moved to Colac with my family at the beginning of 2013, I wanted to volunteer my time to groups and organisations that were serving the broader community.

Professionally I have served and worked on various committees and boards in the community sector and wanted to continue to develop and utilise the skills that will assist with the roll out of the CAH Community Advisory Committee.

Seeing the value of a committee that will support CAH to engage with internal and external stakeholders and consumers.

What does the CAH Community Advisory Committee hope to achieve?

• Provide direction and leadership in relation to the integration of consumer, carer and community views
• Consumers and carers are represented in decision making at CAH
• Development of a Community Participation Plan for CAH
• Representation for vulnerable members of our community, ensuring access and quality of service provision.

Consumer participation

Over the past 12 months we have developed a plan to include our community as partners in both operational and strategic practices within our service.

The plan includes the development of policies, a staff committee with consumer representation to focus on Consumer involvement in our service, review of our website to include “Our Community” and the recruitment and appointment of our Community Advisory Committee.

Community Participation Plan

Staff and community members will work together to develop a Community Participation Plan for CAH. The plan will ensure vulnerable members of our community have better access and be able provide feedback on our services. It will also look at bringing together findings from the Colac Cultural Diversity Plan with targets set to improve care for Aboriginal and Torres Strait Islander patients. The current indigenous population in the Colac Otway Shire is 0.94%, with our population born overseas at 7.9%.

ACUTE & SUBACUTE

A Consumer Participation Indicator score of 84.70 out of a minimum standard of 75

RESIDENTIAL AGED CARE

Satisfaction rated by Residents/Family/Carers surveyed 91.33% out of minimum standard of 75%
JANUARY 2014

MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY  SUNDAY

1  2  3  4  5

6  7  8  9  10  11  12

NEW YEAR’S DAY

13  14  15  16  17  18  19

20  21  22  23  24  25  26

AUSTRALIA DAY

27  28  29  30  31

AUSTRALIA DAY
PUBLIC HOLIDAY

TERM 1 STARTS

PUBLIC HOLIDAY

AUSTRALIA DAY
Max Mills was born in the old Colac hospital and raised on the family farm at Barongarook where he still lives and works.

Max spends the time he is attached to the machine reading the paper or watching television because he is unable to move around when he is on the machine.

You are a member of our Community Advisory Committee, what was your interest in becoming a member of this committee?

My interest in being part of the Community Advisory Committee was to be part of a team of ‘like-minded’ people wanting to improve the services provided by CAH.

What I have experienced as a patient of CAH has given me the opportunity to have insight into the ongoing changes and attitudes of the hospital system in general.

Improvement that would benefit dialysis patients would be to have a renal specialist working within CAH as this would allow patients to be treated in Colac and not have to travel to Geelong.
Smiles 4 Miles is an Oral Health Promotion Program that supports positive oral health behaviours in early years.

Dental Health Services Victoria fund CAH, Corangamite Shire, Otway Health and Community Services to work in partnership to implement Smiles 4 Miles in early years services within our catchments.

Early years settings who register for the program receive free toothbrushes, toothpastes, water bottles and lunch boxes each year. To meet the requirements of this program, early years settings and the health promotion team at CAH work together to enhance oral health opportunities within their settings.

This includes:

- Healthy eating and drinking policy
- Oral health policy
- Parent engagement activities
- Curriculum activities for the children
- Assessments of lunchbox and drinks

Colac Area Health in partnership with the other organisations has been running the Smiles 4 Miles program for five years and has reached 27 kindergartens in the Colac Otway Shire and surrounds.

The program is now well embedded in the early years settings and each year when the services apply for their Smiles 4 Miles award they are recognised for their hard work.

Like all programs there are challenges along the way, however the partnership and reorientation of services who support program implementation including occupational therapy, dietetics, early years staff and health promotion allows the program to continue to achieve great outcomes.

This program is one of four main projects CAH is working on to improve oral health outcomes within the Colac Otway Shire.
Youth Health Hub

The youth-friendly, purpose-built Youth Health Hub will accommodate primary health, mental health, drug and alcohol and community support service for young people.

These services and programs will contribute to the improvement of health and wellbeing outcomes of young people in Colac Otway and Corangamite shires. Understanding the needs of the local youth is critical in getting the development of this service right.

Colac’s young people are helping shape the new youth health centre and seven teenagers have formed a youth reference group to have their say on the centre.

"It’s going to be important in letting teenagers have a place to go when they need it”

This amazing group of young people were keen to design this building for the young people of the community to enjoy and celebrate.

We wanted young people from all different cultures and communities to have their say about what they wanted.

The group has talked at school assemblies and has created a Facebook page to keep other young people updated on its plans.

Youth Health Needs Assessment

Colac Area Health completed a Youth Health and Wellbeing Needs Assessment in 2012. We surveyed 176 young people in the Colac Otway Shire, to find out what the issues are for young people and how we can support development of the Youth Health Hub. A summary of the findings are below.

- **What we know**
  - 10.3% would likely seek information for young people
  - 9% parents
  - 7% partner

- **Challenges**
  - Experienced in-line with 82% of respondents
  - 14% of respondents who received
  - 12% of respondents who received
  - 10% of respondents who received

- **Strengths**
  - Accommodation
  - 97% of respondents who received
  - 95% of respondents who received
  - 94% of respondents who received

- **Youth Health Hub Development**
  - Access to entertainment, activities and food
  - Input from young people about the design, aesthetics, services
  - Confidentiality, anonymity and free services
  - Safe and friendly atmosphere

For the full youth health and wellbeing report please head to the Colac Area Health website www.cah.vic.gov.au
The Infection Control and Prevention Department has made significant progress towards meeting Australian National Safety and Quality Health Service Standards.

There are a number of criteria that have been addressed including:

- Effective governance and management systems for healthcare-associated infections
- Strategies for the prevention and control of healthcare-associated infections
- Prompt identification and management of infections
- Safe and appropriate antimicrobial prescribing
- Ensuring clean and hygienic health care facilities utilising current best practice guidelines for sterilization of surgical instruments
- The provision of health care-associated information to consumers and patients

Hand hygiene is recognised as the most important of the infection prevention and control strategies.

The National Hand Hygiene Initiative identifies the Five Moments for Hand Hygiene as a nationally consistent approach to preventing infections.

We conduct yearly audits and provide our results to the Hand Hygiene Program three times a year.

We consistently achieve figures of >70% which compare very favourably with compliance nationally.

Hand Hygiene product is available at the entrances to the hospital and hand hygiene stations at the entrances to Acute and Residential Aged Care for clients and residents.

We participate in the Victorian Surgical Site Infection Hospital Acquired Infection Surveillance (VICNISS) program.

Reports regarding infection rates and occupational exposure rates are made to VICNISS on a monthly basis.

All pathology related to inpatients is reviewed against criteria for hospital-acquired infection. Infection rates in both these areas at our health service are low.

Three new brochures were developed to help consumers participate in their care.

Cleaning

The standard of cleaning we have is well above the acceptable quality level (AQL).

Monthly cleaning audits are conducted internally by a Qualified Victorian Cleaning Standards Auditor (QVCSA). CAH has two QVCSAs on site.

To ensure the hospital meets the cleaning standards for Victorian healthcare facilities we undertook an audit on the 6 June 2013, which was carried out by Mrs Carol Rosevear from Victorian Infection Prevention Australia. Data is reported to the Department of Health in March, August and November.

The results of the annual audit are below, the results are an excellent outcome for CAH and the community.

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<th>Area</th>
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<td>Very High Risk</td>
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<td>Moderate Risk</td>
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<td>Laboratories, Mortuary, Medical Imaging, Waiting Rooms, Administration</td>
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<td>Overall Facility Score</td>
<td>AQL 85%</td>
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Respect  •  Integrity  •  Leadership  •  Innovation  •  Quality  •  Partnership
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Restorative Care and HITH

Restorative Care

Restorative Care has been part of our allied health program for 18 months and helps people get back on their feet and prepares them to go home after they’ve passed the acute phase of treatment or surgery.

One patient, Mr Cole, who spent more than a week in restorative care, said he wanted everyone to know about the improvement he felt having had restorative care.

Mr Cole praised our allied health staff and Corangamarah nurses for helping him feel well enough to go home and for how they treated other patients and residents.

But he’s not alone, we’ve had lots of good stories and great feedback from previous restorative care patients as well.

“What I’ve got here has been amazing in love and care, dedicated nursing and wonderful food. It has been amazing – I don’t think the citizens of Colac realise what an asset we have here.

“This is a wonderful annexe to the hospital – it’s above my expectations of what this place is,” said Mr Cole.

The aim of the restorative program is about giving everyone the best opportunity to achieve success.

Hospital in the Home (HITH)

Being in hospital can be a frightening and worrying time for patients. Most people would sleep and rest better in their own beds, near loved ones, pets and hobbies and would lead to a quicker recovery.

Our HITH program allows for patients to receive acute care services in the comfort of their own home by experienced professionals. Services that can be provided by HITH include intravenous fluids, wound dressings, medication therapy for blood clots, intravenous antibiotics, just to name a few.

Beverley Allan is a HITH client and receives intravenous antibiotic therapy at home.

Beverley says that having her treatment at home helps the whole family and takes the pressure off them and allows her to remain independent in her own home.

This year, our HITH program saw more than 100 clients in the community, including children from our paediatric HITH program through the Royal Children’s Hospital.

Our hope for the future is to continue to grow the service and be able to offer our community top-quality acute care services while recovering at home.
The theatre project included adding another anaesthetic room, a recovery bay and more day-stay beds.

The upgrade now allows for an additional 500 surgeries a year at the hospital.

We have received praise from Colac’s longest-serving surgeon Mr Chris Sutherland for creating a “fantastic” new space for surgeries at the health service.

Mr Sutherland, who has practised in Colac for 30 years, said the new theatre would improve patient flow by 30 per cent.

“It certainly makes the efficiency of what we are doing much improved,” Mr Sutherland said.

“Potentially it increases throughput by about 30 per cent and that’s what we’re aiming to do,” he said.

The theatre redevelopment also included a new haemodialysis room with three treatment chairs and the capacity for a fourth, as well as providing a larger space for patients and nurses.

A local construction company BDH Construction won the tender for completing the new theatre redevelopment.

Henry Bongers, Director BDH Construction, took the opportunity to acknowledge the support CAH gives local businesses.

“It was a fantastic project to be involved with, proud to be part of a project that will support the community for years to come”
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- **Monday, July 1**: NAIDOC Week
- **Tuesday, July 2**: NAIDOC Week
- **Wednesday, July 3**: NAIDOC Week
- **Thursday, July 4**: NAIDOC Week
- **Friday, July 5**: NAIDOC Week
- **Saturday, July 6**: NAIDOC Week
- **Sunday, July 7**: NAIDOC Week
Accreditation

Involvement in accreditation programs provides the opportunity for us to have an independent review of how we provide quality, safe care.

CAH participates in a number of accreditation reviews to cover the wide range of services we provide. They include:

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<th>Accreditation Program</th>
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<td>Standards</td>
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<tr>
<td>Community Care Common Care Standards</td>
<td>HACC review 2008</td>
<td>Successful review with overall standards met</td>
<td>CCCS review September 2013</td>
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<tr>
<td>Aged Care</td>
<td>Accreditation audit 2012</td>
<td>All standards met with full accreditation for 3 years</td>
<td>Aged Care review September 2015</td>
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<tr>
<td>Department Human Services</td>
<td>CSO review May 2012</td>
<td>Full compliance and registration</td>
<td>DHS review 2015</td>
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Aged Care

Corangamarah had a re-accreditation audit on 10-11 July 2012. The audit was conducted by an assessment team appointed by the Aged Care Standards and Accreditation Agency.

Information gathered by the assessment team during the site audit in July 2012 showed that Corangamarah meets all 44 of the 44 expected outcomes.

EQulPNational

Auditing and review are key elements for CAH to demonstrate we are meeting requirements for implementation of the National Standards. Bedside audits have commenced and will help drive improvements, support patient safety and provide patient feedback on care provided.

Community Care Common Care Standards

The program provides community care services to frail aged and younger people with disabilities and their carers. At CAH these standards apply to a number of services provided through Community Nursing and Allied Health.

Department of Human Services (DHS)

From 1 July 2012 DHS-funded program agencies will be externally reviewed against the 4 DHS standards. Family Violence and Homelessness Services will be included in the review for the first time. The transition for us means that we must have an onsite external review against these new standards within 3 years of our last onsite review.

Your Say - Your Feedback and Suggestions

Compliments, complaints and suggestions are equally important in shaping our future service delivery.

Our results in the Victorian Patient Satisfaction Monitor, a survey of patients in Acute Ward, show an improvement from our previous Wave report on our complaint management.

CAH believes good complaints management means being open with consumers, investigating the causes of what happened and developing strategies to prevent recurrence.

Your Quality Assurance

Respect • Integrity • Leadership • Innovation • Quality • Partnership
AUGUST 2014

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**Daffodil Day**
Maternity Services

Our maternity services have been working behind the scenes to ensure increased consumer choice and participation.

Maternity has also improved post-natal access to women. We are now able to offer three home visits in the first week and continue support afterwards as needed up to six visits after the birth.

With the appointment of a new Clinical Midwife Consultant in April, our dedicated team of midwives and GP’s look forward to the continued provision of high-quality maternity care.

This year maternity services have dedicated their time to ensure that they are women and family-focused by offering clients a chance to access the midwives more often by increasing the antenatal clinic days, encouraging the writing of birth plans and where possible matching one-on-one antenatal care with one midwife.

Some of Colac’s GP Obstetricians

Respect • Integrity • Leadership • Innovation • Quality • Partnership
Communicating with Patients and Carers

Blood transfusions are needed for a variety of reasons.

Red blood cells are used to treat anaemia (low blood count) as well as during surgery or after an accident to treat severe bleeding.

Other blood products are used to stop bleeding due to certain medications, treatments or disease and to replace certain clotting factors or proteins that help in controlling bleeding. All blood in Australia comes from voluntary unpaid donations.

Colac Area Health has processes to ensure blood transfusions are safe and that patients are involved in decisions about their healthcare.

- On admission, cultural or religious considerations are identified and an interpreter service is available if required. Discuss with the doctor if there are personal or religious reasons against receiving blood or blood products.
- Consent to blood or blood product transfusion involves discussion between the doctor and patient to ensure the benefits, significant risks and any alternative treatments are understood.
- Information sheets are provided and opportunity is given to ask questions prior to the transfusion.
- Blood is tested for compatibility between donor and recipient. This is called cross match.
- Systems are in place to identify the patient at all stages, from donor to recipient, to ensure the correct blood is received.
- For medical conditions, other options such as iron replacement, are considered prior to administering blood.
- Blood products are strictly screened and risks of contracting an infectious disease are low. Other risks are related to circulation overload if there is cardiac disease, allergic reaction and transfusion-related lung injury. The patient is closely monitored throughout the transfusion. Effects on the immune system is a topic of research.
- Follow-up phone calls are planned after discharge to determine if information given was adequate and to check how the patient feels following the transfusion.
- The need for transfusion is minimised by checking the haemoglobin level (oxygen-carrying capacity) prior to major surgery, stopping blood thinners where necessary and using advanced surgical techniques during surgery.
- The consent process was audited in 2012 to ensure patients are involved in their healthcare decisions.
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Our Staff Development

We have an ongoing commitment to excellence in learning and professional development for all staff. This is primarily managed through the Staff Development Unit which routinely undertakes a needs assessment to identify where education is required.

The Staff Development Unit offers a range of education programs across all areas of CAH. Each education program offered aims to support participants as they transition into a new role or update their existing skills.

Our Staff Development Unit is a leader in development of SOLLE (SWARH On-Line Learning and Education) in the Region. A range of education packages have been developed by the Staff Development Team and accessed from external agencies. The provision of online training enables staff to maintain required mandatory training and competencies in areas relevant to their role and work through training packages at their own pace.

Graduate Program

The Graduate Nurse Program at CAH saw six graduates complete their program in January 2013.

The Graduate Nurse Program supports graduates in their first year of practice, providing an environment where they can consolidate and further develop their knowledge, skills and competence. The Graduate Program provides a platform for developing safe, confident and accountable professionals. We value learning, professional development and evidence-based practice and recognise that early graduates require access to experienced clinical nurses as preceptors for supervision, direction and instruction.

Five new graduates commenced on the 28 January 2013 and will rotate placements through the Acute Ward, Community Nursing, Urgent Care Centre and Perioperative Services. CAH also has eight staff completing Post Graduates in Midwifery, Perioperative services, Advanced Nursing Practice and Palliative Care.

Traineeships

Traineeships in Business, Support Services, Health Services (Food), Health Service Assistance (Operating Theatre Technician) and Diploma of Nursing have been conducted at CAH.

Traineeships give employees the opportunity to formalise skills and gain qualifications in a wide variety of areas across the organisation. They are conducted in conjunction with Registered Training Organisations.

Student Placements

As a teaching facility, we accommodated 175 students during the 2012-13 financial year from various universities and education providers. Medical, nursing, community and allied health students are paired with experienced preceptors and have access to support sessions daily.

We also accommodated work experience students from a number of local secondary schools in the region on a one-week placement.

It is expected over 200 students will be facilitated on placement at CAH each year and the construction of the student accommodation building will assist students being able to train in a rural facility.
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**NOVEMBER 2014**

- **Melbourne Cup** on November 3rd
- **White Ribbon Day** on November 25th
At CAH we have a number of dedicated administrative staff.

**Community Service Reception**

“It’s rewarding that in our role we are able to assist members of our community on a daily basis”

**Main Reception**

“I am fortunate to work with helpful and supportive colleagues. We have a wonderful team at CAH”

**Corangamarah & Acute Ward Clerks**

“I enjoy becoming part of the residents’ extended family and being involved in our community”

**Community Nursing Ward Clerks**

“It’s good to be a part of an organisation which benefits the entire community”

**Executive Assistants**

“It’s rewarding to know that we support the whole organisation in achieving its goals”

“We enjoy assisting the public immensely and working alongside the dynamic and friendly Home and Community Nursing Team”
DECEMBER 2014

- TERM 4 ENDS on 19 December
- CHRISTMAS DAY on 25 December
- BOXING DAY on 26 December