

2016

Calendar

Quality of Care Report





CONTENTS

- *Welcome - CEO*
- *Vision, Mission and Values, Health Service Accreditation*
- *People Matters, Cultural Diversity, Antibiotic Resistance*
- *Quality and Safety - Indicators*
- *Community Services*
- *Consumer, Carer and Community Participation*
- *Preventing and Controlling Healthcare Associated Infections*
- *Oncology Services- Patient Story*
- *Aged Care Story and Have the Conversation*
- *Glenarm Family Story*
- *Comments, Compliments and Complaints*
- *Distribution*
- *Reader Survey*

Dear Community Member

On behalf of Kerang District Health I am very honoured to provide to you the KDH Quality Report as a Calendar for 2016. The past twelve months has been a very busy period in quality at Kerang District Health with the following;

- Notification and receipt of our organisation wide accreditation against the new National Safety and Quality Health Service Standards;
- Notification and receipt of our re-accreditation audit of "Glenarm", our residential aged care home by the Australian Aged Care Quality Agency;
- Notification and receipt of our re-accreditation for our HACC services;
- Formal establishment of a Partnering with Consumers structure at KDH;

I would personally like to acknowledge the contribution of management and staff in achieving and maintaining our accreditation status at Kerang District Health and the work of Yvonne Fabry, our Quality Improvement Coordinator and Karen Transton our Quality Coordinator in "Glenarm".

I do hope that you enjoy using our KDH Calendar throughout 2016 and look forward to your valuable contribution as a health consumer in Kerang.

Regards

Robert Jarman

Chief Executive Officer

Kerang District Health
PO Box 179
KERANG VIC 3579

No stamp required if posted in
Australia

Quality Coordinator
Kerang District Health
PO Box 179
KERANG VIC 3579



cut here



Your Opinion is very important to us
We would like to hear your view on this
Quality of Care Report.

What did you think of this report?

Very Poor. Poor. Average. Very Good. Excellent.
1 2 3 4 5

Did you find this type of report?

(Please circle your response)

- Informative
- Interesting
- Easy to read
- Hard to read
- Not interesting

What did you like best about this report?

(Please circle your response)

- Its format as a calendar
- It had information I could understand
- Informed me more about what happens at Kerang District Health
- Other(Please specify)

What would you like to see in the report next year and how can we improve the report?

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Thank you for taking the time to complete this survey.
Your comments are very much appreciated.



cut here



January

SUN

MON

TUE

WED

THU

FRI

SAT

1

2

New Year's Day

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

Australia Day

31

2016



Our Vision –To improve the health and wellbeing of the community.

Mission Statement – Kerang District Health will provide appropriate, coordinated and effective patient focused services and care by skilled staff with and for the community.

Our Values –

Respect- We will treat people as we would expect to be treated

Professionalism-our people will model the Public Sector

Values of Responsiveness, Integrity, Accountability, Respect, Leadership and Human Rights.

Caring- We will provide person centred care with empathy and compassion

Collaboration - We will work as a team to share knowledge for continuous improvement, learning and innovation.

Commitment and accountability- We will work hard to be loyal and responsible for our actions

Equity- We will provide all members of the community with equal access to our services.

Health Service Accreditation

Since the last Quality of Care report it has been a very busy year at Kerang District Health, on the 2nd to the 5th of September 2014 Kerang District Health underwent an organisation-wide accreditation survey to assess our performance against the ten National Safety and Quality Health Service Standards.

Kerang District Health passed all ten Standards set by the National Safety and Quality Health Service, however, recommendations for improvement in some areas were identified and these areas included consumer participation and medication safety related to consumer participation. All recommendations have been addressed and reporting on the recommended progress has been submitted to the Australian Council on Health Care Standards in September 2015, including a self-assessment on the first three standards: Governance, Partnering with Consumers and Preventing and Controlling Healthcare Infections.

Kerang District Health's current accreditation expires 3rd November 2017.

On the 2nd and 3rd of December 2015 Kerang District Health Residential Aged Care Facility "Glenarm" underwent full reaccreditation against the 4 standards set by the Australian Aged Care Quality Agency, Glenarm passed all 4 standards achieving all 44 outcomes. No recommendations were received and the comments from the auditors were pleasing noting our facility had a very "homelike" atmosphere. "Glenarm's" current accreditation expires 7th March 2018.



February

SUN

MON

TUE

WED

THU

FRI

SAT

	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29					

2016

People Matters Survey measures aspects of workplace culture and climate across the Victorian Public Sector.

Staff complete this survey yearly to guide us in improvement at Kerang District Health – Staff were surveyed regarding Patient Safety.

- Patient care errors are handled appropriately in my work area- 96%
- This health service does a good job of training new and existing staff- 84%
- I am encouraged by my colleagues to report any patient safety concerns I may have – 97%
- The culture in my work area makes it easy to learn from the errors of others- 88%
- Trainees in my discipline are adequately supervised – 90%
- My suggestions about patient safety would be acted upon if I expressed them to my manager – 91%
- Management is driving us to be a safety-centred organisation – 93%
- I would recommend a friend or relative to be treated as a patient here – 98%

Cultural Diversity

LGBTI – The Rainbow Tick

Kerang District Health is working towards an inclusive organisation that recognises and supports the diverse needs of our community. We acknowledge the challenges that can be faced by those who identify as lesbian, gay, bisexual, transsexual or intersex (LGBTI), and are working towards providing excellent service to people of all sexualities, gender identities and sex identities. A working group has been established to acknowledge and increase the inclusion of Kerang District Health's LGBTI community and commence working towards an inclusive service to achieve the Rainbow Tick. This is a 2-3 year project and Community involvement with this project is being sort. If you would like to become involved or require more information please contact Kerang District Health.



Diversity Training for all staff by Aboriginal Liaison Officer - Ester Kirby, Informing our staff of the Possum Cloaks Program available for all Aboriginal children in hospital in major centres in Melbourne.



Antibiotic Resistance – What's all the fuss?

Antimicrobial Stewardship (AMS) involves making sure antibiotics are used wisely. Bacteria can develop resistance to specific antibiotics, meaning that the antibiotic is no longer effective against the same bacteria, so antibiotics no longer work in people who need them to treat infections. Kerang District Health antimicrobial stewardship program (AMS) is in the early stages of full implementation, policy and guidelines to ensure appropriate prescribing of antimicrobials are being reviewed and implemented, to prevent and manage healthcare associated infections and improve safety and quality of care. By reducing inappropriate antibiotic usage, patient outcomes are improved; patients experience less side effects and microbial resistance. Consumer, staff and patient knowledge and education is needed to help prevent the development of current and future bacterial resistance. It is important to prescribe antibiotics according to the principles of antimicrobial stewardship, such as prescribing antibiotics only when needed (and not for mild infections such as colds, earache or sore throats).

This year Kerang District Health will be participating in Antibiotic Awareness Week 2015. The week is observed around the world and provides an opportunity for us all to learn more about the problem of antibiotic resistance, and to think about ways to optimise prescribing and use of antibiotics to address the problem of resistance.

We also will reinforce the principles of infection prevention and control, hand hygiene and surveillance acknowledging that they are considered key strategies to prevent the emergence of antimicrobial resistance and associated health care costs.

March

SUN MON TUE WED THU FRI SAT

		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
	Labour Day					
20	21	22	23	24	25	26
					Good Friday	
27	28	29	30	31		
Easter Sunday	Easter Monday					

2016

Pressure Ulcers

The risk of developing a pressure injury increases as a result of age-related changes such as: changes to skin integrity, malnutrition, immobility, incontinence, impaired cognitive status and fragility. The four stages are Stage 1: Redness Stage 2: Blister like Stage 3: Full thickness skin loss Stage 4: Full thickness tissue loss. Glenarm clinical indicators for pressure ulcers for stage 1 and 2 pressure areas are slightly above state averages and below state average for Stages 3 and 4.

Glenarm reported 12 pressure areas for this reporting year.
Acute ward reported 5 pressure areas for this reporting year.

Glenarm conducts daily skin inspections and 3 monthly pressure risk assessments on residents and at risk residents are identified. Pressure relieving devices are initiated to prevent ongoing pressure.

Falls and Fractures

Falls are defined as 'an event that results in a person coming to rest on the ground or floor or other lower level. Glenarm's clinical indicators on falls rate is 3.83 and are significantly lower than the states average of 6.89. This is due to Kerang District Health's falls minimization program. Glenarm's fall related fracture rate is 0.38 which is slightly higher than the state average of .015.

Glenarm reported 35 falls this reporting year.
Acute ward reported 17 falls this reporting year.

Injury minimization interventions Glenarm has in place for residents at risk of falling include initial assessment, ongoing supervision of residents when walking, hip protectors for high risk residents and maintaining their current physical condition, regular exercise is encouraged.

Acute ward patients are assessed on admission, identification, interventions and monitoring are put into place to prevent falls and harm from falls.

Use of Physical Restraint

Restraint is any aversive practice, device or action that interferes with a resident's ability to make a decision or which restricts their free movement.

Glenarm's use of restraint is higher than the state average and is being targeted for a quality program over the next 12 months.

Multiple Medication Use and Medication Errors

In some situations polypharmacy may in fact be necessary to ensure a quality health outcome for the individual.

The number of residents prescribed 9 or more medications in Glenarm is marginally higher than the states average. Glenarm is currently working alongside their doctors to reduce these statistics.

34 medication errors for Glenarm down from 40 in 2013-2014.
36 medication errors for Acute up from 31 in 2013-2014.

Unplanned weight loss

Unplanned weight loss occurs among older people for a number of reasons, including: dementia, behaviours linked to dementia, such as pacing, wandering, inability to recognise food, forgetting to eat, loss of communication skills and paranoia regarding food, polypharmacy, aged-related changes, sometimes called the 'anorexia of ageing', for example loss of taste, smell, sight and swallowing difficulties.

Unplanned weight loss is defined by a weight loss of more than 2kg in one month. Glenarm clinical indicators are below the states average. Glenarm works alongside a dietitian who assesses and implements food plans for residents who have been identified to be at risk of unplanned weight loss.

Quality and Safety

April

SUN

MON

TUE

WED

THU

FRI

SAT

					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
	Anzac Day					

2016

Community Services

WD Thomas Activity Centre at Kerang District Health allows the community to join in activities or planned outings to enhance their lives outside their home. Centre based care is on Monday, Wednesday and Friday between the hours of 10am- 3pm. Strength building, Tai Chi and physical maintenance groups are held on Tuesday and Thursday(you may need to have a referral from your GP before attending this group).

WD Thomas Activity Centre also runs a *Mobile Planned Activity Group* each Tuesday and Thursday. On Tuesdays Clients from Kerang are collected by the Activity Centre bus and travel to Quambatook to meet up with clients at the Quambatook Seniors Hall, morning teas, quizzes, board games and cards are some of the numerous activities planned for the day. Other outings are to local pubs, picnics at Wycheproof and the Annual Lake Charm Seniors concert. On Thursdays Kerang District Health provide a bus service to collect clients from our outlying areas such as; Murrabit, Koondrook, Normanville, Macorna, Lake Charm, Kangaroo Lake and surrounding areas. This service provides socially isolated clients to come to Kerang for appointments, visiting family/friends, shopping, lunch and groceries.

The first Monday of the month caters for our gentleman in our community and assists them to attend Men's Group in all local areas including Pyramid Hill, Barham, Boort and Cohuna, for lunch, activities and entertainment. This is a great get together for old friends and includes an enjoyable bus ride throughout the district.

For more information please phone the WD Activity Centre on: 0354509283.



BRYAN participates in the exercises at the WD Thomas Activity Centre weekly, but has recently been in hospital, so he has seen many departments at Kerang District Hospital. When asked how the care has been at Kerang District Hospital he stated "I have been well cared for by all staff in all departments at Kerang District Health, great hospital"

May

SUN

MON

TUE

WED

THU

FRI

SAT

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

2016

Consumer, Carer and Community Participation

The National Quality and Healthcare Standards enable a framework for health services to actively partner with consumers and create a health service that is responsive to patient, carer and consumer input and needs. Kerang District Health has a growing relationship with consumers, the Consumer Participation Group meets monthly to discuss relevant information pertaining to consumers. The group oversees brochure development, survey results and recommendations for redesign, enabling and encouraging the consumers for our service to be more involved and informed. We welcome new members to join our consumers group to help us provide consumer directed care. If you are interested in becoming a member please contact Kerang District Health for more information.

At Kerang District Health our consumers participate in internal and external surveys and from these we gain feedback to implement improvements into areas identified by our consumer's whether we are delivering to their expectation or where improvement is needed.

At Kerang District Health our consumers participate in internal and external surveys and from these we gain feedback to implement improvements into areas identified by our consumer's whether we are delivering to their expectation or where improvement is needed. Our patients, carers and family are asked to give feedback on their care, meals, communication and waiting times for discharge and these comments and suggestions are acted on and conveyed to staff.

Our external survey, the Victorian Health Experience Survey (VHES) is quarterly and benchmarked with all Victorian Public facilities. The results of our April, May, June 2015 survey on "overall satisfaction of care" was 100%, a great result. Some areas were identified for improvement in the January, February, March survey such as: discharge communication and waiting times, with an overall satisfaction rate of 55%. Education for staff around communication with our patients and carers and keeping them informed for reasons in delay or expected delay at discharge were targeted. Our most recent survey result has achieved a 95% satisfaction with the discharge process.



June

SUN

MON

TUE

WED

THU

FRI

SAT

			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
	Queen's Birthday					
19	20	21	22	23	24	25
26	27	28	29	30		

2016

PREVENTING AND CONTROLLING HEALTHCARE ASSOCIATED INFECTIONS.

Kerang District Health has systems to prevent and manage healthcare associated infections and the workforce use the healthcare associated infection prevention and control systems. KDH has had no hospital acquired infections for the period 2014-2015. Kerang District Health offer staff and our aged care residents Influenza vaccines every year. This year 63.4% of staff took up this offer, the Victorian Department of Health target for flu vaccinations in healthcare workers is 75%.

Hand hygiene is very important within the hospital and all patients, staff and visitors are encouraged to use hand hygiene to prevent the potential spread of infection.



Hand Hygiene visual audits conducted throughout the hospital in June 2015 resulted in 93.7% compliance result.

Hints for good hand hygiene:

- If hands are physically soiled (dirt and grime), then use soap and water
- Alcohol based hand rub is effective on most organisms
- Ensure thorough cleaning, covering all surfaces of the hands
(**Remember** to clean the webbing of fingers, backs and palms of hands)

Food Safety - Kerang District Health undergoes a Food Safety Audit annually and in February 2015 compliance was MET. Five observations were received and have been rectified.

Victorian Health Experience Survey resulted in 98.5% patient satisfaction in hospital food at Kerang District Health.

Improvements made from surveys completed:

- Glenarm food satisfaction survey resulted in 33% of residents indicating their food could be warmer. Staff are educated to ask our residents about their food temperature and assist in warming their meal to their satisfaction.
- Many elderly patients and residents were unfamiliar with some of the new menu item names e.g. pilaf. A menu description book has been collated to assist with menu choices.

Hospital Cleaning Audits:

Annual audits of non-external cleaning in November 2014 resulted in a score of 98/100 for high risk areas e.g. Theatre/DSU, High 97/100 for high areas e.g. patient wards and Moderate 97/100 for all other areas including Glenarm. Non-external cleaning audits in March 2015 resulted in Very High 97/100, High 99/100 and Moderate 100/100 for all areas including Glenarm. External Cleaning Audit July 2014 overall hospital score of 98. Glenarm score of 97. These results are reported to the department of Health.

Victorian Health Experience Survey resulted in 93.7% patient satisfaction in cleaning standards at Kerang District Health.

July

SUN

MON

TUE

WED

THU

FRI

SAT

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

2016

ONCOLOGY SERVICES

Kerang District Health's Oncology Unit provides care for patients with all stages of cancer and related illnesses.

Patients receive high quality care, in a compassionate and comfortable setting. Kerang District Health has a group of dedicated and caring professionals committed to providing the best possible care for our patients.



Mary's Story

Mary moved to Kerang with her family when she was 10 years old and is now in her 75th year. She married and moved out to the local farming district of Fairley, raised 6 children then moved back into the Kerang Township in 1986. Earlier this year Mary visited Dr. Harry Van Rensburg concerned about swelling in her neck and he immediately sent her off for tests. The tests seemed never ending to Mary and unfortunately it was finally confirmed she had Hodgkin's Lymphoma. Mary, along with her family met with oncologist Dr. Mark Warren, from Bendigo Health who visits regularly at Kerang District Health, and Kerang Oncology nurse Jeecinta Lightbody to learn about the regime of chemotherapy. Mary and her family spoke to Jeecinta for 2 hours about the treatment, where she explained what to expect and how best to manage Mary's day to day life throughout the coming months. The treatments started in July with Mary needing a total of 6 treatments every 3 weeks. From the outset Mary has felt absolutely blessed to be able to have her chemotherapy treatment at Kerang District Health. She has been able to stay in her home throughout

the treatments with the wonderful support of her family, friends and the support teams at Kerang District Health, Palliative Care Swan Hill and Bendigo Health. Mary's treatment has seen her struggle with life threatening infections, having to be hospitalised twice to receive multiple transfusions, although these have ultimately saved her life she is absolutely certain that the care she has received from the staff at Kerang District Health has been paramount in getting her through such a horrendous experience. Mary often comments 'I had no idea how hard chemotherapy would be, but being able to ring and talk to Jeecinta when I needed to, has been marvellous.' The great news is that Mary recently had a PET scan that revealed she is responding extremely well to the treatment, which is the best news that Mary could have hoped for, along with her family and friends.





Lloyd's Story

Lloyd McAlister is a 96 year old man who was living at home with his wife. Lloyd had been having a lot of trouble with wounds to his legs and was sleeping in his chair at home, as he had too much pain to get into bed. Lloyd was admitted to KDH for a short visit and Glenarm care was offered to Lloyd. Lloyd and his wife felt it was time as his wife could no longer care for Lloyd. Lloyd was admitted into Glenarm in December 2014, when asked how he was coping Lloyd stated "This is the best thing I have done. I'm damn pleased I came to Glenarm". So what has changed for you Lloyd? My wounds on my legs have healed and I sleep in my bed all night, I don't have pain anymore and I just love all my roommates, I'm very happy here. How are the staff at Glenarm Lloyd? You couldn't get better, the nurses.....well, what can I say... (with a smile on his face). The kitchen girls are great and the meals are wonderful. I don't join in the activities, but I can hear the music, I read a lot and watch TV. I've worked hard all my life, but I think it's time to slow down. "I didn't think I'd like Glenarm, I'm amazed and very happy, and so is my family".

HAVE THE CONVERSATION

If you become seriously ill, or had a serious accident and were not going to return to normal, what sort of medical treatment would you want? Who would you want to make decisions for you about your medical treatment?

Advance Care Planning is about asking questions, planning for your future health and personal care, a person's values, beliefs and preferences are made known so they can guide clinical decision making at a time when that person cannot make or communicate their decisions.

Having the conversation about what treatment and care loved ones want during a serious illness or at the end of their lives can be difficult and emotional for families.

When faced with such a decision, even family members who know us well would struggle to know our wishes, and having to make a decision about end of life care can lead to prolonged guilt whichever way the decision goes.

WHO CAN HELP ME WITH ADVANCE CARE PLANNING?

Talk to your family members and close friends about your desire to plan ahead, or talk to your Doctor about Advance Care Planning. Contact Kerang District Health and they can arrange for an Advance Care Plan facilitator to assist you.

If you would like further information to read about advanced care planning visit: www.respectingpatientchoices.org.au
www.publicadvocate.vic.gov.au or call 1300 309 337



Glenarm residents enjoying their day out at "The Spanner Man" Boort

Back Row: Chris Hosking, Betty Astbury, Jackie Jennings, Jenny Holmberg, Eric Jones, Geoff Turner, Noel Brady, Bessie Johnson, Val Douglas
Front Row: Joan Thompson, Joyce Hall, Vince Kelly, Joyce Moore, Jean McMartin, Pam Oliver, John Piccoli ("The Spanner Man").



Glenarm Family Story.

My mother who lived in Melbourne suffered a Stroke in 2013, Mum needed to go into a nursing home. In September 2013 she entered a nursing home in Melbourne as she needed full nursing care. The facility in Melbourne rarely got mum out of bed and mum was not happy with her care. We also found it very difficult to spend quality time with her due to us living in Kerang. In June 2015 we decided to transfer my Mum to Glenarm Kerang. Our family found the transfer process "perfect" and very easy, Glenarm staff were warm and welcoming on Mum's arrival. Mum has compared Glenarm to a 5 star motel, and thinks that the extra touches such as starched serviettes and freshly cooked toast is "beautiful". All the staff are caring and considerate to my mum.

"My mother deserves descent care and she now is getting it"

October

SUN

MON

TUE

WED

THU

FRI

SAT

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

2016

Comments, Compliments and Complaints

Kerang District Health has processes to manage all comments, compliments and complaints. Feedback is welcome from patients, carers and family. All correspondence received is reviewed and acted on within a 30 day period where possible. Compliments and complaints are managed by the executive team and reported to the Management Quality and Risk Committee monthly, Board of Management and relayed to staff at staff meetings. This process allows all staff to be informed of complaints and improve practices. We have a strict confidentiality policy that applies to correspondence received in the form of complaint; consumers can be assured identity is confidential. Complaints generate continuous improvement and are addressed at the highest level of governance.

Number of complaints received in 2014 -2015 - 57

Number of complaints resolved within 30 days - 57

Number of complaints outstanding – 0

Compliments received this reporting period - 65.

To all the nurses and hospital staff - 'I would like to thank you for the care you gave to me during my recent illness. Your caring treatment was excellent. Would you please convey to all who attended me. Many thanks.'

"I can't thank the KDH staff enough. I am full of praise for all your professionalism, kindness and caring. It feels like you all bent over backwards to ensure our whole family was looked after".

"KDH staff have been marvelous. They have been accommodating and understanding. All the staff are wonderful".

Distribution of our Quality of Care Report

Kerang District Health *Quality of Care Report* is distributed at our Annual General Meeting and will be available on the Kerang District Health website: www.kerangdistricthealth.com.au. It will also be widely distributed in Kerang through a letter box drop and to the outlying districts through the mail delivery system. Copies are also available at the hospital and medical clinics. We welcome your feedback on the *Quality of Care Report* or your suggestions for new areas to be included in next year's report.

Last year **14 consumers provided feedback** on the Quality of Care report; all 14 consumers felt the report was clear, concise and easy to understand. Consumers felt the summary boxes were an easy and quick format to decipher results from audits and surveys conducted; we have again included the summary boxes this year after your comments were received. Patient stories were also popular; several have been included in this year's report for your enjoyment.

We look forward to your feedback on this report.

Please return the reply paid reader survey enclosed in this report.



Maternity Services

27 births at Kerang District Health for 2014-2015

Currently Kerang District Health has no GP obstetrician to accommodate births at our service, however, we are still part of the Maternity Shared Care Service. Women are able to share their care with Bendigo Health and Swan Hill District Health, this means you can engage an obstetrician or GP obstetrician from these services and visit with our maternity services for in-between care and after birth care. If you require more information about this service please don't hesitate to contact Kerang District Health Maternity Service.

Tania gave birth to Zoe in Swan hill after sharing care with maternity services at Kerang District Health.

Zoe was born at 9.19 am in the morning, Tania and Zoe returned to Kerang District Health at 4.30 in the afternoon.

Tania said she is more than happy with the care from Swan Hill but it was great to be back home. "The facilities and care at Kerang District Health is fantastic and the new maternity suite is just stunning.



