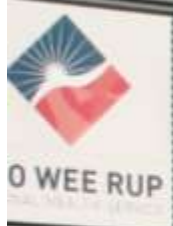


Victorian Quality Account 2018 - 2019



Kooweerup
REGIONAL HEALTH SERVICE



OUR VISION

A healthier community.

VALUE	THIS MEANS	BEHAVIOURS WHICH DEMONSTRATE THE VALUES
Accountability	We believe that all staff are accountable for their actions and strive to deliver the highest standard of care.	<ul style="list-style-type: none"> • We use a consultative approach to decision-making and involving staff in change processes. • We are committed to providing the highest levels of resident/patient care. • We coach and support staff to be responsible decision makers. • We develop leadership throughout the organisation. • We accept that Quality Improvement is inherent within our roles.
Integrity	We see our staff as both professional and dedicated individuals and members of our health team.	<ul style="list-style-type: none"> • We encourage open and honest communication. • We recognise and acknowledge excellence in staff performance. • We provide opportunities to build on the skills and abilities of our staff. • We provide a safe work environment and report unsafe practice or conditions. • We are honest, open and transparent in all our dealings. • We report improper misconduct. • We avoid real or perceived conflicts of interest. • We promote public trust in all our actions. • We make decisions and provide advice on merit and without bias, favouritism or self-interest.
Respect and Individual Care	We aim to meet our customer's needs and expectations.	<ul style="list-style-type: none"> • We strive to meet the individual preferences of our consumers. • We involve consumers in all aspects of care planning.

Respect and Individual Care – Continued		<ul style="list-style-type: none"> • We measure consumer satisfaction to improve our service. • We respond to the diverse needs of our consumers. • We are respectful and courteous in all interactions. • We ensure workplace interactions with our colleagues are professional and courteous. • We treat each other fairly and objectively. • We ensure our workplace is free from discrimination, harassment and bullying. • We value varying views as an opportunity to improve our workplace. • We will be open to receive feedback from others. • Seek to resolve conflict rapidly and constructively. • Exercise openness and fairness when dealing with others. • Work towards a safe, healthy and creative environment.
Professionalism	<p>Achieving the highest standards to deliver the best outcomes for consumers.</p> <p>That our interactions foster a positive and harmonious work environment.</p>	<ul style="list-style-type: none"> • We focus on maximising client potential and health outcomes. • We have strategies to continually improve our services and performances. • We implement strategies to assess the quality and safety of our services. • We measure ourselves against the relevant National and State Standards. • We ensure that consumers are not exposed to workplace politics either directly or indirectly. • We access information only for relevant work purposes in accordance with Privacy Legislation. • We act fairly by objectively considering all relevant facts within a fair criteria. • We commit to using our knowledge and skills to perform our duties to the best of our ability. • We encourage and facilitate ongoing professional development of staff.
The development of the partnership between ourselves, the community and Government	We believe the participation of the community and stakeholders in decision making processes of the organisation improves the quality of service.	<ul style="list-style-type: none"> • We enable our community to actively participate in planning and evaluating our services. • We build partnerships with community and community agencies to maximise consumer outcomes. • We encourage innovation. • We strive to embed environmental sustainability into our work practices.

Services Provided and Areas Covered

Kooweerup Regional Health Service delivers a broad range of services across the Cardinia, Bass and Casey Shires.

Kooweerup Regional Health Service can provide Acute Inpatient Care, Residential Aged Care, primary health services including Community Nursing, Home Care Packages, Allied Health and a range of support programs.

A multi-disciplinary and co-ordinated care model is used across the organisation to ensure that consistent and quality services are delivered to those accessing and using Kooweerup Regional Health Service programs and facilities.

INPATIENT SERVICES	PRIMARY HEALTHCARE	OUTPATIENT CARE
Infection Prevention and Control	Allied Health	Diabetic Educator
Maintenance Care	Diabetes Education	Dietitian
Palliative Care	Disability (Respite), NDIS	Occupational Therapy
Rehabilitation	District Nursing Service	Physiotherapy
Specialist Services	Community Allied Health Team	Podiatry
Transitional Care Program	Health Promotion Programs	Social Work
Respite	Home Care Packages	Palliative Care
	Palliative Care	Geriatrician
	Social Work	Cardiology
	Volunteer Co-Ordination	Diabetes Outpatient Clinic
	Wound Care	Early Parenting Unit
	Foot Care	Lactation Clinic
	Youth Hub	
	Men's Shed	
RESIDENTIAL CARE	DIAGNOSTIC SERVICES	
Killara (including Dementia specific Wing)	Pathology	
Westernport Unit		



Operations Report

Enhancing the Services Available to the Community

Kooweerup Regional Health Service (KRHS) continues to respond to the communities needs and provide a broad suite of services to meet consumer demand.

Our home-based services continue to grow in response to consumers receiving homecare packages.

The program is well regarded and provides a comprehensive suite of services to consumers wishing to stay in a supported home environment.

KRHS anticipates this program to continue to grow as packages become available and is positioning its staff resources to respond. The availability of Occupational Therapy and Physiotherapy Services in the home was well received by consumers and builds on a comprehensive package of care made available to consumers.

Our Youth Hub remains an important component of supporting young people with developing life skills. Capably led by an innovative team the program continues to maintain attendance levels that indicate strong support for the program.

With our partners Black Fish Medical Clinic and Taskforce, we anticipate ongoing positive outcomes and contributions to youth mental and physical health.

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. KRHS continues to maintain all Accreditation requirements and through 2019-20 will be building on and strengthening ongoing Accreditation requirements.

Our Clinical Placement Program for Undergraduates remains strong and the organisation will continue to make Clinical Placement opportunities available to entry practitioners.

Visitors to the organisation and community programs will also notice the increase to Graduate Nurses from three to five. Graduate Nurses are beginner practitioners and KRHS seeks to enculturate professional practice into these staff and prepare them for a lifelong career in nursing.

We have been fortunate in receiving assistance to implement a trainer position to assist our Domestic, Catering and Home Care Workers to develop skills sets that will enable them to participate in other health care opportunities as they arise. This is an exciting opportunity for the organisation and allows for improved succession planning.

Additional to this our Allied Health Team has experienced change. The team has expanded its Allied Health Assistant workforce to support the Allied Health Practitioners in the delivery of Care Plans. We continue to use a Locum service to assist in the delivery of a Pain Management Program to our Aged Care consumers.

We are pleased to inform our community that full staffing levels have been achieved and that continuity of service has been maintained.

Enhancing the Services Available to the Community - continued

We thank all past and present members of staff, including our Visiting Medical Practitioners for their valuable contribution to the successful outcomes achieved during the year, and we welcome newcomers to our organisation.

Delivering Quality, Accessible and Coordinated Care

The focus this year has again been on providing quality care across the whole organisation with particular focus on the establishment of our Home Care Packages.

We value client feedback through Consumer Directed Care to improve our services.

With Consumer Directed Care, service delivery is designed to give more choice and flexibility to consumers. Consumers who receive a Home Care Package will have more control over the types of care and services they access. KRHS is fortunate to have a broad range of services that can meet the consumers need through a single point of contact.

This year KRHS has further focused on wellness and reablement approaches which have been shown to improve function, independence and quality of life for older people. Embedding wellness and reablement will remain a key focus of activity into the future and will underpin our models of care.

2019 will be an important year for Accreditation of the service. Both our Acute sector and Aged Care sector will undergo the process in the later part of 2019.

Importantly KRHS will be assessed against a single set of Aged Care Quality Standards this year.

The Aged Care Quality Standards focus on quality outcomes for our consumers rather than organisational processes. This will make it easier for consumers, their families, carers and representatives to understand what they can expect from a service. It will also encourage innovation, excellence and continuous improvement.

We acknowledge our Accreditation Team for navigating the organisation through these interesting times and we also recognise the efforts of staff in rising to the challenges of these changes.

Occupational Health and Safety

Staff health and safety remains of paramount importance at KRHS.

KRHS continues to perform well in workplace inspections and strives to improve the safety of the environment for all stakeholders.

This year overhead lifting was installed throughout Westernport Unit and all rooms are now fitted with appropriate equipment. Accessibility was improved for consumers through the installation of a ramp at our Eco House, modification of kitchen and improvements to an ensuite.

Over the year improvements have been made to our meal's delivery trolleys, equipment storage area, door openings, Steam Extraction Unit in Killara and electrical safety. Many staff are now using standing desks and further roll out is expected.

Enhancing the Services Available to the Community - continued

This year, with the assistance of our contracted Security Company, we conducted a Site Audit utilising the skills of a range of staff and security expertise. The audit is now a foundation document for addressing areas of improvement with several actions already completed.

The culture of improvement is important in maintaining a safe environment and through our active OH&S Committee key opportunities are identified and addressed.

Usage of security applications on desk top computers and mobile devices is a significant component of a whole of system approach to staff safety at KRHS.

The OH&S Safety Committee in conjunction with the Quality Committee regularly review Hazard and Incident Reports and ensure controls that either eliminate or decrease risk are in place.

The electronic 'Riskman' Reporting Program continues to monitor and enable reporting of incidents with timely and appropriate responses to issues. Victorian Health Information Management Systems (VHIMS) Critical Reporting allows direct reporting of critical incidents and provides an increased ability to capture Quality Improvement opportunities and identify risks.

Worksafe visits to the organisation were positive and tested our culture of safety and procedures. We are pleased to announce that there were nil recommendations from visits and that suggestions towards systems improvements were gratefully received and adopted.

Domestic/Cleaning Services

The cleanliness of our care environment is a matter of patient safety and organisational pride. KRHS undertakes monthly Cleaning Audits utilising our Internal Auditor and also conducts an audit annually utilising the services of an independent auditor. Our Internal Audit Score average for 2018/19 was 91.8. The external score was 96% for High Risk areas and 97.5% for Moderate Risk Area. The State Benchmark for Victoria is 85%.

Improving the Organisation's Infrastructure and Equipment

This year has seen considerable resource allocation towards infrastructure improvement.

Airconditioning continues to be a theme with units being replaced in Administration, Early Parenting, Killara and Westernport Unit. A further unit was replaced to support the onsite Medical Clinic and parts of Administration services.

Through the kind efforts of the Ladies Auxiliary, we were able to purchase Shade Sails which have been reinstalled in Bass Unit Courtyard and Westernport Unit Courtyard. We trust that given the increased number of days with above average temperature our clients will be able to enjoy these outdoor areas. Also new Infusion Pumps were purchased for the Acute Ward, Bluetooth Alert Mats for Killara and INR Machines for District Nursing Service.

Considerable garden works have occurred over the year and the efforts of our dedicated Gardener must be acknowledged. New plantings and garden beds have contributed greatly to the ambience of our garden areas.

The redevelopment of our Lifestyle Shed into an outdoor entertaining area will further provide choice and opportunity for families and consumers to spend time and celebrations together.

Enhancing the Services Available to the Community - continued

Improvements to Killara Kitchen areas including Exhaust Fan and Roller Shutter installation have led to improvement of amenities for staff and consumers.

The installation of Holland Blinds to Killara windows offering increased privacy were an outcome of our Security Audit and have been well received by staff.

Consumers and staff are now experiencing the significant benefits of upgraded Nurse Call Software. The system has improved reliability and functionality and allows for the production of reports thereby targeting areas for improvement in the delivery of care.

It must be acknowledged that it is through the efforts of many dedicated people that KRHS is able to provide the facilities and equipment to improve the quality of life for our consumers.

We are again most grateful for the ongoing support provided by our Ladies' Auxiliary and Volunteer staff.

Information Technology

Information Technology remains a high priority area and requires frequent upgrades to hardware and software. Increased mobile devices are now becoming a feature of our Home Care Staff and Allied Health Practitioners.

A strong IT Network includes facilitating communication between health care providers, improving medication safety, tracking, and reporting; and promoting quality of care through optimised access to and adherence to guidelines.

Our transition to PROMPT Policy Management System was successful and provides a strong base for Policy and Guideline access and development.

All KRHS electronic information is now backed up off site and complies with Australian Privacy Principles.

Our "Guest" Wi-Fi continues to provide connectivity to consumers during an inpatient stay.

Cybersecurity remains at the front of all our dealings when using technology at KRHS.

As part of the Gippsland Health Alliance our systems are constantly monitored and upgraded to ensure secure transmission and access to information and data.

KRHS continues to be closely involved with the Gippsland Health Alliance in ensuring the service is supported in meeting its ongoing infrastructure needs.

Reviews of our systems by outside Consultants indicate strong business practices in place.

Utilisation of application or "App" technology has also improved security for home visiting services in terms of duress capability.

Enhancing the Services Available to the Community - continued

Ensuring the Best Use of Available Resources

Education of staff remains a high priority item for KRHS. Through education we meet the career aspirations of our staff and ensure that best practice prevails.

A coordinated in-house online Mandatory Training Program for staff ensures currency of core competencies including Basic Life Support, Infection Control, Manual Handling/No Lift and Fire Safety.

This year we were fortunate to receive funding towards the position of a Workplace Trainer to ensure our staff in Domestic, Catering, Hostel and Home Care are kept abreast of best practice and are trained in the varying requirements that are now expected within health care facilities. This position will ensure that our staff are work ready for the next stage of their career.

Our Education Team ensures that students are well supported in our workplace and that KRHS establishes a solid foundation for future career development.

Our Education Officer has ensured that close relationships are maintained with training institutions to ensure KRHS contributes to the ongoing industry needs of staff Clinical Placement.

We are now in our second year of our Internal Audit Program and we are pleased to inform the community that our Internal Audit results have built on previous year's results and demonstrate a high level of compliance.

Our Audit Cycle is a 4-year program and focuses on the key requirements as determined by Standing Directions of the Minister for Finance under the Financial Management Act 1994 Directions. The Periodic Reviews assist KRHS in reviewing compliance issues and ensuring that systems are robust and that as a public health facility we are meeting or exceeding the community's high expectations.

We wish to acknowledge the work of the Audit & Risk Committee for ensuring sound governance for our Financial and Auditing responsibilities. The area of Internal Audit is a complex area and requires strong financial and risk management knowledge. KRHS is fortunate to have secured the membership of community members with interests in this area.

Governance for KRHS has received considerable focus this year.

In-house our senior staff have received education on key areas of Governance including Conflict Resolution and Professional Boundaries. A session on key decision-making types provided the opportunity to reflect on how decisions are made within complex organisations and was used to align these activities with organisational culture.

Our Board has focused on reviewing strengths within the team through an external evaluation process and has used this information to guide Board education and discussion. With a strategic overview the importance of a varied range of skills build on informed discussions and decision making when considering responses by KRHS to the community's needs.

Recognising our Team

KRHS is fortunate to have a dedicated and committed employee and volunteer group. The people that serve the organisation provide an exceptional level of care and support to consumers, clients, carers, community members and to their co-workers.

Enhancing the Services Available to the Community - continued

We sincerely thank all members of staff, including those who have left KRHS in the past year, from all areas, for their contribution as individuals to the organisation.

KRHS would like to take this opportunity to recognise and thank those who have contributed kindly through their donations and labour in our fundraising efforts. Community generosity greatly assists the sustainability of the Health Service, and the strong commitment to support KRHS demonstrated by our community is greatly appreciated. Fundraising provides direct support to the equipment requirements of staff in the performance of their duties and to the maintenance of the beautiful facility that KRHS can be truly proud of.

We take this opportunity to also recognise the many volunteers that assist supporting our facility. This year we have actively worked to include volunteers in a broader range of opportunities and in so doing acknowledge the skills and companionship that they bring to our consumers and patient groups. Under the leadership of our newly appointed Volunteer Coordinator Jenny Bayliss we continue to see this group of important contributors grow.

Again, we wish to extend our gratitude to the members of the KRHS Board of Management and Audit Committee. All members give their valuable time as community representatives who have an interest in improving the range and quality of health services provided to the community.

Thank you to all current, outgoing and incoming Board Members who strive to ensure the ongoing future and success of KRHS and the commitment required of the members is very much appreciated.



Consumer, Carer and Community Participation

Consumer, Carer and Community Participation – Patient Experience

Consumers, carers and community members are all part of our diverse Victorian Community. During 2018-2019 KRHS has continued to involve consumers, carers and community members in improving the services that are available.

During 2018-2019 KRHS has been able to strengthen and improve patient experience through the implementation of a Person Advocate Liaison Service (PALS) Volunteer. This role was developed to directly interact with consumers, visitors, and community members to help them understand information and the complex health system processes to reduce confusion and dissatisfaction. This project originally had one volunteer, one day per week and has now increased to two volunteers for two days per week. The verbal feedback from consumers has been positive as staff are able to act upon their concerns immediately, which has improved their hospital stay.

Case Study:

Steve has been a long-time resident of KRHS and has settled well into the facility.

To maintain his independence and remain connected to his family and friends Steve was reliant on the charging of several electronic devices, including his electric wheelchair. Over time Steve noticed that his devices were occasionally not adequately charged due to interference with the wall charge points.

Steve expressed his frustration to the Person Advocacy Liaison Service (PALS) Officer during a routine visit and lamented that diligent service staff were inadvertently dislodging the charge points for his devices.

The PALS Officer explained the situation to the Nurse Unit Manager and signage was made up indicating the importance of the charge points and the need to always be turned on. The signs were discretely placed above the charge points and education provided to service staff.

The issue resolved immediately, and Steve's frustration levels were resolved, and connectivity remained uninterrupted.

An appropriate Discharge Plan for a consumer from a public health service can have a positive or negative effect. Discharge Planning should commence on admission and be considered up until the time the consumer leaves the organisation.

At KRHS, a Discharge Plan is discussed with the admitting Doctor and the consumer, carer and family. This information is used to ensure that the Discharge Pathway is known to all services, supports, carers, consumers and the Allied Health Team members, so that we can work as a team to try and meet these goals.

Case Study - continued:

During an admission at KRHS, all consumers are discussed on a weekly basis at the Multidisciplinary Team Meeting, where consumer goals are discussed. At these meetings it also provides an opportunity for all members of the Multidisciplinary Team, to identify any additional needs or concerns that may be identified that would prolong or delay the discharge of a consumer.

On preparing for discharge the consumer will identify any care needs that maybe needed at home such as Home Help, Personal Care assistance, shopping assistance, wound care etc. Through this process a referral is then made to the appropriate service such as Post-Acute Care or My Aged Care for services on discharge to be implemented.

Once a consumer has been discharged home, a volunteer makes a discharge phone call to the consumer, carer or family member to seek feedback regarding the service that has been provided. The questions that are asked seeks out opportunities for improvement regarding Nursing care, cleanliness, meals and overall satisfaction of the organisation. Any concerns that are identified through the phone calls are identified to the most appropriate Manager and then managed accordingly. The outcomes from this are then tabled at the Quality Committee Meetings.

Capacity Building

KRHS actively engages the community, consumers and carers to participate fully and effectively in their healthcare being provided with Health Promotion activities, including workshops and community seminars. During 2018-2019 there have been numerous community workshops conducted at various locations, including the local Senior Citizens Club, local supermarket and onsite. The nature of these workshops is various and has included topics that are relevant to the community. Activities that have been provided to the community and consumers of KRHS include walking groups for the community, End of Life Care, Voluntary Assisted Dying, Elder Abuse, Men's Health promotions and checks that are conducted through the Men's Shed. An increase in volunteers has assisted in providing activities for consumers and community members such as gardening, book clubs, sensory gardens and general socialising. This is well accepted by consumers and the local community as it provides indirect health outcomes that are not as obvious as attending an exercise class.

In 2018-2019, a new project was initiated that is to support vulnerable people within the community and provides assistance to vulnerable community members during extreme weather conditions, this project is named Ready2Go.

The Life Program is offered at KRHS and is managed by the Dietitian and Diabetes Educator. These short courses are aimed at community and consumers that are pre-diabetic and are wanting to make life changes before the on-set of diabetes.

Capacity Building – continued

As an extension of the Men's Shed the Community Garden has been maintained and re-sown seasonally with fresh fruits and vegetables, this freshly grown produce is picked and supplied to the local community.

Health Promotion have been continuing with onsite programs in which consumers, carers and the local community are encouraged to participate in. Programs that have been promoted over the 2018-2019 year include: Tai Chi, Art classes, Computer classes, Pilates, exercise groups and Dementia Cafes, just to mention a few of the many activities that are conducted onsite.

Whilst most of the activities that are offered are targeted for the ageing community, it is also noted to be of high importance that the younger community members are also given the opportunity to engage and participate in activities that will build capacity, this is done through the Youth Hub which has mentoring, social interactions and assistance.

Interpreters

During 2018-2019 there have been no requests for interpreters made.

Through the joint work of the Community Advisory Committee, Consumers and the Dietitian, there has been a joint effort made to translate current menus into Italian to promote languages other than English into the organisation. This work has been identified as a positive engagement with consumers and consumers of Italian background enjoy seeing the menu in their language.

Disability Action Plan

The Disability Action Plan is a dynamic framework for KRHS that will provide future planning, resource allocation across the organisation and decision making for consumers and staff with disabilities.

Through the development of the Disability Action Plan this will ensure that consumers with disabilities have the same level of access to Health Services, attention and information as any other consumer, ensure that all information is accessible and available in alternative formats for consumers with disabilities and support the employment equally for people with disabilities, as any other candidate.

The Disability Action Plan is submitted with the Statement of Priorities to support KRHS to provide an inclusive environment for consumers with a disability. The Disability Action Plan will address the four following outcome areas as per section 38 of the Disability Act 2006:

- Reducing barriers to people with a disability in accessing goods, services and facilities,
- Reducing barriers to people with a disability in obtaining and maintaining employment,
- Promoting inclusion and participation of people with a disability in the community,
- Achieving tangible changes in attitudes and practices which discriminate against people with a disability.

Disability Action Plan - continued

In finalising the Disability Action Plan for KRHS will engage and consult people with disabilities, this will include staff, health consumers and members of the community.

Key strategies that will be used to engage consumers, staff and members of the community will be through staff and community consultations. This would be achieved from holding Staff Focus Groups that would help in providing input into the planning and execution of the Disability Action Plan. The Diversity and Consumer Partnership Committee would also assist in providing support and direction in the implementation of the Disability Action Plan.

KRHS would also utilise the Community Advisory Committee to provide input and feedback into the Disability Action Plan. Community engagement will also involve newsletter articles that advertise that we are starting to implement the plan and expressions of interest to participate in the focus groups. KRHS would also utilise the current volunteers for feedback and input into the Disability Action Plan.

Through the engagement of consumers, staff and community members KRHS aims to implement an environment that meets the identified outcomes in Section 38 of the Disability Act.



Quality and Safety

Quality and Safety – Consumer and Staff Experience

Feedback:

KRHS values feedback in the way of compliments and concerns. Feedback is gathered through various methods such as Compliment and Concern Forms, telephone calls, emails and face to face just to name a few.

All KRHS consumers and staff have the right to lodge a complaint either in person or through a representative. All complaints will be opportunities to review and improve services at KRHS.

Complaints are treated confidentially, and consumers are not discriminated against if they complain.

It is the Director of Nursing's responsibilities to take formal action in relation to complaints on behalf of the Facility and in case of media reports.

All complaints are recorded in a register which is maintained and reported to the Quality Committee, Community Advisory Committee and Board.

KRHS felt that while there were strong avenues for the collection, receiving and management of compliments and concerns, that there were other initiatives that were being used at other organisations that could improve on the current systems and add another method to collecting compliments and concerns, but also improving the consumer experience whilst at KRHS, with this said KRHS implemented "You Said, We Did" and the Person Advocate Liaison Service (PALS) Officer.

In 2018, as another source to gather feedback, KRHS rolled out the "You said, We Did" Project. This allows for consumers and staff to be able communicate their concerns or voice suggestions to management for consideration and implementation of ways to improve the current services that are provided. If the suggestion or concern is actioned this information is then displayed with the improvement in key staffing areas.

Another initiative that was implemented in 2018/2019 to continue to improve and develop the connection between staff and consumers and whilst also improving the consumers experience at KRHS is the Person Advocate Liaison Service (PALS).

The development of the PALS role creates conditions in which the consumer feels confident in asking questions which when presented to the Clinicians allow for a rapid and responsive resolution of the consumers concerns.

The PALS role is a Volunteer Advocate who can engage with individuals in a neutral environment and assist them to have a voice.

Feedback – continued:

KRHS believes that every suggestion or complaint is an opportunity for improvement and aims to foster an environment where consumers are encouraged to provide input to help maintain/improve services to the community.

KRHS also publishes an overview of all feedback annually in the Annual Report, Koowee Connect Newsletter, internally and on our website in the Quality Account.

Summary of Compliments.

Compliments are a way a consumer can express their positive thoughts towards the service. Through providing a compliment it allows staff to recognise that the consumer, family and carers had a positive experience whilst at KRHS.

In 2018/2019 there were 49 recorded compliments on the register, this was a slight decrease since 2017/2018 in which 56 compliments were received.

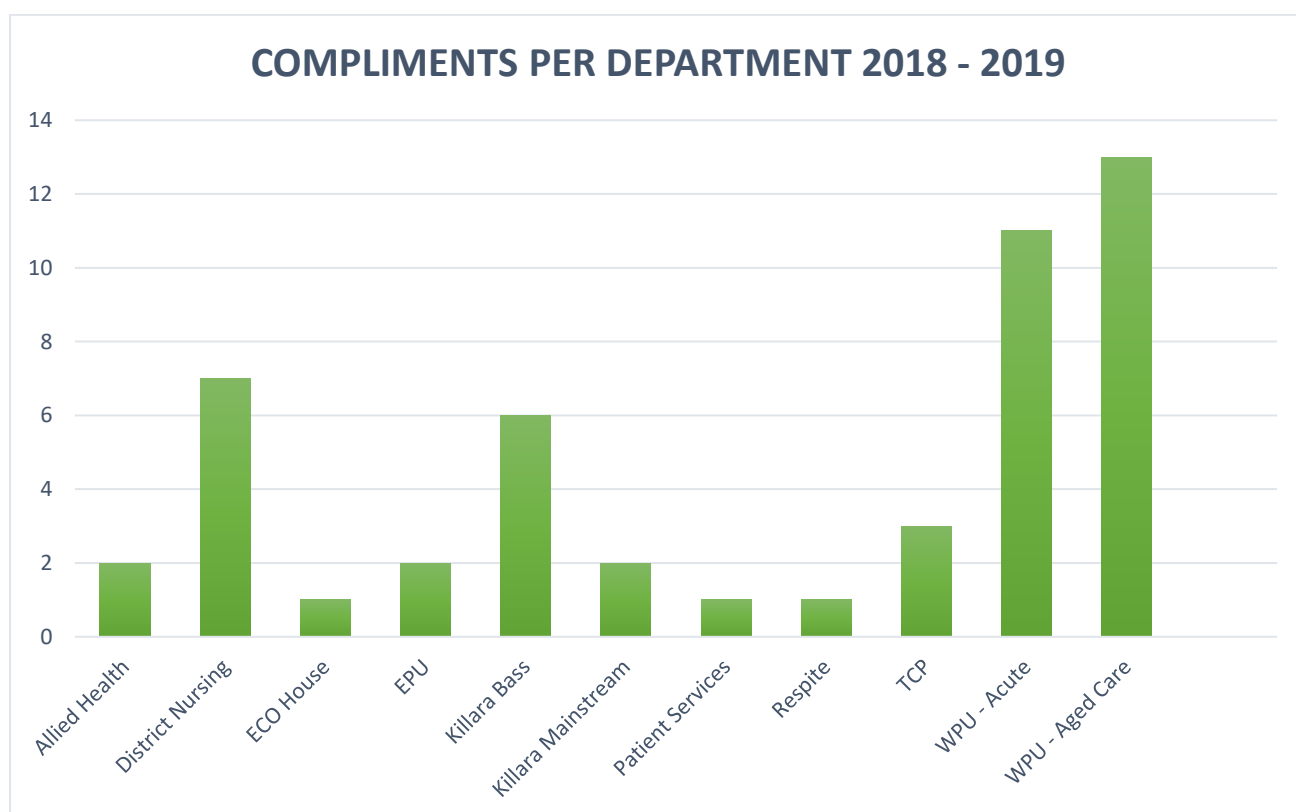


Table 1: Number of compliments in 2018/2019 per Department as per the Register

A summary of the concerns that were lodged into the Feedback System, included staff to staff compliments, consumer to staff compliments and students to staff feedback, refer to Table 2, with the most compliments being received from consumers for acknowledgment of care given.

Summary of Compliments - continued

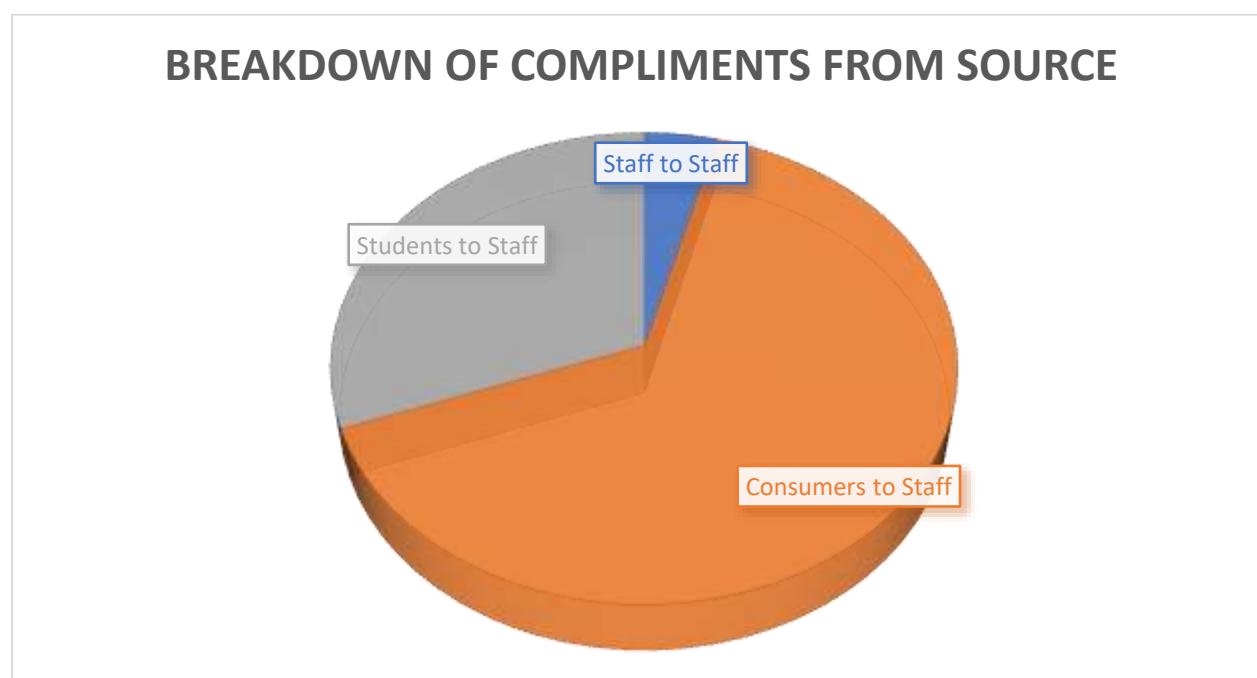


Table 2: Breakdown of compliments from the source received from

Whilst it appears that there was minimal staff acknowledgement for compliments, not all staff to staff compliments are documented and are mainly verbal compliments at the time of care provided or when positive and good behaviours are observed.

Summary of Concerns

Concerns or negative feedback are a valuable source to guide improvement at a healthcare service. At KRHS all concerns that are voiced are lodged onto the Incident Reporting Register in which these are reviewed and managed. In 2017/2018 there 44 concerns lodged and a slight increase to 45 concerns that were registered in 2018/2019.

All concerns or feedback that were provided to the healthcare service were managed by the local Unit Manager of the affected Department– where appropriate and then reviewed and further action as required by the Director of Nursing.

With the use of the Feedback Module within the Incident Reporting System – feedback/concerns can be categorised into the following complaint types: Clinical, Management and Relationship. These can then be further categorised into a complaint category containing fields that are quality, safety, organisational issues, timing and access of care, behaviours, communication and patients’ rights.

Summary of Concerns - continued

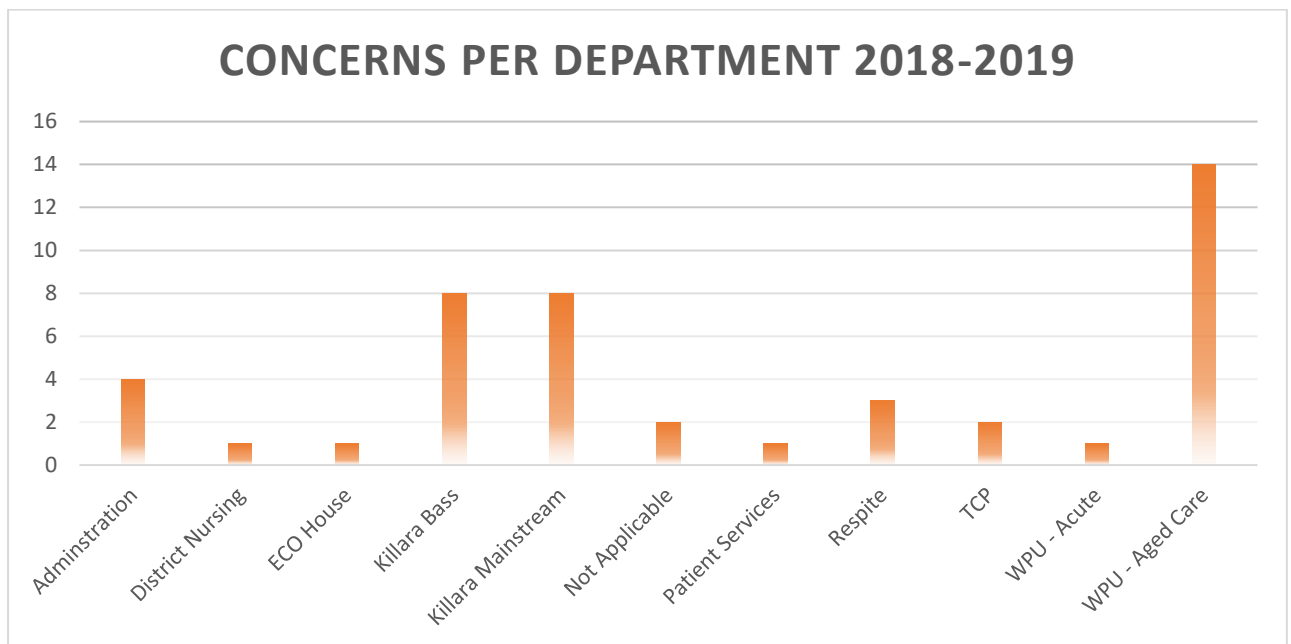


Table 3: Concerns as per Department 2018/2019

The following table shows the breakdown of concerns/feedback based on the complaint type, either Clinical, Management or Relationship (Table 4).

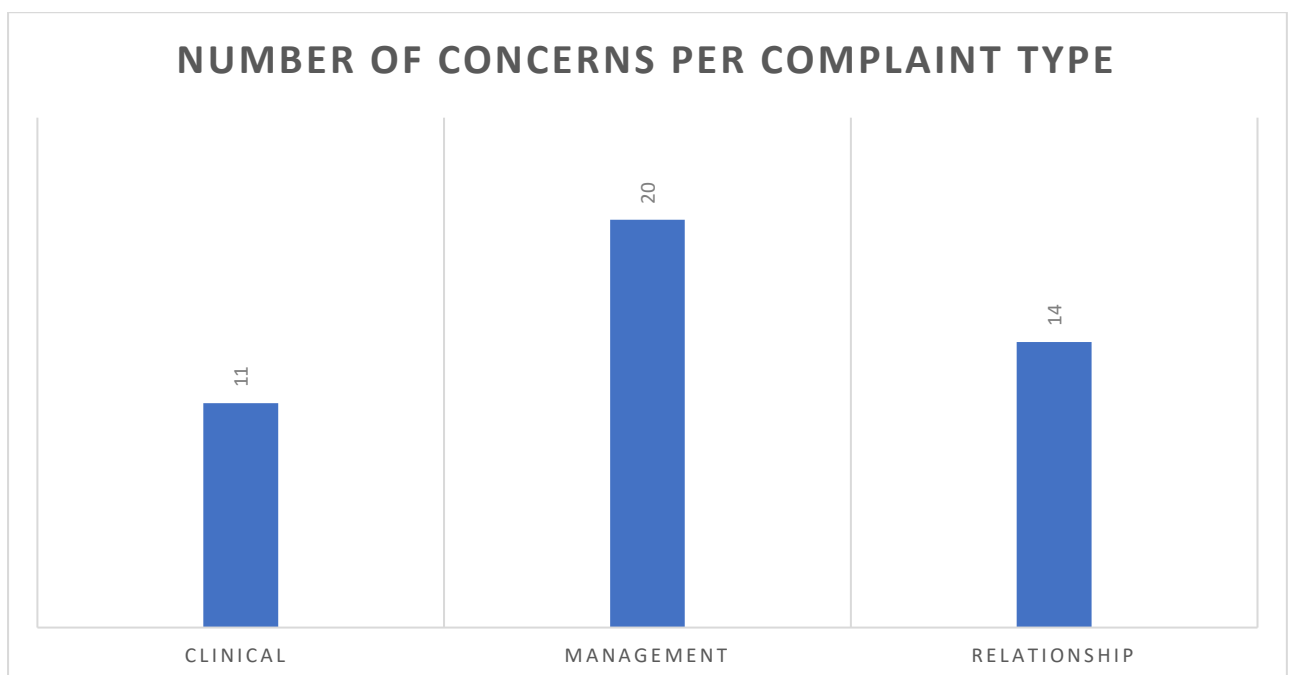


Table 4: Number of concerns as per complaint type

For further breakdown on the areas in which concerns are being reported to see if there was any trending or areas for further improvement the complaint categories were identified. Table 5 indicates the complaint categories.

Summary of Concerns - continued

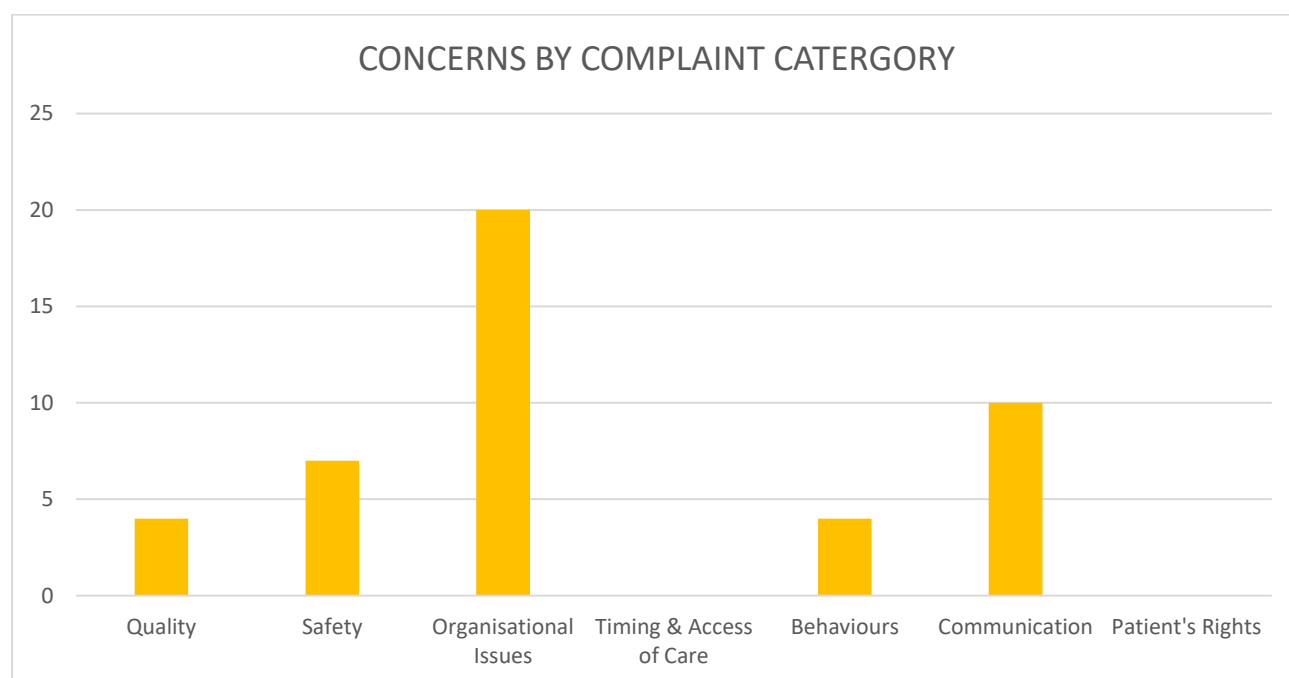


Table 5: Complaints as per the Complaint Category

When reviewing the complaints by complaint category the most common area for concern was the environment, with most of the concerns being in relation to the Call Bell System. This was rectified and is no longer an issue.

From the concerns that were lodged and reviewed there were several improvements that have been implemented over the past twelve months to improve the service that is provided to consumers of KRHS.

Improvements that have been implemented:

- Updating the video messages at the front Reception Waiting Room to remove consumers that are no longer at the organisation.
- Currently in the process for obtaining quotes to change the current floor covering in Killara from carpet to Lino in the main Dining area for easier cleaning.
- An increase in the number of staffing hours for Killara Staff to be provided across the whole day.
- An upgrade of the Call Bell System and internal phones.
- Additional hours have been assigned for Patient Service Workers (7 days per week) to allow them to deliver meals to consumers, therefore no longer requiring Health Care Workers to complete this task.
- Replacement of stained carpet in a consumer's room.
- New wheelchairs were purchased by the Ladies Auxiliary - when it was identified that there were insufficient numbers of chairs available.
- Staff were provided with additional education in relation to a communicable disease, when a deficit was identified.

Summary of Concerns - continued

- Parking has been an ongoing identified issue at KRHS. Staff have been sent reminders of parking allocations for staff shifts. This is monitored and reviewed on an ongoing basis.
- A consumer identified lack of shade in Westernport Unit Courtyard, as a result funding was allocated to the installation of a Shade Sail in the area.

Through the “You Said, We Did” Project there have been other areas of improvement noted that have been implemented. Other improvements that have been implemented include:

- Installation of Overhead Tracking to the rooms that are routinely used by ongoing consumers, Respite or Transitional Care Program users.
- Installation on mirror domes in high impact areas within Westernport Unit to prevent collisions.
- Timers have been put into place in areas where staff toasters/sandwich makers are in place to avoid toasters setting off fire alarms.
- Fire Emergency areas have been clearly marked at all Nursing Stations and envelopes with Emergency Instructions have been placed into these areas for Area Wardens to follow.
- Manual desk bells have been purchased in times where the electronic call bells are not working.
- To prevent the overcrowding of trolleys in work areas. These areas have been taped off.
- Increasing the compliance with immunisation (particularly the Influenza Immunisation) uptake at KRHS and community – has seen the implementation of four Avatars that are used to promote the Influenza Immunisation period.
- Changes to the menu based on feedback received from the consumers.

Feedback collected from the PALS Officer is fed directly back to the Unit Managers for further actioning as required.

Over the course of the next 12 months KRHS is striving to strengthen these two projects, whilst continuing to maintain a high level of consumer satisfaction and experience.

Listening to our Staff

Each year KRHS participates in the Victorian Public Sector People Matters Survey (PMS) to gain insights from staff on the strengths and weaknesses of the organisation.

An important focus of the survey is on the organisation’s Patient Safety Culture where eight specific questions relating to this area are asked. Overall, KRHS scored 87% via the VPSM Survey, exceeding the Department of Health and Human Services (DHHS) target 80%.

The survey also measures other aspects of the workplace such as employee engagement and wellbeing, education and training, how well change is managed and overall satisfaction. In 2019, a total of 69 or 41% of our workforce participated in the survey – which is above the state requirement rate of 40%.

Listening to our Staff – continued

The table below indicates the target level and the results from the survey on the Patient Safety Culture questions.

Organisational culture		
People Matter Survey - percentage of staff with an overall positive response to Safety and Culture questions	80%	93%
People Matter Survey – percentage of staff with a positive response to the question, “I am encouraged by my colleagues to report any patient safety concerns I may have”	80%	98%
People Matter Survey – percentage of staff with a positive response to the question, “Patient care errors are handled appropriately in my work area”	80%	95%
People Matter Survey – percentage of staff with a positive response to the question, “My suggestions about patient safety would be acted upon if I expressed them to my Manager”	80%	95%
People Matter Survey – percentage of staff with a positive response to the question, “The culture in my work area makes it easy to learn from the errors of others”	80%	96%
People Matter Survey – percentage of staff with a positive response to the question, “Management is driving us to be a safety-centred organisation”	80%	93%
People Matter Survey – percentage of staff with a positive response to the question, “This Health Service does a good job of training new and existing staff”	80%	82%
People Matter Survey – percentage of staff with a positive response to the question, “Trainees in my discipline are adequately supervised”	80%	88%
People Matter Survey – percentage of staff with a positive response to the question, “I would recommend a friend or relative to be treated as a patient here”	80%	91%

KRHS is pleased to participate in the Victorian People Matters Survey.

Staff are actively encouraged to contribute to this feedback and are provided with a copy of the report once received by KRHS.

Importantly KRHS is proud to report that the culture within the organisation has resulted in a net job-related score which was significantly greater than comparator organisations. This is a strong indicator of staff satisfaction with their workplace. The organisation recognises that a strong staff culture contributes to a safe patient environment.

Listening to our Staff – continued

Significant improvements from 2018, and comparison to peer hospitals, were in the areas of training new and existing staff, positive culture to employees who are Aboriginal and Torres Strait Islanders that disability was not a barrier to success at KRHS and the staff would recommend that a friend or relative be treated at the organisation.

We look forward to building on this outcome and to engage with our staff on all workplace and consumer related matters.

Case Study:

KRHS has responded to the needs of our consumers and staff in meeting both Patient Safety and Workplace Culture.

The organisation has implemented a Person Advocate Liaison Service (PALS) Officer to close the interface between consumers and staff in the absence of a low return rate in the Victorian Health Experience Survey.

The PALS Volunteer identifies items of care from the consumer perspective and works closely with the Unit Manager and staff to implement strategies that are responsive to the consumer's needs. This has been met with a high degree of consumer satisfaction.

To further support the staff KRHS has implemented the Employee Assistance Program and established a Peer Support network.

Quality and Safety - Accreditation

KRHS is required to meet several healthcare standards measured and recognised by independent external Accreditation Agencies.

We are accredited for the following standards:

Healthcare Standard	Accreditation status
National Safety and Quality Health Service Standards	Full Accreditation
Aged Care Accreditation Standards	Full Accreditation
Home and Community Care Standards	Full Accreditation
Food Safety Certification	Full Accreditation

Quality and Safety – Adverse Events

All staff in Victorian Health Services have an important role in identifying risk and responding when an incident occurs to maintain a safe care environment. KRHS makes significant efforts to provide safe health care experiences for the consumers who use our services. We know that being hospitalised is not without risk and we implement systems to aid in maintaining safe care to reduce the incident of human error.

Quality and Safety – Adverse Events - continued

KRHS has a Clinical Risk Management system that identifies situations that may put consumers at risk of harm or poor clinical outcomes.

Once a risk has been identified we work towards reducing the likelihood of any harming occurring. Incidents are reported electronically by all staff using the Victorian Health Incident Management System (VHMIS). Incidents are rated according to the level of harm that was caused from a particular event, the rating scale is based on the incident severity rating scale (ISR) - ISR 1: severe adverse event / death, ISR 2 – moderate adverse event, ISR 3 – mild adverse event and ISR 4 – no harm or near miss.

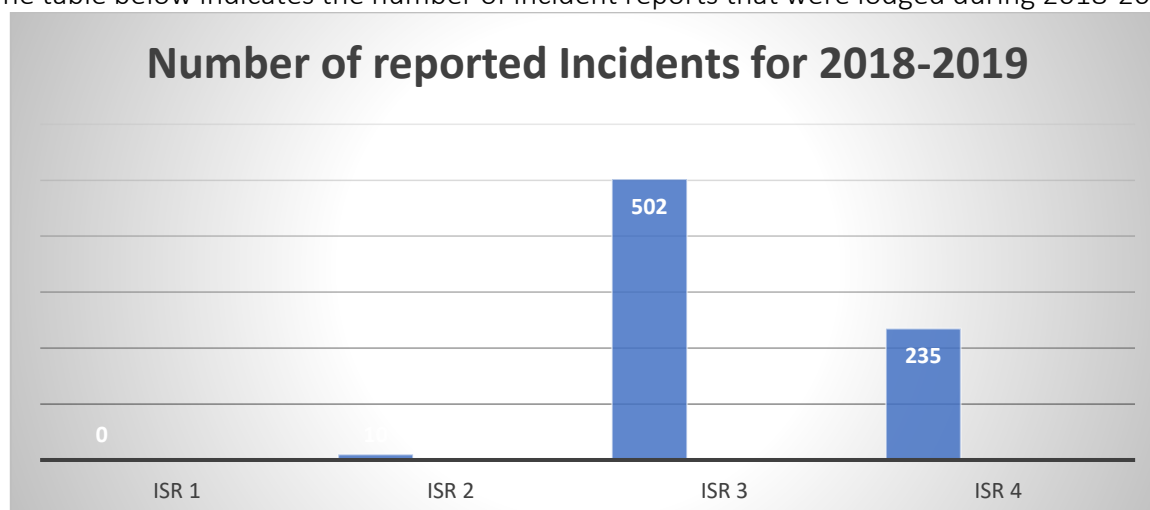
An in-depth Clinical Case Review will occur when there has been an unexpected outcome for a consumer, this usually occurs with an ISR 1 and 2. A part of this review involves reviewing the clinical data, listening to the consumer and engaging with the staff members involved. A key component of incident investigation and review is the utilisation of Open Disclosure. This process provides a clear reporting and review process involving families, consumers and staff. The involvement and supporting of staff in the process ensures that our staff respond effectively, learn from clinical incidents and improve the quality and safety of consumer care.

All our clinical staff are trained in Open Disclosure.

All consumer Incident Reports are reviewed and reported to the highest level of governance.

During 2018-2019 there were 747 incidents reported, from this there were nil ISR ones reported, 10 reported incidents with an ISR 2 reported, 502 incidents with an ISR of 3 and 235 near misses or no harm reported (ISR 4) reported.

The table below indicates the number of incident reports that were lodged during 2018-2019:



All ISR 2 incidents that were reported during 2018-2019 were reviewed and any findings were acted upon and managed in an appropriate way.

No adverse or sentinel events that occurred at KRHS resulted in serious harm or death to any consumers.

Quality and Safety – Infection Control

Staphylococcus Aureus Bacterium

Staphylococcus Aureus Bacterium (SAB) or “Golden Staph” as it is most commonly known is a ‘common’ bug that lives in the skin or in the nose. In most situations Golden Staph is harmless. However, if it enters the body through a cut in the skin, it can cause mild to severe infections and in some cases may cause death.

In hospital, good safe methods of inserting an Intravenous (IV) Line and taking care of it with clean hands are crucial to preventing a Staph Infection.

During 2018-2019 there was one case of Staphylococcus Aureus Bacterium at KRHS. It was identified that this was not contracted as a result of care provided at KRHS and was transferred from another facility with Staphylococcus Aureus Bacterium already present. KRHS will continue to monitor and report all cases of Staphylococcus Aureus Bacterium to the appropriate reporting bodies.

Influenza

Influenza is highly contagious and is obviously one of the illnesses that we work hard to prevent. All KRHS employees, contractors and Board Members are encouraged to have a flu vaccination each year to prevent the spread of the flu to consumers at KRHS.

Management at KRHS have an Infection Control Coordinator that has a travelling clinic within the organisation to capture as many employees at KRHS, regardless of whether they work directly or indirectly with consumers of the service.

To encourage staff uptake into the Vaccination Program life-sized cardboard cut-outs of familiar staff are used to promote the clinics. Other initiatives that are used to promote flu vaccinations include; internal advertisement on memos, screen savers, posters, verbal discussion and entering of a raffle to win a voucher for the staff that participate in the Vaccination Program.

In 2019, the target that was set by the Department of Health and Human Services for the number of staff vaccinations was 84%, due to vigorous campaigning, we were able to achieve well above the target with 93.4% of employees at KRHS being vaccinated against influenza.

Quality and Safety – Residential Aged Care Services

Our Residential Aged Care Services, Killara Hostel and Westernport Nursing Home, participate in regular auditing and report quarterly to the Victorian Quality Indicator Program for Public Sector Residential Aged Care Services (PSRACS).

This program measures five high risk areas of care important to consumer health and wellbeing. It provides a set of meaningful and measurable indicators, enabling us to monitor trends and benchmark against other services.

To make sure we are providing our consumers with a safe home and high-quality care we measure the following five indicators;

- Pressure injuries;
- Use of physical restraint;
- Use of nine or more medications;
- Falls and fractures and
- Unplanned weight loss.

These indicators are especially important for consumers of Aged Care Services as they are at a high-risk of experiencing one of them, which could lead their health to deteriorate. The results are analysed and used to identify areas for improvement in care and outcomes for consumers. Extensive reporting, trending and analysis of data relating to these indicators is presented to key committees and the Board of Management.

In mid-2019, three additional medication related indicators have been added to the reporting suite and include:

- 5 or more medication administration times
- Antipsychotic Medicines
- Proton Pump Inhibitor Medications.

We also required to report to the National Quality Indicator Program against three Clinical Quality Indicators being, Pressure Injuries, Use of Physical Restraint and Unplanned Weight Loss.

Pressure Injuries

Pressure injuries can be a significant issue for older people living in Residential Aged Care Homes and are considered a major health concern.

Strategies that we use to minimise the risk of pressure injuries include using standardised method of assessment and documentation, maintaining good hydration and nutrition, providing pressure reduction support equipment and encouraging maximum mobility.

In order to monitor the degree of pressure injuries consistently, we use a standardised Assessment Tool which includes rating injuries as either Stage 1, 2, 3, or 4 or as being unstageable or a deep tissue injury.

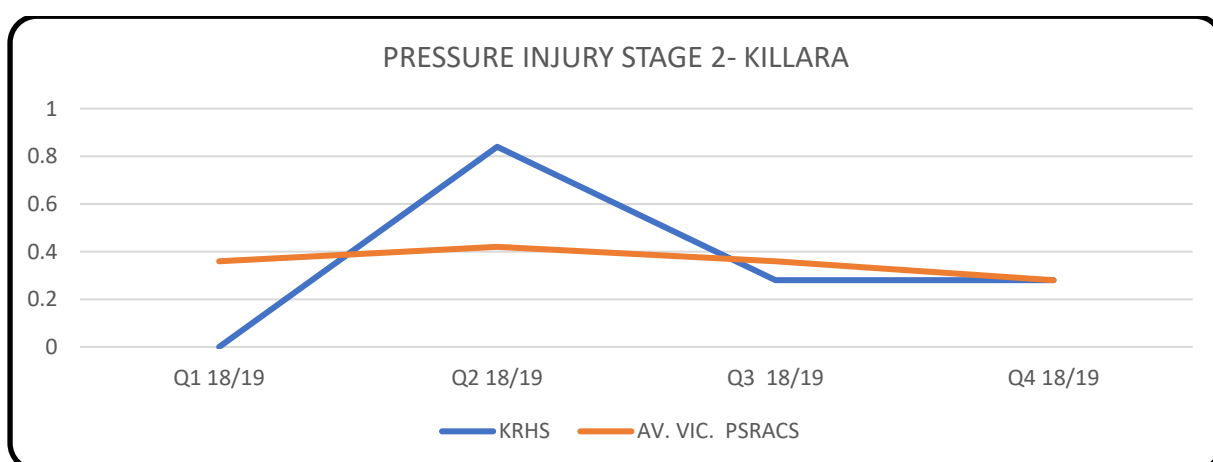
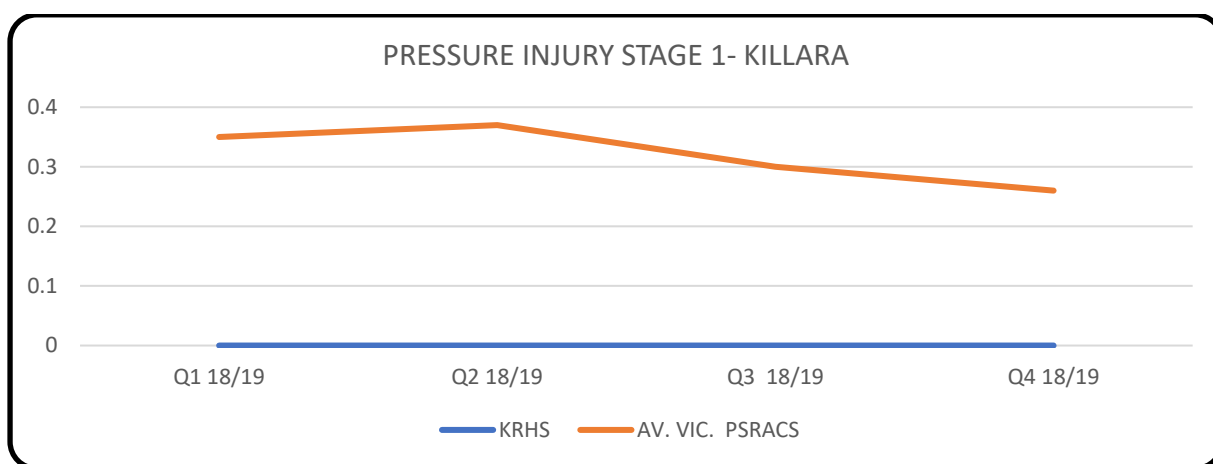
Pressure Injuries - continued

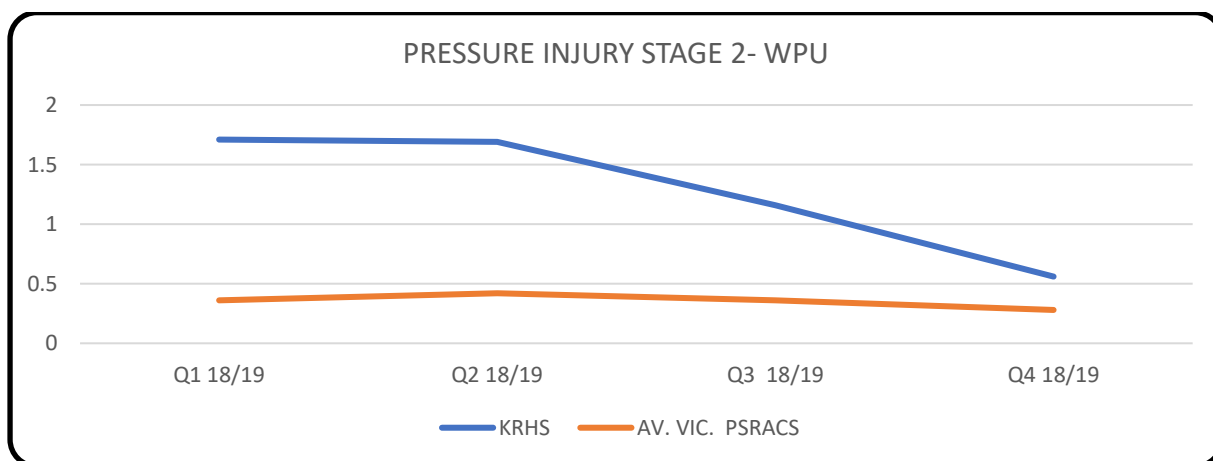
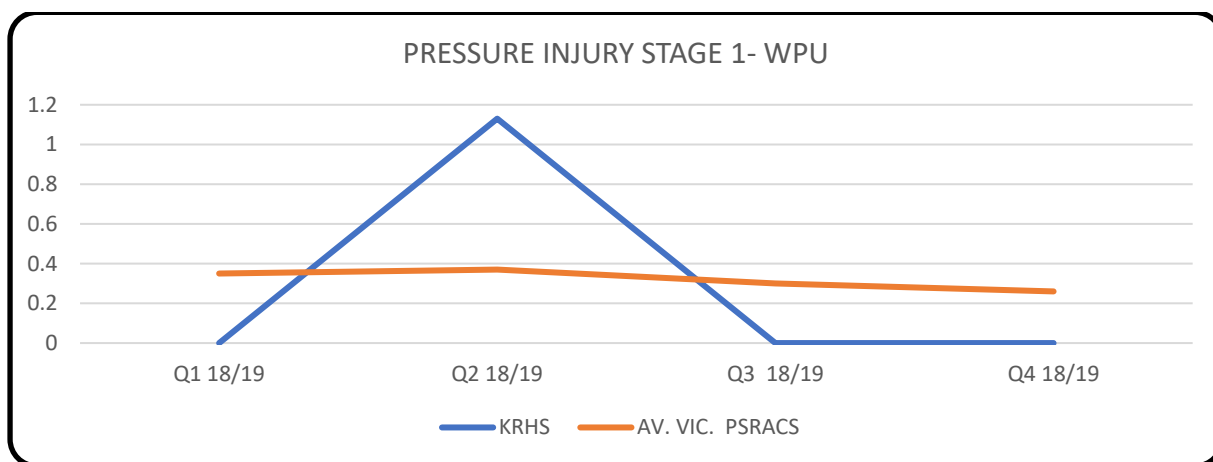
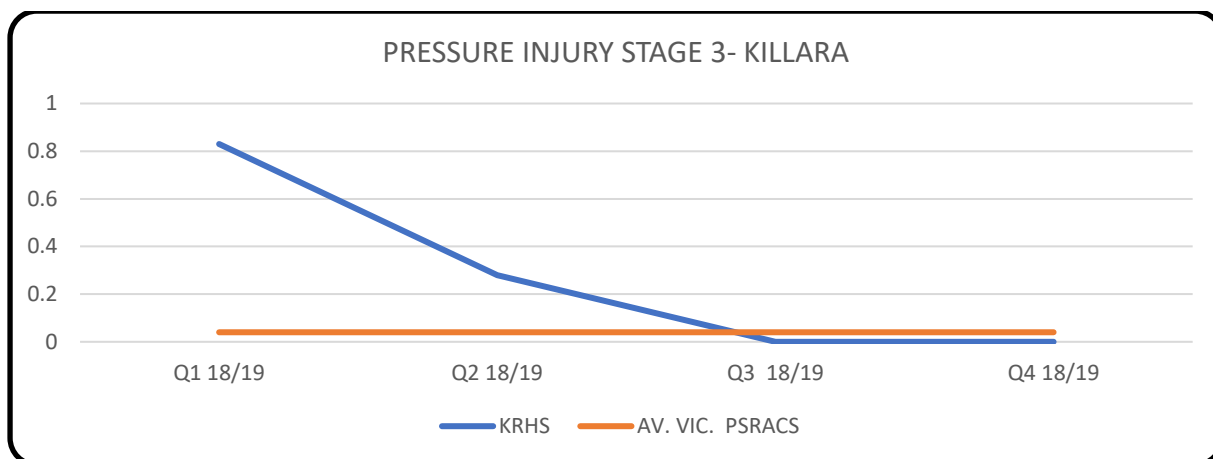
Those deemed at risk of developing a pressure injury have a wide range of interventions introduced to reduce this risk, including nutritional supplements, skin protection and additional moisturisation. Ongoing surveillance continues and consumers have their risk to developing a pressure injury assessed on a regular basis, or more frequently if their health status is declining.

The prevalence of Stage 1 and Stage 2 pressure injuries in Killara and Westernport areas fluctuated over the reportable period and were managed in accordance with Best Practice Guidelines.

We had one Stage 3 pressure injury reported in Killara and no Stage 3 pressure injuries in Westernport.

We did not have any Stage 4, deep tissues or unstageable pressure injuries reported for the period in either department.





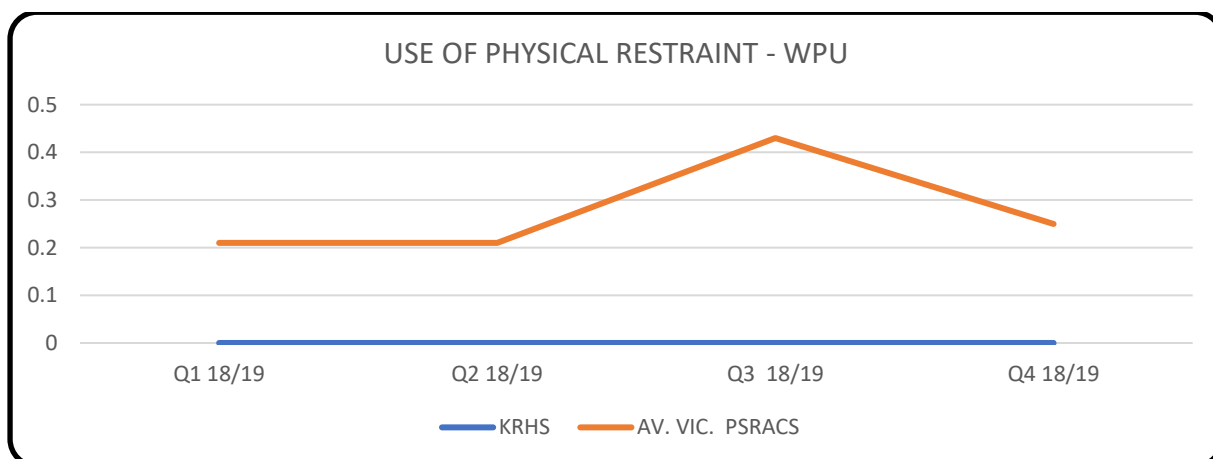
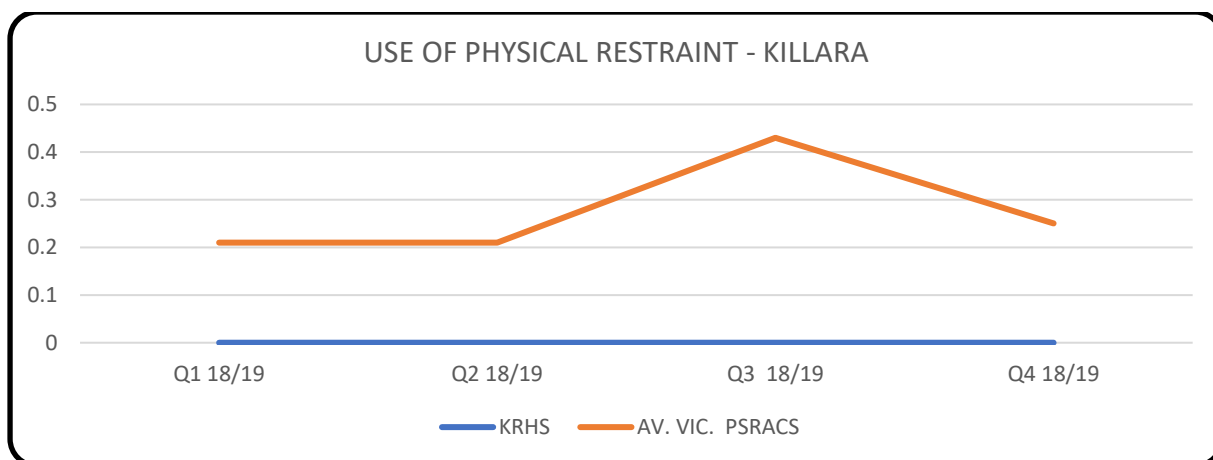
Use of Physical Restraint

Physical restraint is any intentional practice, device or action that restricts a consumer's free movement. Examples are lap belts, bed rails to prevent consumers falling out of bed or chairs that are difficult to get out of.

It is KRHS Policy to avoid the use of physical restraints as far as possible. Instead, where necessary, KRHS utilises the use of specialised equipment such as low-low beds and alarm mats to effectively support our consumers individual needs.

Use of Physical Restraint - continued

There were no instances of physical restraints being used during the 2018/2019 period.



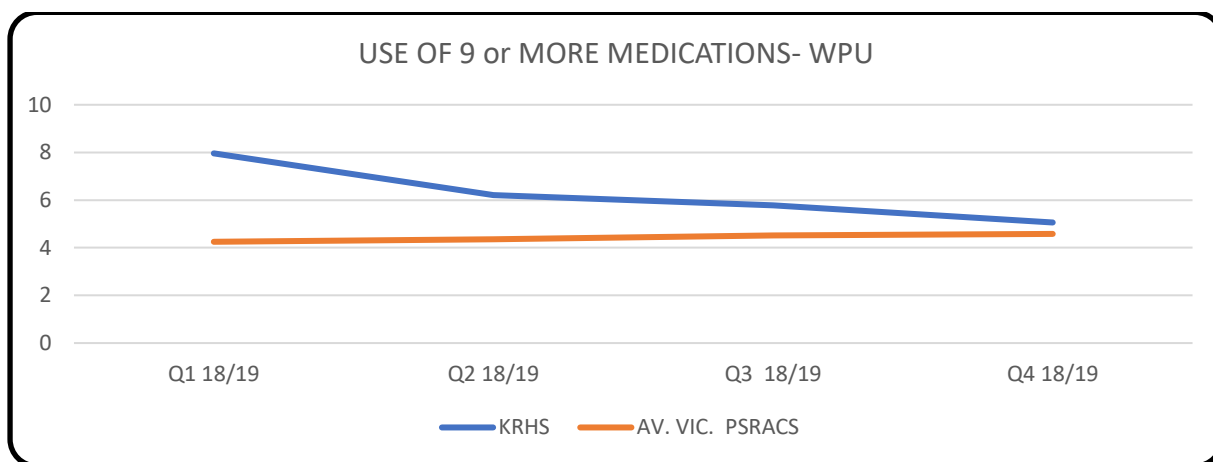
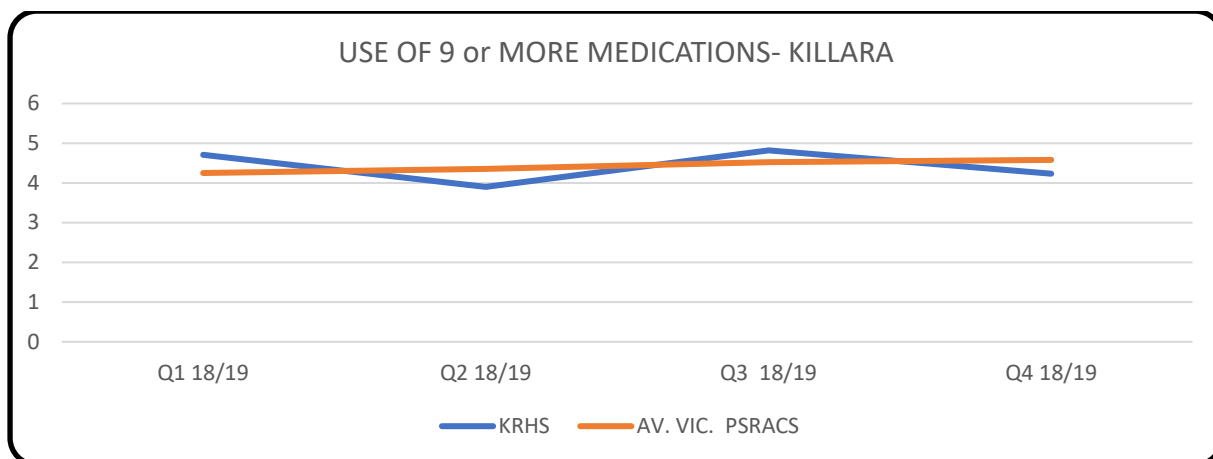
Use of Nine or More Medications

The use of a large number of different medications is referred to as “Polypharmacy”. Polypharmacy often arises from having several underlying medical conditions and is much more common in older consumers. Polypharmacy can increase the risk of adverse drug reactions, falls, weight loss and inability to metabolise medicines.

KRHS monitors the prevalence of Polypharmacy in Aged Care and conducts regular Medication Reviews to ensure that all consumers are receiving only those medications that are necessary for their health and wellbeing.

All consumers have a bi-annual review by an external Pharmacist who will recommend ceasing medications if this is in the consumers’ best interest. Nursing staff regularly review each consumer’s care, and often identify medication regimes that may benefit from review by the treating Doctors and Pharmacist.

We continue to record a fluctuating amount of medications prescribed per consumer in our Aged Care Homes, and is reflective of the range of complex health care conditions are consumers experience



Falls and Fall Related Fractures

KRHS closely monitors the rate of falls and related fractures in our aged care service to ensure that the risk of falls is minimised and that all consumers are assisted to mobilise according to their own level of falls risk.

Falls minimisation strategies include comprehensive Falls Risk Assessments, mobility aids, protective clothing and headwear, low line beds and sensor mats to alert care staff when a person is getting out of bed. We also offer Physiotherapy and Gentle Exercise Programs to improve strength, balance and flexibility.

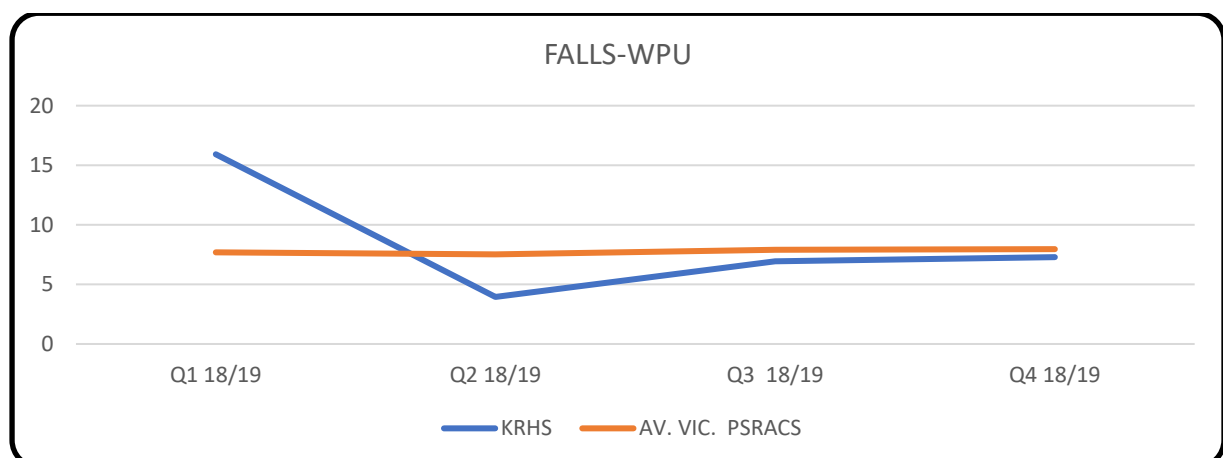
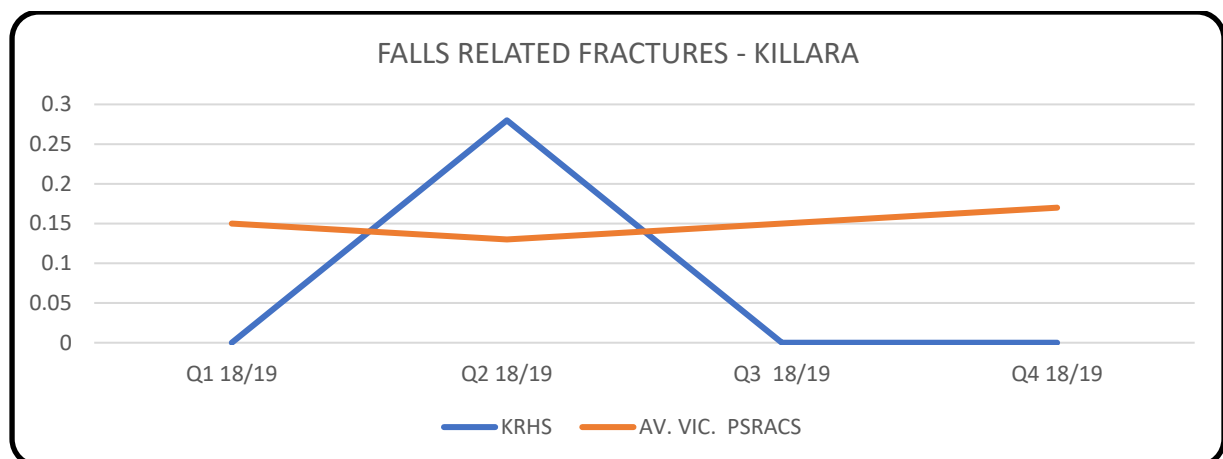
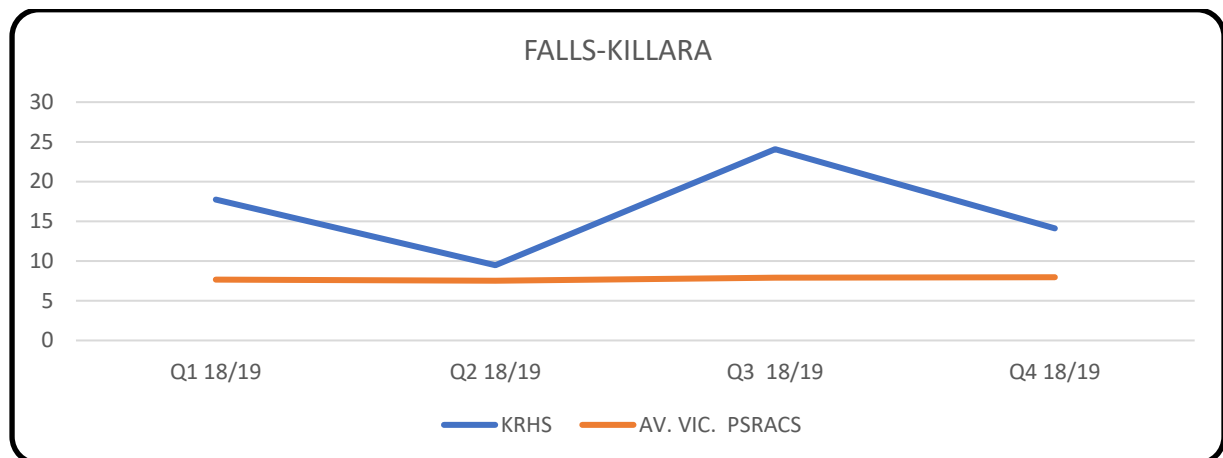
The number of falls we record often relate to consumers taking the risk to mobilise without assistance or supervision, or rolls from beds at floor level. Consumers with a diagnosis of dementia, impulsive behaviour or chronic health conditions have a higher proportion of falls recorded at this facility.

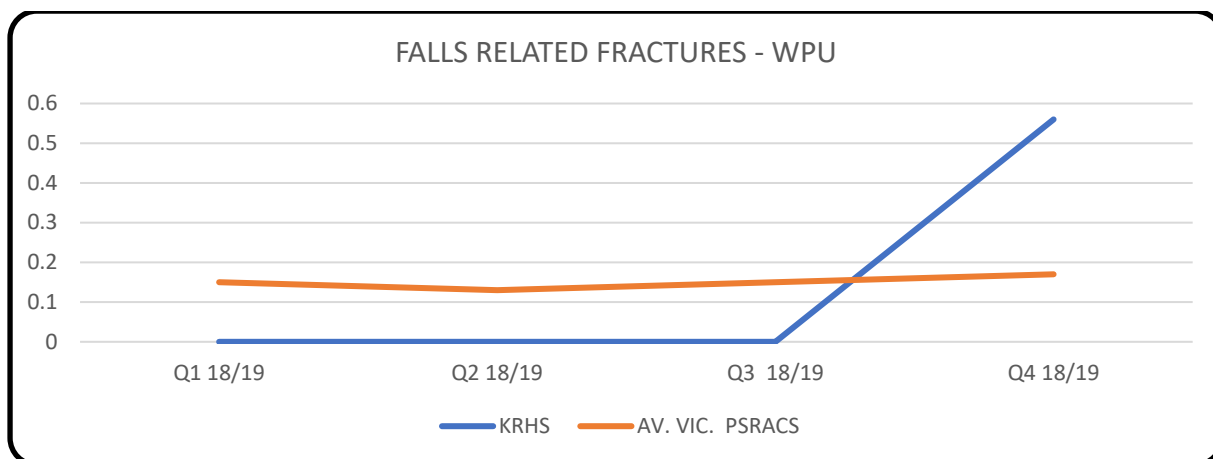
All fall related incidents are reviewed clinically by Nurses and Allied Health staff to ensure preventions are in place to reduce the likelihood of future falls and the injuries associated with falling.

It has been identified that one consumer in Killara accounts for a significant proportion of reported falls due to complex medical condition. Individualised falls prevention and harm minimisation strategies have been developed and implemented for this consumer to reduce the number of falls and any potential harm.

Falls and Fall Related Fractures - continued

During the reporting period there were two fall-related fractures – one in Killara and one in Westernport Nursing Home.





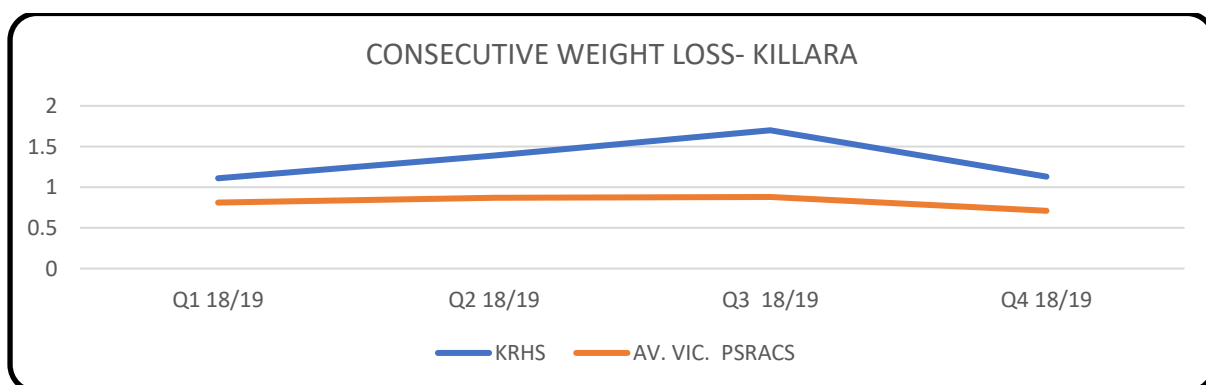
Unplanned Weight Loss

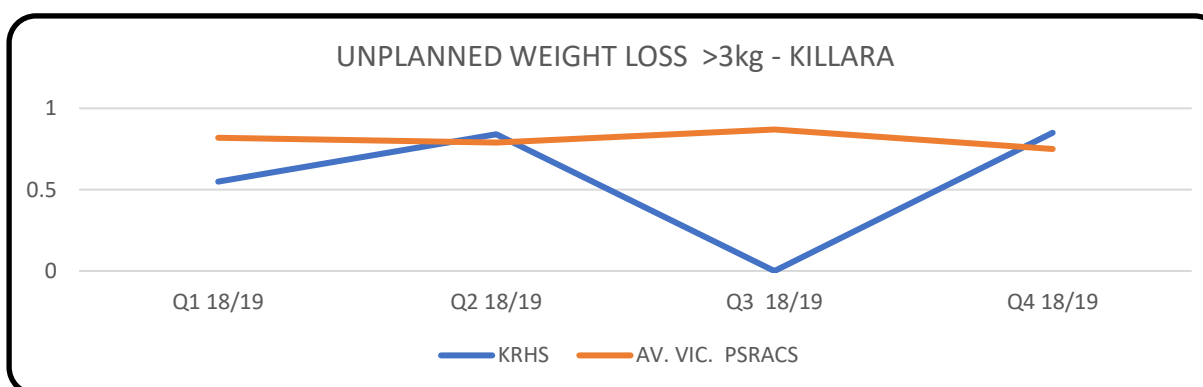
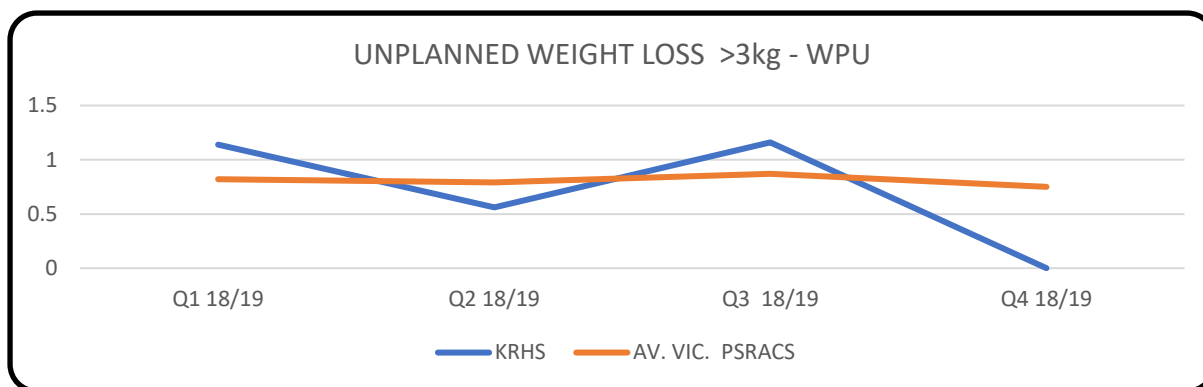
Unplanned weight loss occurs among older people for a number of reasons, including behaviours linked to dementia and age-related changes such as loss of taste, smell, sight, changes to the digestive system, and swallowing difficulties.

To help us ensure that changes are identified early, and appropriate strategies put in place, we:

- weigh each consumer monthly - by regularly monitoring consumer weights we can investigate any unplanned weight loss promptly and put in place strategies to address this as quickly as possible.
- record personalised ideal weight ranges for each consumer and include these in our database, an alert will be generated if the consumers weight reaches a pre-set upper or lower limit.
- Consumers who are found to have unplanned weight loss are referred to the Dietitian for review and other measures are put in place as appropriate for that consumer.

The variation over time in results for this largely due to the changing acuity and health conditions of our consumers and the impact this can have on maintenance of weight. Our rates for consecutive weight loss are above that of similar size organisations however our rates for significant weight loss compare favourably and can be attributed to our robust reporting and interventions to address identified weight loss.





Quality and Safety – Escalation of Care Processes

It is important that consumers and families know we take their concerns seriously. Some may worry that there will be a decline in the quality of subsequent care if they activate this process. The role of Clinical and Support staff is to reassure consumers and their families that they are considered valued members of the care team and activating this process is not a criticism of care.

Escalation of care conveys an important message that consumers and families can contribute to improving safety and quality in healthcare.

All consumers and carers must be routinely informed of the Escalation of Care process by discussing the Escalation of Care Flow Chart to each consumer and their family/carer on admission, this includes identifying the Call Bell System, including the Emergency Call Bell Button.

The Escalation of Care process for consumers is a simple process that is demonstrated below:

Step 1: Talk to your Nurse:

Consumers and families are asked to contact their Nurse as first port-of-call if they notice a worrying change in the consumer's condition. The Nurse will discuss and assess the concerns with the consumer and/or family. If the consumer and/or family are still concerned, they will ask the Nurse to help with contacting the Nurse in Charge.

If it is an emergency the Emergency Call Button can be activated to escalate care quickly.

Quality and Safety – Escalation of Care Processes – Continued

Step 2: Ask to speak to the Nurse in Charge:

Ask the Nurse in Charge for a review based on an Escalation of Care. The Nurse in Charge will review the consumer to resolve any consumer and/or family concerns. If the family are still concerned the Nurse in Charge will notify the Doctor and request a review of the consumer as requested by the consumer/family and/or carer.

Once notified of an Escalation of Care, the Nurse in Charge will:

- Review the consumer within a timely fashion – within 10 minutes, (if appropriate, may require immediate attention),
- Introduce themselves.
- Establish the consumer/family/carer concerns.
- Assess the consumer, address concerns and refer as appropriate.
- Liaise with ward nursing staff and the medical staff as appropriate.
- Activate escalation process if consumer meets clinical review criteria
- Communicate actions to ward nursing staff.
- Document action taken regarding an ongoing management plan within the consumer's clinical record.
- Provide feedback to the consumer/family/carer who made initiated the escalation of care process (if consumer has given consent to the feedback).
- Record the Escalation of care form and send to Quality Coordinator (Acute).

Case Study:

Ms Lee came in to see her father and was concerned that his general condition was not the same as when she was visiting him yesterday. Ms Lee spoke to the Nurse who was caring for her father. The Nurse identified that Mr Lee had been a little off today, but his observations were still 'normal'. Ms Lee felt that this did not explain the change in his condition and that she wanted to speak to the Nurse in Charge. The Nurse in Charge came and reviewed Mr Lee and identified that his observations have slowly been declining since admission and were now in the clinical review zone. With this information the Nurse in Charge contacted the Doctor and a review was conducted. The Doctor requested that Mr Lee be sent to a tertiary facility for a review. Mr Lee was sent to a tertiary hospital where further investigation was conducted.



We value your feedback

Each year, public health services in Victoria are required by the Department of Health and Human Services (DHHS) to report their performance and improvement work in quality and safety to their community.

While most of the subject matter is prescribed, we've tried to write it in a way that is more enjoyable to read.

Tell us what you think of our Quality Account Report

Postcode you live in:

Where did you get this report?.....

Age:

Was this report easy to understand? ☐ Easy ☐ Difficult ☐ Very Difficult

Did you find the report informative? ☐ Yes ☐ No

Please tell us what you liked about the report and any other comments you may have:

.....

.....

.....

.....

.....

.....

Thank you for taking the time to provide us with your feedback.

Please send to: Kooweerup Regional Health Service
PO Box 85, Koo Wee Rup, VIC 3981
Email: gregorys@krhs.net.au

Website: www.kooweeruphospital.net.au