

COMMUNITY ENGAGEMENT FORUM

NOTES from the Forum held via videoconference on 16 March 2016 commencing at 5.35 pm

1. PRESENT:

<u>Birchip Campus</u>	Nil
<u>Charlton Campus</u>	Kate Giukimis, Joy James
<u>Donald Campus</u>	Ray Walker, Tracey Brennan
<u>St. Arnaud Campus</u>	Nil
<u>Wycheproof Campus</u>	Nil

2. IN ATTENDANCE:

Kathy Huett (Chief Executive Officer)
Alister Ferguson (Director Finance and Business Services)
Danny Stone (Director Clinical and Community Health)
Andrew Smith (General Manager Clinical)
Helen Barclay (Birchip Campus Manager) (exited prior to Strategic Plan discussion)
Dallas Coghill (Charlton Campus Manager)
Jan Barbetti (Wycheproof A/Campus Manager) (exited prior to Strategic Plan discussion)
Una Round (Quality Manager)
Sue Hynes (Community Liaison Officer)

3. APOLOGIES:

Julie and Richard McLennan, Robyn Vanrenen, Stuart McLean, Simone Christie, Ken Round, Lynda Rumbold, Leo Tellefson, Robyn Ferrier, Nola Wright, Sharon Tonkin.

4. WELCOME:

Kathy Huett welcomed everyone to the Forum advising that the purpose of community engagement is to have consumers/community involved in the Health Service to improve quality of care and be more efficient.

5. LOOKING TO THE FUTURE CONSUMER ENGAGEMENT 2016:

A power-point presentation (copy of slides attached) was shown covering topics:

- EWHS Audit Schedule
- Quality and Safety Report 2015
- Quality of Care Report 2015
- Evaluation of patient feedback/Victorian Healthcare Experience Survey Results (VHES) 2015
- Feedback and Suggestions Reports 2015
- Strategic Plan

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Feedback from Consumers:

Joy James– Charlton Campus

- ❖ Could not fault the service
- ❖ Has spent a lot of time with Nursing Home Residents. Now a Volunteer Visitor.

Concern: Shower Room –water all over the floor. Unavoidable, however, towel should be put down to stop water. Dallas will reiterate to staff.

Donald

Donald Campus five star accommodation

Was the Quality of Care Report helpful to you as community members?

- Helpful to community members – provides information and insight.

STRATEGIC PLAN:

Vision for the Future: Vision, Mission, Mission-Values: Values – moving forward with good feedback on the revised Vision, Mission, Values.

Top 10 causes of what makes unwell. EWHS needs to focus on these issues.

Issues happening. What is happening in the community? What can we do about it?

Opportunities – more information to the media

Strategic Goals were discussed with suggested Objectives put forth:

STRAGIC GOALS	OBJECTIVES
<p><u>SERVICE DELIVERY</u> Services optimise the health needs of the community</p>	<ul style="list-style-type: none"> • Consumer engagement with staff via Volunteers • Safety of footpaths for gophers/wheelchairs. Shire issue. • Volunteers. Staff to suggest what volunteers can do to assist in the Health Service? In RAC? Expand Volunteer Service? Promote benefits of volunteers at the Health Service. • Rationalise Acute Services • Focus on areas of community needs <ul style="list-style-type: none"> ➢ Critical discussion factors ➢ Greatest community needs • Improve community health literacy

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	<ul style="list-style-type: none"> • Areas of need re Consumer Directed Care • Explore outreach sources, eg: Cardiology Services • Calendar in local newspapers of services and when they are available in each town • Optometry • Dental & Dental Technicians. • Patient Transport
<p><u>RELATIONSHIPS</u> To be actively engaged with stakeholders:</p> <ul style="list-style-type: none"> ➤ Volunteers ➤ Community ➤ Doctors ➤ Organisations ➤ Staff 	<ul style="list-style-type: none"> • Volunteer Program • Enhance <ul style="list-style-type: none"> ○ Communication and communication avenues ○ Facebook • Consumer Engagement • BOSSnet • Volunteering local support • Attracting young people back to the country • Incentives attracting locals • Increase Graduates • Engage with consumers <ul style="list-style-type: none"> ❖ Noticeboards
<p><u>SUSTAINABILITY</u> Ensure the longevity of the Health Service</p>	<ul style="list-style-type: none"> • Recruitment of Graduates • Provide relevant services • Operate within means • Planning – have a plan and stick with plan • Explore new avenues of growth • Look for other sources of funding • Continuous work on ACFI • Encourage efficient use of facilities. • <u>Threats</u> <ul style="list-style-type: none"> ➤ Ageing in Place Policy ➤ Competition • Child Care

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<p><u>QUALITY AND SAFETY</u> Consumers receive service and others work/visit without experiencing preventable harm</p>	<ul style="list-style-type: none"> • Quality service • Family Violence Project • Improve reporting to Board of Management – Quality and Safety & Risk • Improve health literacy • Involving patients more in decisions made • Make a safe environment for people. Maintain neat and tidy
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6. CAMPUS ISSUES RAISED:

The following issues were raised in relation to the

Donald Campus:

- ❖ Automatic Doors
- ❖ Darkness of Nurses Station

Charlton Campus

- ❖ Plants overgrown and need attention
- ❖ Positive feedback at Charlton

7. COMMENTS ON VIDEOCONFERENCE MEETING:

- Very interesting
- Wonderful experience to hear what the plans are, glad she came. Very informative, nice to be included.
- Interaction is very good, saves travelling. V/C very good
- Happy with twice a year. Times of meetings are suitable

8. CONCLUSION: Kathy thanked everyone for participating in the Forum and requested feedback. Forum closed at 7 pm.



East Wimmera Health Service

Cultivating Healthy Communities

Looking to the Future Consumer Engagement 2016

Community Engagement Forum

EWHS Audit Schedule:

- * EWHS has a comprehensive Organisational Audit Schedule covering all departments.
- * The Audit Schedule includes activities that are performed in response to:
 - * Department of Health & Human Services requirements
 - * Legislative & accreditation requirements
 - * Auditing of current practices & processes against Best Practice Guidelines
- * The Audit Schedule is a living document and it is reviewed and updated annually.

Examples of Audits performed include:

- * Feedback & Suggestions Reports
- * Evaluation of the Quality of Care Report
- * Quality and Safety Report 2015
- * Victorian Health Experience Survey (VHES)
- * Consumer Evaluation of EWHS Brochures & Publications.

Quality of Care Report 2015

Consumer Feedback on Quality of Care Report

- * Excellent Report, very thorough, perfect
- * You have covered things well, easy to read
- * Easy to read, coloured photos & graphs excellent, very comprehensive report
- * Very professionally presented this year
- * Keep up the great work
- * The report covers a range of services that are offered to the communities of EWHS, people in the area can read the report provided in the newspapers
- * The report is eye catching, photos large enough to view, information relevant, well done EWHS
- * Continue to provide a balance between written reports, visual information such as graphs & photos. Well done, very informative
- * Very comprehensive report, easy to read, information for every one. Proud to be a resident of EWHS area & use the services available, thanks to all involved
- * Report is great, easy to read & planned out well
- * Everything is clear & understandable
- * Big Improvement & encourages reading/understanding
- * Easy to read, good range of photos

Quality of Care Report 2015

Consumer Suggestions for Improvement

- * Does it need to be A3
- * Future Plans for EWHS
- * Include Dialysis in the Report & Exercise/Wellbeing Program
- * Graphs to be consistent with Campuses having the same color through out the Report
- * Is there a “large print” version for the visually impaired clients/patients/community
- * Is it made from recycled paper. It is a little too large to store/read/handle
- * Smaller format, less bureaucratic language ie. simpler English, fewer graphs, more focus on patient/resident experience
- * Maybe a bit too much information
- * Could the report include what the Doctor’s of EWHS offer, what about the other services EWHS offers eg. Podiatry, physiotherapy.

Action/Outcomes: Suggestions for Improvement will be discussed at CQI/RM Committee and outcomes implemented in the 2016 Quality of Care Report.

Quality and Safety Report 2015

The Quality and Safety Report is an annual report provided to the BOM/consumers and staff to inform and enhance their knowledge in areas relating to Quality and Safety.

- * The Report is available on the EWHS web site or a copy can be accessed from the Campus.

The Quality and Safety Report provides information relating to:

- * Safety, Infection Control, Residential Aged Care Quality Indicators, Unplanned Readmissions, VHES, Feedback and Suggestions (Compliments & Complaints/Concerns)
- * The Report includes trending & comparative information relating to the data presented.

Victorian Health Experience Survey Results 2015

Victoria's state wide survey, conducted by the Department of Health and Human Services seeks to discover the experience and the level of satisfaction of consumers using Acute services. The surveys are distributed to a randomly selected group of eligible people in the month following discharge. There are 80 questions on the survey.

EWHS has attained excellent results over the past year and on most occasions performed better than the State averages.

EWHS performed strongly in:

	EWHS 2014	EWHS 2015	State
Total overall hospital experience	100%	98%	91%
Overall how would you rate the Care Received	100%	98%	91%
Treated with respect and dignity	99%	95%	88%
Hospital food good/very good	91%	86%	68%
Hospital room very clean	95%	93%	72%

EWHS need to focus on Improving

	EWHS 2014	EWHS 2015	State	Action:
Sometimes students accompany health professionals. If this happened was your permission sought?	63%	90% Improvement of 27%	71%	Discussed at EWHS & staff meetings raising awareness of issue.
How would you rate your discharge process?	100%	91% Decrease of 9%	85%	Discussed at EWHS & staff meetings raising awareness of issue.

Comments made by consumers

- * All staff treated me well, staff very efficient and friendly
- * I have never experienced such a high level of care
- * I was treated with respect and kindness
- * Meals were excellent, well presented, appetising and tasty
- * Neat, room clean and tidy
- * Great attention, personality of nurses, food
- * Attitude of staff.

Comments made by consumers

- * Action taken to improve care and services:
- * Call bells are too intrusive resulted in the call bell system being turned down to night rate. Resulting in reduced noise level and positive feedback from patients.
- * Provision of a menu to cater for consumers with special dietary needs referred to Support Services Manager. Process implemented to meet special dietary needs including an up dated menu, access to a Dietician, nutritional manuals, and a range of special recipes.

Feedback and Suggestions Reports, 2015. (Compliments, Complaints/Concerns)

- * EWHS values and encourages written and verbal feedback from consumers about their experiences and perceptions
- * “Feedback Forms” are readily available to consumers at all campuses
- * The Feedback and Suggestions Report is an example of one of the Audits included on the Audit Schedule
- * All Complaints/concerns are addressed in a very timely manner with input from Management
- * 3 monthly Feedback and Suggestions Reports are reported to BOM and staff and annually to consumers.
- * **In 2015: There were 133 formal Compliments and 45 formal Complaints / Concerns received.**

Feedback & Suggestions Reports, 2015 (Compliments, Complaints/Concerns)

Improvements that have been made as a result of listening to consumer complaints/concerns:

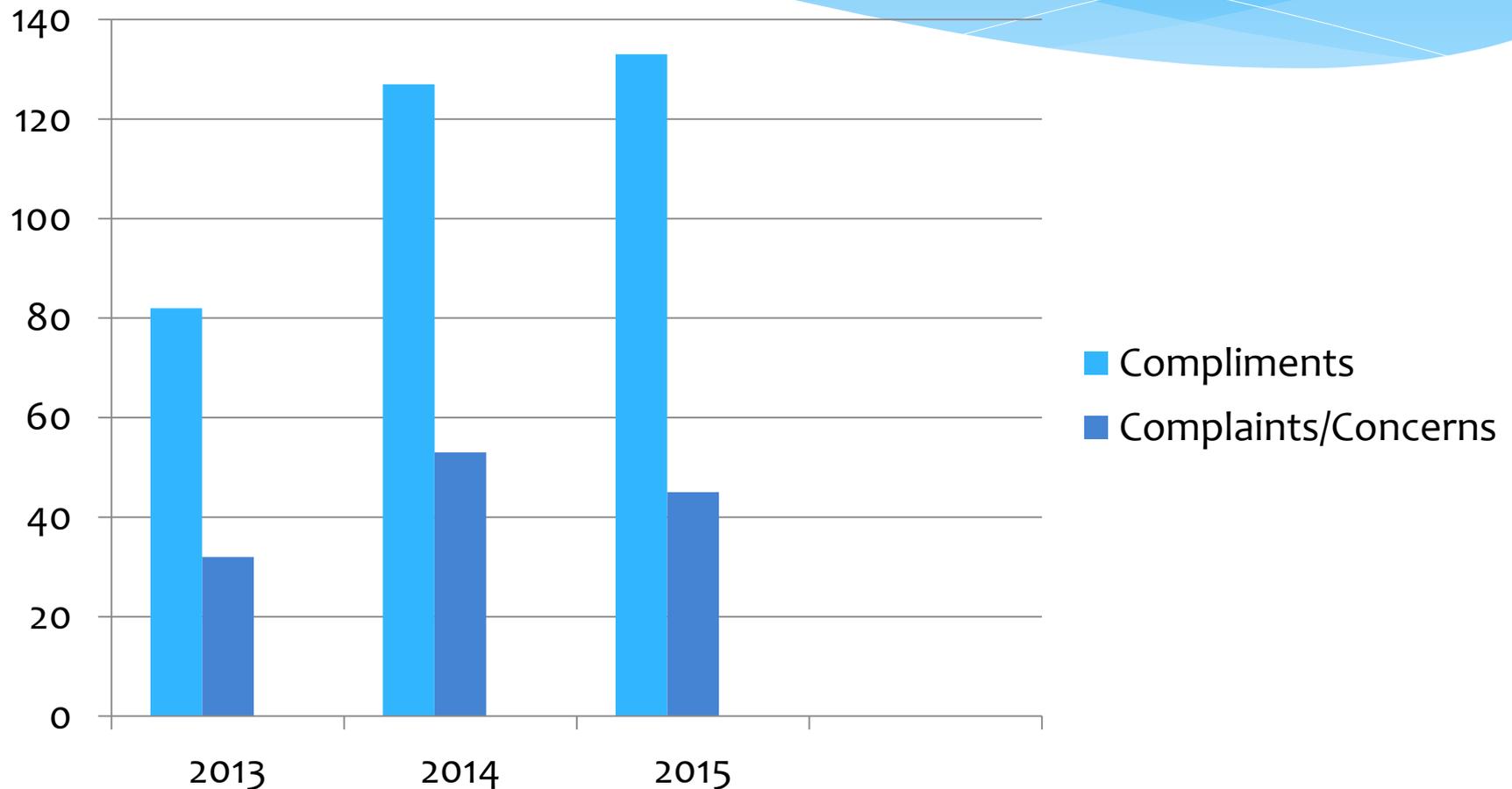
- * A wheel chair is available for clients at St Arnaud PAG resulting in positive feedback from clients
- * Pot holes in drive way – fixed
- * Lack of cot for child – new cots purchased that meet new standards
- * TV's not working - rewiring of TV's rectifying problems
- * Issue with water temperature – temperature control values replaced in hot water system rectifying problems
- * Staff member present during meal times in residential care.

Feedback & Suggestions Reports, 2015. (Compliments, Complaints/Concerns)

- * Examples of Compliments Received:
- * All the staff were professional and caring very helpful
- * Thank you to wonderful nursing staff for care and making stay enjoyable. Also great cooks for beautiful meals and wards staff for keeping room ship shape
- * CEO received a phone call for community client from Wycheproof thanking us for the very good podiatry service she received. It was fantastic to have such a great service available in Wycheproof for residents.
- * I would like to thank the staff for your integrity, kindness and professionalism. We are so lucky to have a facility of this calibre in St Arnaud.
- * To the fantastic nursing and domestic staff that looked after me so well on my recent hospital stay thanks once again.
- * Very good staff, they were very lovely & explained everything to me, very happy with them.

Feedback and Suggestions Reports, 2013 - 2015.

(Compliments, Complaints/Concerns)



Evaluation of Consumer Feedback

EWHS receives consumer feedback from a range of methods, both formally and informally.

Two examples of Consumer Feedback include:

- * Feedback and Suggestions Reports, 2015
- * VHES Results.

Consumers are involved in the review and analysis of Feedback data and provide comments and suggestions to address key issues.

A Vision for the Future

The image features a solid blue background with a white wavy shape at the bottom. The text "A Vision for the Future" is centered in white, with "A Vision for the" on the top line and "Future" on the bottom line.

Strategic Planning

- * Definition

- * Strategic planning is an organization's process of defining its strategy, or direction, and making decisions on allocating its resources to pursue this strategy.

The Path Forward



A Vision for the Future

- * **Vision** (Why do we do what we do)
 - * To Cultivate Healthy Communities
- * **Mission** (How are we going to do what we do)
 - * Through Consumer Centred Care
- * **Mission** (What do we want consumers to have)
 - * A Positive Health Experience

Our Values

- * Honesty We will be fair and straight forward
- * Empathy We will deliver compassionate consumer centred care
- * Excellence We will deliver positive health experiences
- * Community We will engage our communities
- * Together We will be an effective health team
- * Open We will be clear and open in all our communication
- * Respect We will be respectful of everyone

Top 10 causes of what makes us unwell

	Male burden	Female burden
Rank	Specific cause	
1	Ischaemic heart disease	Anxiety and depression
2	Type 2 diabetes	Ischaemic heart disease
3	Anxiety and depression	Stroke
4	Lung cancer	Type 2 diabetes
5	Stroke	Dementia
6	Chronic obstructive pulmonary disease	Breast cancer
7	Adult-onset hearing loss	Chronic obstructive pulmonary disease
8	Suicide and self-inflicted injury	Lung cancer
9	Prostate cancer	Asthma
10	Colorectal cancer	Colorectal cancer

Health of the Community

Buloke Shire : SEIFA Index Ranked 41 in Victoria (Decile 6)

	Number of deaths	Standardised Rate per 100,000 Persons	Lower limit of 95% CI	Upper limit of 95% CI
Unavoidable Mortality	40	93.10	62.94	123.26
Total Avoidable Mortality	80	194.20	149.96	238.45
Annually				
Unavoidable Mortality	8			
Total Avoidable Mortality	16			

Northern Grampians Shire : SEIFA index Ranked 9 in Victoria (Decile 2)

	Number of deaths	Standardised Rate per 100,000 Persons	Lower limit of 95% CI	Upper limit of 95% CI
Unavoidable Mortality	74	115.30	88.76	141.83
Total Avoidable Mortality	150	234.28	196.20	272.36
Annually				
Unavoidable Mortality	14.8			
Total Avoidable Mortality	30			

Avoidable Deaths 2002-2006

All Individual AMs for selected year - Buloke

AM Condition	Number of deaths	100,000 Persons	Lower limit of 95% CI	Upper limit of 95% CI
Lung cancer	15	32.44	15.79	49.09
Ischaemic Heart Disease (IHD)	13	28.32	12.75	43.89
Suicide	5	16.89	1.07	32.72
Road traffic injury	5	16.34	0.94	31.75
Stroke	7	15.21	3.85	26.57
Diabetes	7	14.88	3.81	25.94
Chronic Obstructive Pulmonary Disease (COPD)	6	14.28	2.78	25.79

All Individual AMs for selected year – Northern Grampians Shire

AM Condition	Number of deaths	per 100,000 Persons	Lower limit of 95% CI	Upper limit of 95% CI
Ischaemic Heart Disease (IHD)	28	42.26	26.57	57.94
Lung cancer	25	36.82	22.37	51.26
Colorectal cancer	15	22.48	11.08	33.88
Road traffic injury	9	20.40	6.59	34.20
Stroke	10	14.93	5.60	24.26
Breast cancer	9	13.26	4.56	21.97
Suicide	6	11.64	1.99	21.29
Chronic Obstructive Pulmonary Disease (COPD)	6	8.57	1.70	15.44
Alcohol related conditions	5	7.86	0.96	14.75
Skin cancers	5	7.35	0.90	13.79

COMMUNITY ENGAGEMENT FORUM

SWOT - Strengths

- * Locally-based
- * Closeness to community
- * Reputation
- * Stable Staffing
- * Commitment and loyalty of staff
- * Provision of Technology
- * Allied Health and services
- * Aged Care Services
- * Meals on Wheels

SWOT - Weakness

- * Staff recruitment
- * Parochialism / community expectations
- * Lack of understanding of the technology we have
- * Infrequency of Media Communication
- * Clear, simple language
- * More explanation of services available and how to access
- * Cost of service
- * How to access Dental Services
- * particularly Dental
- * Clinics – Voucher System.
- * Keeping Aged Care beds full with residents with high need (better funding)
- * Attracting and keeping good Allied Health staff

SWOT - Opportunities

- * Further provision of services in local media
- * After-hours Service (maybe repeat publication in a few months)
- * More teleconferencing
- * Medical consultations
- * To share expertise within EWHS to our communities
- * To become more community focused with more community involvement
- * Increase mental health services to communities
- * Formulate a process for mental health clients to tap into the services that they require
- * Drug/alcohol issues: educate older members of the community, they then will have the knowledge to speak to younger community members eg grandchildren
- * Showcase the services that EWHS provides
- * Advertise for professional staff highlight the benefits of living in a smaller community– lower cost of housing , good education for children, community spirit and support, sporting activities– offer assistance to relocate
- * Reconfiguration of services

SWOT - Threats

- * Financial viability
- * Staff recruitment
- * Bed closures or restructuring of services due to inability to staff
- * Funding from Friends (members getting older)
- * Aging population
- * Local knowledge in community reducing due to change in populations
- * Changes in Government
- * Not trading with local Contractors
- * Community to understand how difficult to keep doors open so they can sell to Politicians
- * Decrease in services from other entities in health (eg: community transport – Buloke)

SERVICE DELIVERY

- * Strategic Goals

Services optimise the health needs of the community

- * Objectives

RELATIONSHIPS

- * Strategic Goals
 - * To be actively engaged with stakeholders
- * Objectives

SUSTAINABILITY

- * Strategic Goals
 - * Ensure the longevity of the health service
- * Objectives

QUALITY AND SAFETY

- * Strategic Goals
 - * Consumers receive service and others work/visit without experiencing preventable harm
- * Objectives



Thankyou