Quality of Care

BARWON HEALTH

ANNUAL COMMUNITY MAGAZINE | ISSUED JANUARY 2008





Welcome to our Quality of Care Magazine



Sue De Pito Sue De Gilio - Chief Executive



Quality is a fundamental and primary goal in the delivery of services provided by Barwon Health, Quality protects individual patients. clients, residents and our local communities. It protects individual clinicians, our care teams and non-clinical staff. It also protects the organisation and, in doing so, protects both the reputation and the financial well being of our entire health community.

We value achievements in improving care and recognise that many innovations originate from individual staff of Barwon Health. This magazine is our way of showcasing these initiatives and the committed staff that are behind them.

On page 8 we take a closer look at the young carers at risk program that recently won a Victorian Public Healthcare Award. We also take a look at an Australian first approach to managing the risk of deep vein thrombosis and we even take you fishing with residents from John Robb House! You can also find out how Barwon Health is tracking on a number of key quality indicators such as infection prevention and medication management.

Following feedback received about last year's magazine, we have printed it on low-cost matt paper, reduced the size of photos and ensured the articles continue to be easy to read. We have also ensured that a feedback survey is included within the magazine. Be sure to complete the survey so you can be in the running for one of three free gym memberships from Contours.

We trust that you will enjoy reading about how Barwon Health is working for the health of our community and welcome any feedback you may have.

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www.barwonhealth.org.au

Disclaimer: This publication is intended as a general guide to the services provided by Barwon Health. It does not substitute for health advice from an individual's medical specialist, general practitioner or other health care provider

Helping 'clubfoot kids' without surgery

We often think that surgical methods are the best approach when it comes to medical care. But for children born with clubfoot, there is a non-surgical method of treatment available in Geelong Hospital's Outpatients Department that is more effective, less expensive and easier to provide than surgery.

Clubfoot causes the feet to turn inward and downward and must be treated because it does not correct itself. The cause is not known. but it can be passed down through families and is more prevalent amongst males. It occurs in about 1 out of 1,000 live births in Australia.

More than 50 years ago, Dr Ignacio Ponseti, realised that surgical approaches were not always successful. He set about developing the method that now bears his name. The Ponseti Method involves gentle, manual manipulation of the child's foot and application of plaster casts.



"It's such a relief to know that he doesn't have to go through major surgery."

Left: Jasmin Helmore and her son Khailan.

Tracey Prosser, second from left with the Geelong Clubfoot Support Group.



The casts are changed weekly after a clinician manipulates softened foot ligaments to gradually achieve near-normal muscle and bone alignment.

In 85% of cases, a procedure is then done in the Outpatient's Department to lengthen the heel cord to augment the casting. The foot is placed in a long leg cast for three weeks and then given a special orthopaedic device known as a Boot and Bar. The boot and bar is then worn by the child full time for the first three months and then at nap-time and night-time up to the age of four years old.

Orthopaedic Surgeon Richard Angliss travelled to the University of lowa and learnt the technique under the guidance of Dr Ignatio Ponseti. Richard also attended the first Australasian Ponseti Method Conference with Barwon Health's Senior Orthopaedic Technician, Tracey Prosser. The program began at Geelong Hospital with one patient in November 2005. Following Richard's training with Dr Ponseti, referrals came from the other specialists within the hospital and Western Victoria.

"It's fantastic that our community now has access to the Ponseti Method of treating clubfoot at Geelong Hospital. There is no need for people to travel the highway up to Melbourne where this type of treatment is available at The Royal Children's Hospital and Monash Medical Centre." said Tracev.

Geelong Hospital is now a recognised institution for treating children using the Ponseti Method. It has so far treated 24 children with the Ponseti Method who have come as far as Warrnambool and Ballarat.

The families of these children benefit from a Geelong Clubfoot Support Group which Tracey Prosser formed. It supports all parents of children with clubfoot and meets at regular intervals.

Jasmin Helmore has attended the group with her son Khailan and says, "Seeing other parents at appointments has been really helpful. We've been able to share information back and forth, and hear about other parent's experiences."

Jasmin is also glad that she has been able to pursue a non-surgical treatment of her son's clubfoot, "It's such a relief to know that he doesn't have to go through major surgery."

For more information about the Ponseti Method and Geelong Clubfoot Support Group, contact Tracey Prosser on 5226 7254.

Other innovative outpatients initiatives

In addition to the club foot project, there are a number of innovative programs Geelong Hospital's Outpatients Department has implemented to help our community receive medical attention more quickly:

• Osteoarthritis hip and knee service: provides a co-ordinated approach to referrals where a physiotherapist and orthopaedic outpatient lead nurse provide an initial assessment. It has shortened the time between patient referrals and initial outpatients appointments. The lead nurse is the patient's main contact person throughout their journey to surgery that they can call if they are having problems along the way.

• Urology clinical nurse co-ordinator: improves access to Urology services at Barwon Health, and involves liaising between Outpatients, Perioperative Unit, Waiting List, Theatre, the wards, and other specialty units. This leads to greater streamlining of the patient journey from initial referral to follow-up care. This has resulted in decreased waiting times for surgery and Outpatient appointments, and have a positive effect on patient outcomes.

For more information about these programs, contact Lisa Adair, Nurse Unit Manager on 5226 7254.

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Movember - Changing the face of Men's Health

A number of male Barwon Health staff became Movember participants known as Mo Bros. They grew and groomed their moustaches throughout November to raise as much money and awareness about male health issues as possible. Whichever way we look at it, men are far less healthy than women. The average life expectancy for men is five years less than for women because men lack awareness and don't take responsibility for the very real health issues they face.

The aim of Movember is to change these attitudes, make male health fun by putting the Mo back on the face of fashion and in the process raise some serious funds for key male health issues, including prostate cancer, heart disease and male depression.



Educating on chronic heart faliure

The Hospital Admission Risk Program (HARP) Chronic Heart Failure team have developed a DVD educational resource for people diagnosed with heart failure in acute and community settings.

It will be used in the cardiac ward of Geelong Hospital to promote the program and to familiarise staff and patients with the program. The DVD also encourages patients and their carers to attend the community exercise and carer support sessions.

"Education assists patients to know some basic concepts in relation to heart failure and what to expect when they come to groups. We have used real clients and tried to ensure that the DVD conveys that heart failure can affect people of any age," said Alistair McKinnon, Community Clinician. "Heart failure is a challenging condition to face and it's great to be able to give people as much information as possible in a DVD format."



For more information about the Chronic Heart Failure Program DVD, please contact Alistair McKinnon on 5260 3767.

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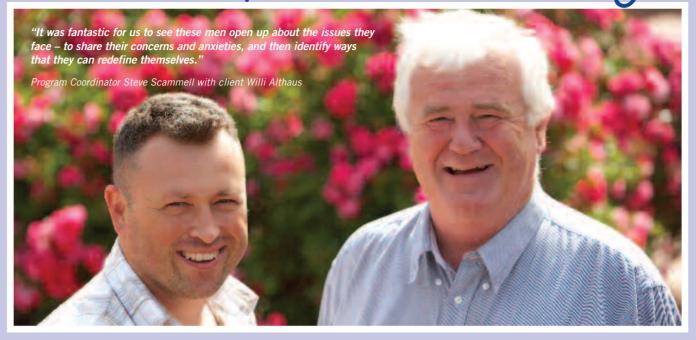
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Men face up to health challenges



We all know how difficult it can be to get men to go to their local doctor and have basic health check ups or to seek help when they are sick. Often men take a "she'll be right" approach to their health. You can only imagine how difficult it is to get men to face up to having a chronic disease like heart failure.

Barwon Health has helped men face up to their health challenges through a community-based pilot program called 'Finding Balance'. It aims to address the unmet psychological, quality of life and community linking needs of men who have become disengaged from their traditional roles because of the chronic nature of their disease.

"Often the effects of the disease have caused a shift from being the financial breadwinner in the family, to being unable to carry out the most basic, every day chores. 'Finding Balance' was developed to provide a social base for learning to cope with these changes, " said Steve Scammell, Registered Nurse and Program Coordinator.

The aims of the 'Finding Balance' group were to:

- Identify and engage men aged 30 to 60 years with chronic heart failure or chronic obstructive pulmonary disease in a safe and supportive closed group environment
- Address emotional grieving reactions to experiencing chronic
- "Normalise" clients common reactions to chronic diseases through group discussion around issues such as sexual dysfuntion, role changes, anxiety and depression and
- Link clients with appropriate community groups and services.

"These men often felt marginalised by the traditional medical system that addressed the physical symptoms of their disease but gave them no skills to deal with their disease emotionally and mentally," said Paul Thornton, Program Psychologist.

"They often feel a great sense of loss for their past life. They must redefine themselves in their families and communities and set new goals."

The program involved a two-hour session weekly for four weeks with men who had been displaced from their normal social and working context. The pilot group ran weekly at Belmont Community Health Centre in May 2007 with eight participants. Following the four-week program, the group met on a weekly basis until September. Plans are now underway for these men to become part of an ongoing support group.

"It was fantastic for us to see these men open up about the issues they face – to share their concerns and anxieties, and then identify ways that they can redefine themselves," said Steve.

"They set goals that enable them to feel valued and useful again. One man set himself the goal of making sure his wife had a cup of tea without her asking for one. This gave him immense satisfaction and also made his wife feel appreciated."

A mental health and wellbeing assessment tool was used before and after the 4-week program which found that all participants had a significant reduction in anxiety and depression. It is envisaged that the program will be offered again as it has met a need for a targeted approach to help men with chronic diseases.

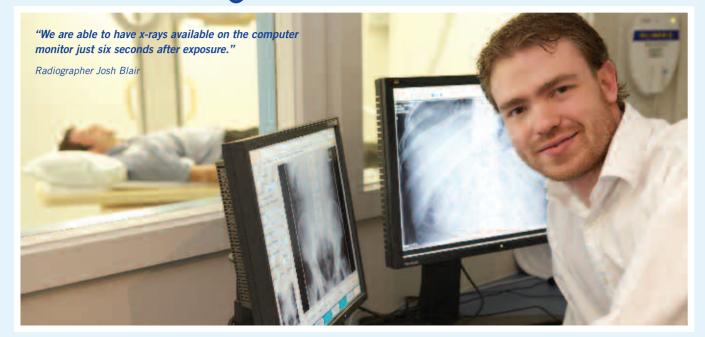
"We are keen to run another program because it had such a huge impact on the lives of these men. We literally had the participants lining up to shake our hands at the end of the program," said Steve.

There can be no doubt that this program has made men face up to their health challenges and helped to redefine their roles at home and in the community.

For more information about the 'Finding Balance' men's group, contact Steve Scammell or Paul Thornton on 5279 2539.

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Any x-ray image, anywhere, anytime...fast!



Have you ever experienced the frustration of having an x-ray taken and then waiting hours for the film to be developed and then assessed by a medical professional?

Barwon Health is well aware of this common frustration as it performs about 90,000 medical imaging examinations per year with a further 4,000 examinations performed in nuclear medicine. Barwon Medical Imaging provides its services at the Geelong Hospital, Geelong Private Hospital, the McKellar Centre and the Torquay Community Health Centre.

"X-ray films used to move frequently around Barwon Health and were very difficult to track and control. It often took a lot of time and effort to locate images and this could have a significant impact on the care of patients. The turn-around time for reports was significantly affected by films not being readily available," said Jeff Umbers, Acting Operations Manager of Barwon Medical Imaging.

With hard copy film, the film may only be in one place at any time and could only be viewed by a single clinician or radiologist at any one time. This was very limiting because often films are required on an ad-hoc basis throughout a patient's journey through the health system. For instance, they may be needed to determine the extent of an injury whilst a patient is in the Emergency Department but then also be required on an ongoing basis at follow-up appointments in the Outpatients Department.

Co-ordination of this mass movement of hard copy images throughout the health service in a timely and safe fashion whilst ensuring that films were not lost, was very difficult and expensive. In addition, with increasing management of patients by multi-disciplinary teams, the same set of films is often required urgently by several specialist doctors for the same patient, at the same time!

These challenges have been completely overcome through digital radiology. X-ray films are now part of medical history with medical professionals now able to access any medical image, anywhere, any time across Barwon Health.

Digital x-rays are part of the Picture Archive and Communication System (PACS) that is being rolled out across the state by the Victorian Government. It's essentially a computer system that acquires, stores and distributes medical images.

In order to roll out PACS within Barwon Health, two x-ray rooms were replaced with a state-of-the-art digital radiography (DR system).

"Through the new DR system, we are able to have x-rays available on the computer monitor in just six seconds after exposure! As you can imagine, this has significant impacts on patient access and turnaround time," said Philip Brough, Chief Radiographer.

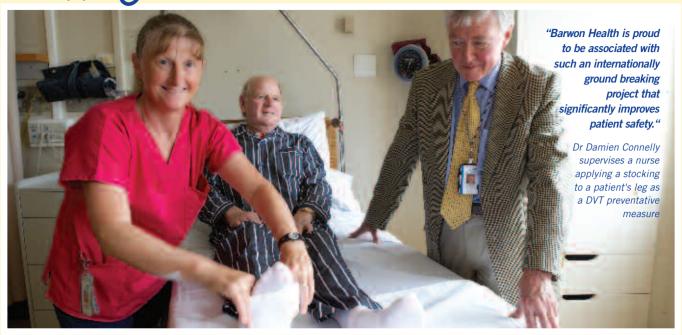
As a result of the installation of DR, Barwon Medical Imaging has received excellent feedback from referrers regarding the exceptional image quality and from patients regarding the speed of the service.

Digital radiology has been a great success on all levels – it has improved efficiency of staff across Barwon Health, improved reporting times for diagnostic examinations and saved considerable time and money printing, storing and distributing film around the health service.

The primary objectives of the PACS project have well and truly been achieved with "any image available anywhere, any time...fast."

For more information about the PACS project, contact Jeff Umbers on 5226 7228.

Stopping the clot



It is well known in our community that people are placed at a higher risk of developing blood clots or deep vein thrombosis (DVT) when flying long distances in airplanes. What is least well known, is that your chances of developing a blood clot in your legs or lungs is 100 times greater when you are hospitalised.

Deep vein thrombosis or venous thromboemobilsm (VTE) is a significant problem for some people who are hospitalised and can lead to serious illness and increased risk of death. The issue has recently been identified internationally as a standout opportunity to improve safety.

Barwon Health decided to tackle this issue with an organisation-wide commitment to the community to implement a system that routinely links VTE risk assessment with preventative guidelines for all its at risk patients.

"We set out on this journey in November 2005 with the National Institute of Clinical Studies and the Victorian Quality Council to reduce the risk of DVT developing in hospitalised patient," said Jo Bourke, Director of Governance, Barwon Health.

A VTE Prevention Steering Committee was formed that was made up of clinicians from across the organisation. They recognised very early on that the best way to maintain and sustain any initiative was to develop a simple electronic system. The system must also be able to collect, collate and store real time data to monitor workplace compliance to achieve its commitment to community safety.

"Extensive enquiries found that there were no other electronic risk assessments tools of its kind in operation in Australia. This meant that Barwon Health would be going it alone nationally," continued Jo.

The Committee had very clear objectives on what they wanted to achieve with the VTE risk assessment tool:

• To implement a routine risk assessment for all patients on admission

- To improve the use of best practise preventative measures for at risk patients during hospitalisation
- To introduce a hospital wide risk assessment tool
- To provide easily accessible guidelines for hospital medical officers
- To develop an electronic method to remind clinicians to assess patients for risk
- To implement an automated auditing and feedback mechanism to monitor clinical compliance and
- To develop a set of performance indicators and review schedule.

Marita Reed, VTE Project Officer, co-ordinated the steering committee who developed an electronic tool that met all these objectives. It is known as the PreVent Protocol and became fully operational in September 2006.

"Three weeks after implementation, computer generated alerts were activated for all patients who had not had a risk assessment completed via the online tool. This alert appeared when hospital medical staff accessed their unit's daily patient list," said Marita.

"The beauty of the system is its simplicity and high visibility making it effective in changing clinical behaviour. VTE prevention measures are now considered in the admission process. The PreVent program has increased staff compliance in the assessment of patients VTE risk status from 66% to 86% therefore markedley increasing patient safety."

Barwon Health is proud to be associated with such an internationally ground breaking project that significantly improves patient safety. The VTE prevention program is now being rolled-out across Australian hospitals.

For more information about the VTE prevention program, contact Jo Bourke on 5260 3184 or visit www.nhmrc.gov.au/nics.

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Caring for the carers



Young carers were once a hidden population in our community who were shouldered with big responsibilities with little support.

Fortunately this is no longer the case due to an innovative program offered through Barwon Health's Carer Respite and Carelink Centre.

They are now receiving the care and support they need through a young carers at risk program. It has helped about 60 young people aged under 25 in the Barwon region get some much needed time out from their caring responsibilities. The overall goal is to provide respite to people under the age of 25 who care for a family member or friend with a disability, mental illness, or someone who is aged.

"It can be very overwhelming for young carers to balance their roles at home and at school. It can have an impact on school work because they find it hard to focus," said Young Carer Project Worker, Mardy Tomkins.

There is a significant number of young carers in Victoria, who are susceptible to missing school frequently, are not able to complete homework, are often distracted when at school and experience limited connectedness with their school community.

"By giving kids a break from their role as a carer, they are able to achieve a better balance and put their experiences into perspective. And hopefully they will also have a better chance of staying in school and pursuing their dreams," said Mardy.

One young carer gave the following insight into their competing responsibilities:

"Being a young carer can be tough...I care for mum who has a mental illness. Trying to balance schoolwork with caring...

especially when mum is unwell and I have to look after my siblings too...which means getting them ready for school and at the same time I am providing emotional support to mum and reminding her to take her medication. The young carers at risk program has helped me realise that I'm not the only young carer out there and has helped me to meet other young carers....and most importantly has given me some time out."

Mardy as the Young Carer Project Worker identifies the respite needs of the young carer and then develops a care plan in consultation with the young carer. The care plan matches their respite needs with options such as Leisure Networks vouchers, in-home respite, a school camp, tutoring and movie tickets. After three months, Mardy then reviews each young carer to see how their respite is going and then provides further respite if needed.

"Each young carer has different needs so it's important that we provide a program that is flexible and individualised," said Mardy.

Another key strength of the program has been the interaction between the young carers. Through the peer support days that are held every three months, they are able to meet other young carers and enjoy a fun day out. Relationships between the young carers have also been enhanced through a newsletter they issue every three months.

"It's great to see the young carers supporting each other and getting the most out of the program. I find it really rewarding to help young carers get the support they need, whilst also giving them a much needed break."

For more information about the young carers at risk program, contact Barwon Health's Carer Respite and Carelink Centre on 5260 3501.

We are many cultures but one people



Aboriginal Health is a whole of Barwon Health approach to improving the unacceptable life expectancy and health burden experienced by Aboriginal and Torres Strait Islanders.

Barwon Health's Aboriginal Health Liaison Officer, Lyn McInnes participates in community development activities that enable Aboriginal people to feel comfortable with an identified General Practitioner. The strategy promotes early management of chronic diseases and reduces the need to present to the Emergency Department.

Other ways that Barwon Health nurtures the health of our Aboriginal community is:

- Being an active supporter in the development of the Aboriginal Controlled Health Service recently established in North Geelong.
- Ensuring staff provide services that are culturally sensitive to the needs of Aboriginal people.

- Monitoring presentations and admissions to hospital to ensure that the expertise and knowledge of Aboriginal workers in the community are well utilised in assessment, care planning, delivery and evaluation
- Discussing the care plan and discharge needs with the Aboriginal patient and staff via the Aboriginal Health Liaison Officer. The effectiveness of the discharge plan is evaluated through contact with the patient.
- Supporting well-developed discharge planning as part of the individualised cultural sensitivity advice provided to staff.
- Providing practical support to people who need to go to hospital or need to attend appointments via our Aboriginal Health Liaison Officer.

For more information about the Aboriginal Health Liaison Service, contact Lyn McInnes on 5226 7669.

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Nurturing the health of our new African communities



Geelong has a long, proud history of nurturing our new communities of international refugees who are seeking a better life in Australia. One of our fastest growing immigrant populations in Geelong are people from Africa who are escaping homelands ravaged by civil war.

Each country has a different way of managing health care and Africa is no exception. In fact Africa, has a completely different set of health issues to the ones we face here in Australia. This has required health services like Barwon Health to look at the way it nurtures the health of new African communities

"Over the past couple of years, we have been seeing more and more African families who have very different health needs to the general population," said Julie Heath, Clinical Nurse Consultant.

"In Africa for instance there are not the same levels of screenings for infectious diseases like tuberculosis and sexually transmitted diseases. There is also not the same vigorous approach to childhood immunisations.'

Barwon Health has responded by providing comprehensive health checks to African refugees and offers a streamlined service to the refugee community. It welcomes referrals from local GPs and other healthcare providers who may not be as experienced with refugee health needs.

"The refugee health clinic is in its very early stages but it's a great one-stop service for refugee families. We offer adult and children's services so the healthcare needs of the whole family can be managed in an integrated approach," said Dr Daniel O'Brien who helps provide the adult refugee service, together with Dr David Fuller who helps to provide the paediatric refugee service.

"We understand that it can be very daunting for these families to visit health services because they are not as common or may not be as trusted in Africa. It's important that families can receive high quality care in the one place so we minimise any fears or concerns they might have"

"The clinic was set up after we saw a number of children come through the hospital with previously uncommon conditions like tuberculosis and Vitamin D deficiencies." said Dr Fuller.

"These kids had missed out on comprehensive health screenings when they immigrated to Australia. Screening has now improved with a number of GPs now conducting comprehensive health screenings for

refugees. However, there is still a need to have a place for GPs to refer families when health problems are identified."

"The clinic is able to take a proactive approach to screening in those children who miss out. In talking with my colleagues it became clear there was a need for a collaborative approach to cover adults and children," said Dr Fuller,

The strength of having a refugee health clinic within a service like Barwon Health, is that it can get a number of sub-specialties working together on particular health issues with strong linkages between the hospital and community health services.

Barwon Health's Refugee Health Clinic is supported by Diversitat and the Multicultural Health & Support Service as part of a state-wide strategy to address the unique health needs of African communities in regional

The strategy aims to create better pathways for members of local African communities to receive testing and treatment for infectious diseases and to better understand infection prevention and treatment options.

For more information about the Refugee Health Clinic, contact Barwon Health's Infection Diseases Clinic on 5246 5117.

Listening to our community

The community health division of Barwon Health has run focus groups at all Community Health sites during 2007. This initiative has evolved from the "Friends of Barwon Health" groups that recognises the value of consumers, carers and community members contributions. Community members were asked about their opinion of accessing and using community health services, and new service developments.

Community members provided positive and negative feedback, and included an appreciation of the broad range of services available within each local centre and that care was holistic and person centred.

Discussion also revealed that further promotion of services available within community health services was needed, as were concerns about waiting times for services. The feedback will be used in developing service access areas including intake systems and care coordination.

The importance of community input into improvement of our services is highly regarded, and the Community Health Division is committed to ensuring that community opinion is included in service development. Plans are being made for ongoing community consultations during 2008.

Together we're building a better community.

Through the following community projects, Bend go Bank's team in Geelong is working with a range of parmers and the local community to ensure that Geelong remains a prosperdus place to live.

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- Community Enterprise** committees in Torquay, Bannockburn and Colac are generating money for their
- respective communities through banking and telog income steams.
- Godlong Community Enterprise™ has been steadily. growing, signing up businesses within the greater Geelong region and contributing profits to community projects.
- Newcomb. Whittington and Thomson communities are pleting their very own Youth Foundation in partnership with Geelong Community Enterprise 14. Together we are building a better community – and our foliare is indeed a bright one.

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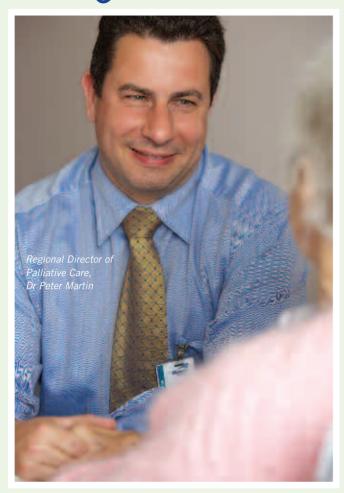
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Helping families realise they are not alone



Dying is not a topic that many of us like to think or talk about, let alone have to face when a loved one has a life threatening illness. It is very difficult and traumatic for family and friends to care for someone who is dying.

It's a time of enormous stress and uncertainty, and a time when carers often feel out of their depth and unprepared. Families often report a need for better preparation in making their relative comfortable and more assistance in meeting their needs.

Barwon Health has been involved in a ground-breaking project that provides families with an education program focused on preparing them for the role of supporting a relative or friend with advanced cancer at home.

"It is part of a collaborative project with the Centre for Palliative Care Education and Research and the Commonwealth Carer Respite Centre," said Jo Hall, Project Officer for the Barwon South Western Strengthening Palliative Care program.

"The project lead was St Vincent's Health and the University of Melbourne, under the leadership of Dr Peter Hudson. It sought to determine whether education programs are of value to families who are providing palliative care to a loved one."

Several pilot education programs have been run so far from June to November 2006 and from June to September 2007. Each program consisted of three consecutive 2.5 hour weekly sessions presented in a group format, with input from Barwon Health's palliative care team and the Commonwealth Carer Respite Centre.

There were three areas covered in the program:

- What is involved in being a palliative caregiver?
- Some of the common concerns and how to take care of the caregiver
- Caring for a dying person and bereavement

Caregivers were supported throughout the program with a guidebook written by Dr Peter Hudson "Supporting a person who needs palliative care: A Guide for Family and Friends". This book was the main point of reference and resource for caregivers and has been promoted nationally by Palliative Care Australia.

"We certainly found that the education program was a "lifeline" for caregivers who were going through extraordinary emotional turmoil. One lady who was caring for her dying husband had said that she could not have got through the experience without the course," said Jo.

Some comments made by carers include:

- "It has given me time to share experiences and learn about others in similar situations."
- "I am more confident in caring for my partner."
- "I know what is ahead in a general sense and this has prepared me so I don't feel I have to do it all alone."

"We were really pleased with the response to the program – it's the first time that a group education approach has been taken to palliative care," Jo said. "The strength of the program was that carers could share their stories and not feel so isolated."

Barwon Health's Palliative Care Service hopes to run this education program on an on-going basis so that other families who are caring for a relative that is dying, feel better prepared and less alone.

Barwon Health provides a comprehensive, multi-disciplinary approach to palliative care with a variety of services including an inpatient palliative care unit at McKellar Centre, a palliative care consultancy service at Geelong Hospital and a community palliative care service for the greater Geelong area. These services are well integrated with each other and are able to link patients to a range of other community and hospital based support teams.

For more information, contact Palliative Care at the McKellar Centre on 5279 2222.

Communication is the key



It is expected that people with a physical disability require access to building and services through ramps and lifts. But what is least understood is the need to ensure "access" for those with a communication difficulty that find it hard to navigate a complex health service.

Clear, accessible, written and spoken information about services is a requirement under the *Commonwealth Disability Discrimination Act*. Yet many health care providers have very little awareness of the barriers faced by those who struggle to read, write, talk and understand.

Barwon Health has tackled the issue head on by establishing a Communicative Access Care Improvement Group that ensures that the needs of people with communication disabilities are being met. By raising awareness, training staff, improving systems and providing input into how the physical environment is constructed, they ensure that people with a communication disability are central to their own healthcare.

The group works collaboratively and proactively to ensure all consumers can access the health information they need to communicate effectively with others and to participate more fully in their own health care. It is a multi-disciplinary practice improvement group made up of health staff, managers and consumers. Elizabeth Thomas is a consumer representative in the Group who has enjoyed the opportunity it has provided to improve the health care system.

"Too often people feel that they can't speak up and have their voice heard. This group has given me an opportunity to speak out which I find very empowering and energising," said Elizabeth.

"One of the projects I have contributed to, is the improved signage and maps at the McKellar Centre. People are now able to access the site much more easily through the visual cue of colour that has been used. We have also negotiated for better street signage on Ballarat Road which is a great outcome!"

Martin McCall-White is Barwon Health's Chief Speech Pathologist but is also the Chair of the Communicative Access Care Improvement Group. He shares Elizabeth's passion for making a difference.

"It's great to have Elizabeth on board with our Group because she provides us with very clear direction on what needs to be done to improve people's experience of our service." said Martin.

The Group regards communication as the key to quality health care. Many consumers have hearing loss, visual impairment, thinking difficulties, memory loss or communication difficulties relating to illness, disease or ageing. In addition, many people speak English as their second language.

"We are committed to ensuring that all consumers can readily access the information they need to communicate effectively with others, make decisions and participate more fully in their own healthcare," said Martin.

For more information about the Communicative Access Care Improvement Group, contact Martin McCall-White on 5279 2235. Suggestions for improving communicative access are most welcome and can be provided on the feedback survey on page 27.

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Giving the gift of good health



Not many seven year olds can say they've experienced the same injury as an AFL footballer. Little Thomas Barter is one such exception. On 10 January 2007, Thomas suffered a severe kidney laceration after falling from his bike. It was the same injury that almost cost Geelong Cat Tom Lonergan his life.

"Thomas had been visiting a friend in our street when he had his first ride home by himself" said Thomas' father Jon. "My partner, Carolyn was trying to give him a bit of independence so was watching from a distance as he rode up but when she checked back she discovered him on the ground next to his bike."

Thomas said he tried to get up and walk but he was in too much pain. "I stood up but then just fell back down. My insides hurt," the youngster said.

Thomas had been thrown over the handlebars, one of them stabbing him in his back and causing the internal damage. His mother had to carry him home because he wasn't able to walk himself.

"There wasn't a mark on him except for a grazed knee and all he wanted to do was lie down so we put him to bed. He got up a couple of hours later and began to vomit and there was blood in his urine. It was then we knew he really wasn't well," Jon explains.

Thomas' parents rushed him to the Geelong Hospital's Emergency Department where a team of doctors quickly identified the injury.

"At this stage he was in even more pain," Jon said. "Following Tom Lonergan's injury the doctors were pretty quick to identify what had happened to Thomas."

After arriving at the Emergency Department at 6pm and following a number of scans to confirm the diagnosis, Thomas was in a helicopter and on his way to the Royal Children's Hospital by 12:30 that evening.

The young boy spent two weeks in a serious condition with his father and pregnant mother by his side before he began to stabilise. It took four weeks before Thomas was able to leave hospital and finish his recovery at home. One week after returning home, his kidney started bleeding again requiring immediate surgical intervention and a further two weeks in hospital.

Thomas' experience is helping to launch the Barwon Health Foundation's new Geelong Hospital Appeal. The annual appeal, officially launched next month, will replace a number of smaller appeals previously run by the Foundation, rolling fundraising activities and campaigns into the one major call for support.

Barwon Health Foundation Executive Director Gavin Seidel is hoping that the new Appeal will strike a chord with the Geelong community.

"This is an opportunity for people within our region to give to a local cause and a local service that most people within our community will come to rely on at one stage or another," Gavin said.



The Geelong Hospital Annual Appeal will not only raise money for the Geelong Hospital but will also support the broader services of Barwon Health including the Andrew Love Cancer Centre, the McKellar Centre, Community and Mental Health units around the Geelong region plus many more.

Donors will be able to direct their money to a particular area if they wish or allow Barwon Health to use the money where it is needed most, currently the hospital's new Emergency Department.

Due for completion by the end of 2008, the exciting redevelopment is quickly coming to life with exterior works on the new building and the internal fit out well underway. The Foundation has been working to raise \$3.6 million to help complete the project to ensure the very best treatment for incoming patients. While the Geelong community has been generous in their donations to date, raising just over \$2 million, more help is needed to reach the target.

"At completion, the new Emergency Department will be a state of the art health facility," Gavin explains.

"It will have separate treatment and waiting areas for adults and children which means patients like Thomas and his family will no longer have to wait in the same environment as older patients."

Gavin is urging the community to consider giving to the Geelong Hospital Appeal and kicking its inaugural year off with a bang.

"We want the people of Geelong to feel a sense of pride in helping us to bring the new Emergency Department to life. We want them to take ownership of the new facility by making a donation and knowing that they've played a part."

Give the gift of good health and help save a life. Donate now to the Geelong Hospital Appeal by phoning 5260 3355 or donating at any Bendigo Bank branch.

Providing a voice for our community

Did you know that Barwon Health has a Community Engagement Committee? It provides a forum for communication between the Barwon Health Board of Directors, Chief Executive and the community. It seeks to ensure that Barwon Health engages with Barwon South West's diverse community in working with and meeting their health needs.

"The Board of Barwon Health takes the role of the Community
Engagement Committee very seriously. It is a great way for our community
to have a say on how their health service operates," said Claire Higgins,
Chair, Barwon Health.

Community members include Josephine Ciach, Clare Gray, Tony Jenkins, Stuarte Kerdel, Norma Kos, Ted Mankelow, Mark Randall, Lynne Shanahan and Noel Southern.

Upcoming projects for the Committee include:

 Development of maps for Geelong Hospital that effectively assist people to navigate the site.

- Implementation of a health promotion campaign in 2008 that involves the development of fact sheets around key health issues.
- Assisting in the monitoring and evaluation of Barwon Health's Community Engagement Plan.
- Assisting the Board of Directors and Chief Executive in their communication with Barwon Health's diverse community and consumers.
- Advising the Board and Chief Executive on consumer and community issues relevant to specific health service initiatives and services and
- Identifying and advising the Board and Chief Executive of priority areas and issues requiring consumer and community participation.

For more information about the Community Engagement Committee call 5226 7707.

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Monitoring the quality of your healthcare service

CLINICAL GOVERNANCE

Clinical governance is the primary means through which the Board discharges its statutory duty of quality care. The principles of clinical governance apply to all Barwon Health staff that provide or manage patient, client and resident care services and to all the staff that support our clinical teams. The provision of high quality, safe, patient-centred health care that is accountable, systematic and sustainable is the responsibility of every employee.

One of the ways we measure the quality of care we deliver is through being accredited by the Australian Council on Healthcare Standards (ACHS) Evaluation and Quality Improvement Program (EQuIP). The standards address the issues considered most important in providing quality and safe health care and allows us to measure our performance against other health services in Australia.

The EQuIP accreditation program focuses on continuous improvement and provides us with a framework to deliver care and services that meets the ACHS standards through a four year cycle of self assessment, organisational -wide survey and periodic review. An organisational – wide survey was completed in May 2007 and Barwon Health was once again awarded full accreditation in August 2007.

Barwon Health is particularly pleased to be awarded outstanding achievement for continuous improvement. The surveyors

"Barwon Health is committed to improving outcomes of care and service delivery and focuses on improving safety and continuous care and innovation by supporting staff in their efforts and providing clear direction from the Board and Executive. The breadth of multidisciplinary innovations throughout Barwon Health is rarely seen in such a large and complex health service.

The degree of documentation and evaluation is also not often seen in health services. Staff in all areas both clinical and non-clinical are involved in a wide range of improvements".

Barwon Health is also pleased to advise that all Residential Aged Care facilities have also been awarded full accreditation by the Aged Care Standards and Accreditation Agency.

CLINICAL SAFETY

Some of the ways staff improve the safety of the care provided to patients, clients and residents is through participation in state and or national patient safety initiatives and the ongoing reporting of and response to clinical incidents.

Safer Systems - Saving Lives program

The Safer Systems – Saving Lives program was a national initiative sponsored by the Victorian Department of Human Services. The project was based on a program developed by the Institute of Health Improvement in the United States of America.

The aim of the project was to introduce a new quality improvement methodology into Australian health services through the implementation of six interventions, proven to improve patient health outcomes. The interventions were:

- Preventing ventilator associated complications
- Preventing central venous catheter related infections
- Increasing the call rate for our medical emergency team
- Improving care for acute myocardial infarction
- Preventing adverse drug events.

Each intervention required the simultaneous implementation of a number of predetermined elements known as care bundles. Monthly audit were undertaken for each intervention and to the results were fed back to participating units, who then implemented a number of changes in care delivery processes.

Barwon Health achieved significant levels of improvement in all target areas. The ventilator complication and central venous line interventions both reached the 100% compliance rating. The rate of in hospital deaths indicated a 13.48% reduction compared to the twelve months prior to the project. Compliance with staff calling the Medical Emergency Team reached an all time high of 98.8%. The care provided to patients who present to our emergency department with a heart attack improved by 24% and reconciliation of patient medications improved by 37%.

INCIDENT REPORTING

The incident reporting program's aim is to build a culture of learning within Barwon Health to ensure a safer environment for patients. residents and clients by decreasing the occurrence of serious and frequently reported adverse events and incidents. The program promotes self reporting and encourages analysis of underlying causes and implementation of actions to address clinical safety

The continuing increase in incident reporting rates across Barwon Health is evidence of Barwon Health's focus on service improvement. There is a direct correlation between increased incident reporting and a reduction of incidents that result in serious outcomes across all areas of services Analysis of the 2006/07 data indicates an overall reduction of 52% in the rate of preventable adverse events.



Adverse event rate

% of reported incidents



The rate of incidents that resulted in serious harm by areas of service are given below:

- Barwon Health's adverse event rate for 2006/07 was 0.54% of all reported incidents compared to 1.12% in 2005/06 (51.78% reduction)
- Acute health services 1.20% of reported incidents compared to 1.56% in 2005/06 (23.07% reduction)
- Aged care services 0.19% of reported incidents compared to 0.23% in 2005/06 (17.39% reduction)
- Sub acute services was 0.09% of incidents compared to 0.12% in 2005/06 (25% reduction)
- There was one adverse event reported by mental health services
- There were no adverse events reported by community health services.

Acute Health	Death	Permanent Disability
2004/05	0.1%*	0.07%*
2005/06	0.05%*	0.01%*
2006/07	0.04%*	0.00%*

*% TOTAL CLINICAL INCIDENTS REPORTED



Experienced GP's available 8AM-midnight

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 - Digital Photography Lab

 Family Medicine Practices Nurses Physiotherapists

- Dietician 'Kafe Neon'

Compounding Pharmacist

Pathology collection on site

Pharmacy P5229 3539 Medical Practice P5229 5192 148 Myers Street, Geelong Fax: 5229 6090 Email: reception@msfm.com.au

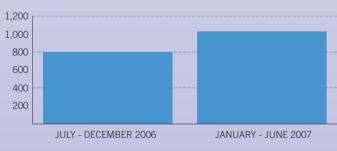
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MEDICATION SAFETY

In the first six months of 2007, the number of medication incident reports increased compared with the previous six months. While it is difficult to determine if there was a difference in the number of actual errors occurring, increased reporting by staff at Barwon Health highlights the value of a "no blame reporting policy" and increases the potential to learn from reports to reduce future errors.

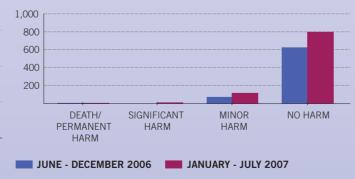
Number of medication incidents reported



There are very few errors with a serious impact on patients. Identifying less serious errors helps reduce the chance of more serious errors occurring, by identifying the problem areas in the service where system change can be introduced to prevent further errors.

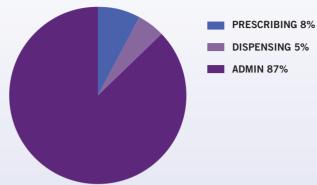
Incident severity rating

No. of medication incidents



The graph below shows the type of errors occurring during the course of prescribing, dispensing and administering medications. The most frequently reported medication incidents related to documentation errors on the medication chart.

Type of errors



Barwon Health's Medication Safety Committee is made up of pharmacists, doctors and nurses, who work together to improve medication safety. The committee reviews all medication incidents and in particular those associated with high risk drugs such as insulin and blood thinning agents.

Barwon Health has implemented a new national medical chart developed by the Australian Quality and Safety Council.

This new chart has built in safety features designed to reduce the risk of medication errors. The National Chart team is now working on a new insulin chart for documentation of insulin doses and blood sugar levels.

The Antithrombotic Management Committee is looking at improving safety with medications that can cause bleeding, by ensuring doctors and nurses have the most up-to-date and accurate information available to guide them.

Barwon Health's pharmacists have also been busy preventing medication errors by checking that the hospital doctors know what medications each patient was taking at the time they were admitted to the hospital. The Pharmacy Department has been able to promote a process of medication reconciliation where by a patient's pre-admission medication list is checked and confirmed with the most reliable sources, thereby reducing medication errors on admission through the Emergency Department or Peri-operative clinic.

The Pharmacy Department has also been working to improve transition of care when a patient is returning to a residential aged care facility. Barwon Health is now providing a medication chart for interim management until the resident can be seen by their normal general practitioner. This reduces the risk of old pre-admission orders being used when the medications may have been changed during the hospital stay.



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INFECTION CONTROL

Standard precautions

The basic infection control practices are referred to as standard precautions. All healthcare workers are required to wear protective attire when dealing with blood or body fluids. In addition we have introduced further precautionary signs which are colour coded. Visitors are instructed to report to a nurse prior to entering any area where additional precautions are being practiced. The nurse is then able to instruct the visitors on what is expected regarding hand hygiene and movement around the healthcare facility. If visitors are required to wear any protective attire the nurse will instruct them on how to apply masks, gowns or gloves.

This new approach to additional precautions has been modified for use in Barwon Health's aged care and rehabilitation facilities.

Hand hygiene

Hand hygeine is a must for everyone as it helps to prevent infections and prevent the spread of multi resistent organisms like MRSA and VRE. Infections are largely caused by the increasing and incorrect use of antibiotics in the community, which allow bacteria to build up a resistance. Many of these organisms exist naturally in the environment and healthy bodies are able to fight them. However, very ill patients and patients with weakened immune systems are more susceptible to infection. Alcohol hand rubs are now available at the entrances to wards and departments. Play your part at the bedside and use the hand rubs.



Vancomycin Resistant Enterococcus (VRE)

VRE are enterococci that have become resistant to an antibiotic called Vancomycin. Enterococci are bacteria normally found in the bowel and the female urinary tract. They are relatively harmless bacteria but are able to cause urinary tract infections and other infections. VRE is in all hospitals from time to time.

People in the community can carry VRE, and in any one year Barwon Health will find some people carrying VRE as a result of screening processes. In March 2007, Barwon Health was involved in managing a VRE outbreak at Geelong Hospital. Patients were clustered into one area to prevent further transmission and special cleaning teams were implemented. The outbreak was effectively managed with all infections eradicated from the Intensive Care Unit. The graph below shows a spike when the outbreak occurred followed by a rapid decrease as the outbreak was controlled.

VRE cases in 2007

No. of cases per month

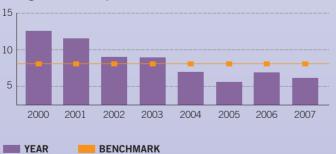


Methicillin Resistant Staphylococcus aureus (MRSA)

MRSA is another multi resistant organism that is closely monitored. It is more of a concern at the acute site. The graph below shows that Geelong Hospital's rate of newly acquired MRSA has remained below the internal benchmark for the last four years. This is largely due to the alcohol hand rub that was introduced to each bed unit during 2004.

Monthly average of newly acquired MRSA colonisations and infections at the Geelong Hospital

Average no. of cases per month

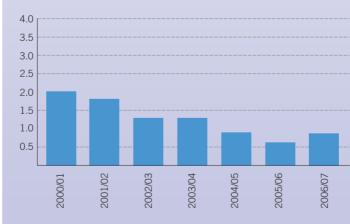




FALLS MONITORING AND PREVENTION

Falls and fall related injuries are a national and statewide health priority area. At Geelong Hospital, there has been a slight increase in the falls rate for 2006/07 and the percentage of falls that result in no or trivial injury has dropped a little from 90% for 2005/06 to 87% for 2006/07.

Falls per 1,000 bed days for Geelong Hospital

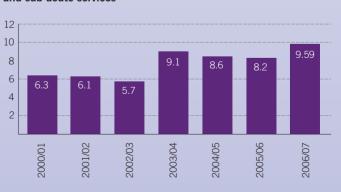


The increased falls rate is largely a reflection of the significant increase in neurology and general medicine patients who suffer the highest levels of disability including cognitive impairment.

Barwon Health will continue to audit falls in order to minimise their occurrence and reduce their impact. Geelong Hospital is seeking to minimise falls through:

- Additional electronic bed alarms for mentally impaired patients who have impaired mobility
- Improved identification of cognitively impaired patients
- Additional Lift Care beds to accommodate those patients who cannot be prevented from falling
- Continuous observation of patients who are at very high risk, with close monitoring of new risk areas.

Falls per 1,000 bed days for residential aged care and sub-acute services



At Barwon Health's residential aged care and sub-acute services, the overall falls rate per 1,000 bed days was 9.59. The benchmark for this period was established at 10 falls per 1,000 beds days, based on consideration and comparison with like services.

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PRESSURE ULCER PREVENTION

Pressure ulcers impact on quality of life of patients and increase the costs of patient care, as well as length of hospital stay. The most notable feature of pressure ulcers is that most are preventable. Barwon Health has a Pressure Ulcer Prevention Working Group who monitor and prevent pressure ulcers acquired whilst in hospital.

Acquired pressure ulcer rate

% of admission

No. of pressure ulcers



The acquired prevalence rate has been under 1% of patient admissions for the last three quarters, as indicated in the first graph.

Ulcers are classified according to stages with stage 1 representing a minor ulcer and stage 4 representing a severe ulcer. The severity of the pressure ulcers remains low. There have been no Stage 4 pressure ulcers since the December 2005 guarter and there has been no stage 3 pressure ulcers in the last quarter. The majority of pressure ulcers are stage 1 which is a pleasing result. Barwon Health has been able to prevent pressure ulcers through the introduction of pressure relieving mattresses.

Acquired pressure ulcers by stage

No. of pressure ulcers



COMMUNITY FEEDBACK

In 2006/07. Barwon Health recorded 581 consumer reported incidents to the Consumer Liaison Office. This is an increase of 136, or 33% over the previous year's figure of 445. It is seen as a positive result as it reflects our efforts to increase awareness within the community that Barwon Health does have a pathway in place for our consumers who wish to discuss their experiences in relation to the care they received within Barwon Health's services.

Barwon Health views complaints and feedback from the community as important in relation to the opportunity this provides to review and improve health care. It wants to hear about the experiences of patients, especially those that may bring about improvements to the way in which health care is provided to our community. We all have an expectation that health care will be safe, appropriate and effective, and usually this is the experience for our community.

However, Barwon Health understands that sometimes things may not work out as expected and if this happens, it encourages patients and families to tell them about it. By doing this, Barwon Health is able to provide assistance to patients and their families to resolve their concerns in relation to the health care they have received.

Barwon Health's experience is that almost all the people who lodge concerns through the Consumer Liaison Office are happy that they have been given an opportunity to be heard, and in most cases the additional explanation and information they are provided with brings about a satisfactory outcome.

Through the Consumer Liaison Office, Barwon Health also gathers many of the compliments letters and cards received by the various departments and units from patients and their families expressing their gratitude for the health care they have received. Barwon Health is always delighted to receive this positive feedback which acknowledges its commitment by staff to caring for our community.

Barwon Health's Consumer Liaison can be contacted on:

Phone: 5226 7986

Email: clo@barwonhealth.org.au Address: Consumer Liaison Officer Quality Unit, Barwon Health PO Box 281 Geelong Vic 3220





to provide quality pathology to the





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How to contact Barwon Health

HOSPITAL SERVICES		Day programs	
GEELONG HOSPITAL - Bellerine Street, Geelong	7	Anglesea - McMillan Street	5260 3905
General enquiries 5226 7111		Belmont - Settlement Road	5241 3800
Emergency Department	5226 7564	Torquay - 100 Surfcoast Highway	5260 3910
Admissions	5226 7616	Dental	
Andrew Love Cancer Centre	5226 7644	Corio	5260 3827
Barwon Medical Imaging	5226 7559	Newcomb	5260 3540
Barwon Paediatric Bereavement Program	5226 7269	Belmont	5260 3710
Baxter Maternity Services	5226 7511	Delinont	3200 37 10
Consumer Liaison	5226 7986	District Nursing	
Dialysis Unit	5226 7921	Corio	5260 3814
Geelong Cardiology	5226 7263	Newcomb	5260 3516
Gretta Volum Centre	5226 7790	Belmont	5260 3635
Hospital in the Home	5260 3999	Family Planning	
Outpatients Department	5226 7254	Corio	5260 3800
Perioperative Unit	5226 7048	Newcomb	5260 3333
Pregnancy Advice	5226 7525	Home Referral Service	5260 3333
Aboriginal Health	5226 7669	Immunisation Service- 59a Sydney	5200 5999
Social Work Department	5226 7525	Parade, Geelong	5221 9882
· · · · · · · · · · · · · · · · · · ·		Paediatric & Adolescent Support -	
AGED CARE AND REHABILITATION SERVICES		59 Sydney Parade, Geelong	5226 7198
MCKELLAR CENTRE - 45-95 Ballarat Road, Nth	n Geelong	Community Palliative Care	5260 3333
General enquiries	5279 2222		
Blakiston Lodge	5279 2341	MENTAL HEALTH SERVICES	
Wallace Lodge	5279 2761	Swanston Centre	5226 7410
Inpatient Rehabilitation Centre	5279 2222	24 hour crisis line	5226 7410
Community Rehabilitation Centre	5279 2239	Aged Care Psychiatry	5226 7044
Barwon Regional Aged Care		Community Mental Health Teams	
Assessment Team	5279 2246	Corio	5260 3855
Belmont Community Rehabilitation Centre -		Surfcoast	5260 3928
120 Settlement Road, Belmont	5260 3290	Bellarine	5226 7481
John Robb House	{ 5244 3203		5260 3700
Colac Grove, Belmont	l 5244 3387	Geelong West Clinic	
Peter Street Facility - Peter Street, Grovedale	5243 9656	Colac Clinic - 13 Dennis Street	5260 3260
Opportunity Shop -	3243 3030	Child Mental Health Service	5226 7075
9 Minerva Road, Herne Hill	5222 6179	Community Rehabilitation Facility - Barwon Heads Road, Belmont	5241 2399
COMMUNITY HEALTH CENTRES & SERVICES		Drug and Alcohol Services - 40 Little Malop Street, Geelong	5273 4000
ANGLESEA - McMillan Street	5260 3901	Mobile Needle and Syringe (Freecall)	1800 196 850
BELMONT - 1-17 Reynolds Road	5260 3778	Jigsaw Young Persons Health Service	
CORIO - 2 Gellibrand Street	5260 3800	Children of Parents with a Mental Illness	5279 2754 5222 6911
NEWCOMB - 104-108 Bellarine Highway	5260 3333		
TORQUAY - 100 Surfcoast Highway	5260 3333	BARWON HEALTH FOUNDATION	5260 3355
Hospital Admission Risk Program (HARP)	5279 2539		
Commonwealth Respite & Carelink Centre Advance Care Planning	5260 3501		
AUVAILLE CATE FIAIIIIII	5226 7006	www.barwon	

What did you think of this magazine?

We invite you to comment on Barwon Health's Quality of Care Magazine so that we can continue to improve and meet your needs.

By returning this questionnaire to us, you go into the running to win one of three Contours Gym memberships* – these are great for you and are also a great gift idea for a loved one. Simply return this questionnaire by 29 February 2008. All winners will be notified by telephone.

Was the QC magazine easy to understand?	
☐ Yes ☐ No	
Comment:	
Did you like the magazine format?	
☐ Yes ☐ No	
Comment:	
Did you like the QC magazine being distributed inside the Geelong News/Echo?	
☐ Yes ☐ No	
Comment:	
Discourate the avecamentian of the OC magnetics	
Please rate the presentation of the QC magazine:	
Excellent Very Good Good Poor Very poor	
The report gave me a better understanding about the healthcare services Barwon Health provides:	
☐ Strongly agree ☐ Mostly agree ☐ Not sure ☐ Disagree ☐ Strongly disagree	
Do you want more information on any topic in this report?	
☐ Yes ☐ No	
If yes, topic requested:	
Name:	
Address:	
Email:	
How would you improve the magazine?	
Are you interested in being part of a community committee that is committed to improving Barwon Health's services?	
Yes No	
Other comments:	
Please remember to include your name and telephone number to be eligible to win one of three Contours gym memberships.*Memberships are for three material Post to Communications & Marketing Department - Barwon Health PO Box 281 GEELONG VIC 3220 or fax to 03 5226 7672	nonths.
Thank you for your time	

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