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Introduction

It is with pleasure that we present the Tallangatta Health Service (THS) Quality of Care Report for 2011 – 12. This report is produced each year in conjunction with our Annual Report. Whilst the Annual Report focuses on the financial areas of our service, this report provides us with an opportunity to showcase the many services that we provide and highlight some of the numerous improvements that we have made throughout the year that enhance patient care and safety.

Tallangatta Health Service is a small rural health service providing a broad range of services to a wide range of people in our community.

We hope that the community, our patients, residents, clients, carers, volunteers and staff find the contents informative and interesting. A multidisciplinary team met to develop this community report.

The report covers services provided by THS from residential aged care, acute services, community based health promotion to our organisational support services.

The report is made available to all residents, patients, families, carers and visitors to our facility. Copies are distributed to our Board of Management, Auxiliary and key personnel within our organisation.

Our Community

Tallangatta Health Service provides services to the communities and people of the Bellbridge, Bethanga, Dartmouth, Eskdale, Granya, Mitta Mitta and Tallangatta and all areas in between which makes up part of the Western Region of the Towong Shire in the North East of Victoria.

The Tallangatta township is situated on the banks of the Lake Hume.

Distribution

The Quality of Care Report is distributed at our Annual General Meeting, throughout the organisation including the Medical Clinic and public offices of Tallangatta. It can also be found at the THS website www.tallangattahealthservice.com.au or by contacting administration 02 6071 5200
Vision Mission and Values

OUR VISION

To Excel as a Rural Community Health Provider.

OUR MISSION

To Provide High Quality and Effective Health Services.

STRATEGIC ASPIRATIONS

1. Make The Greatest Possible Impact On Our Community’s Health
2. To Achieve Continual Financial Viability
3. To Develop And Utilise Partnerships That Add Value To Our Efforts
4. To Develop Strong Operational Practices Throughout The Organisation
5. Build A Workplace For The Future

OUR VALUES

- Willingly Being Accountable
- Valuing People
- Achieving Results Through Teamwork
- Integrity In All We Do
- Respect For Others At All Times
Community Profile

The Australian Bureau of Statistics (ABS) reports the estimated resident population of the Towong Shire in 2011 was 5,891 – 2,976 males and 2,915 females. The median age is 47 compared to the Victorian median age of 37. The highest proportion of the population, 44.2% is aged between 35-64 years with 21.7% of the population aged 65 years or more. It is predicted that persons aged 65 years or more will increase to 27.4% in 2016, this is compared to 15.9% for the state of Victoria.

Primarily 93% of the population is of English speaking background born either in Australia, England, Scotland or New Zealand with 96.1% of people reporting they only speak English at home. Other languages spoken at home include German 0.5%, Italian 0.2%, French 0.1%, Spanish and Polish 0.1% (ABS, 2011). During 2011 – 2012 there were no admissions to the health service/residential aged care that required an interpreter service.

Towong Shire is socio-economically disadvantaged with the median weekly household of $850/week compared to Victorian households of $1216/week (ABS, 2011). The economy of the shire is based around primary production, particularly agriculture and forestry (Department of Planning and Community Development, State Government Victoria).

Tallangatta Health Service (THS) is one of the larger employees within the local community with 150 staff members a Full Time Equivalent of 87 as at 30 June 2012.

Improving Care for Aboriginal and Torres Strait Islanders

The 2011 Census data reveals 1.4% of the population has identified themselves as being an Aboriginal or Torres Strait Islander. During 2011 – 2012 there were no patients/aged care residents admitted to THS who identified themselves in this group; however, nine Medical Centre clients did identify themselves as an Aboriginal or Torres Strait Islander.

Our Service

Tallangatta Hospital and Tallangatta & District Extended Care Centre Inc. merged as one organisation in July 1997 to be renamed as the Tallangatta Health Service. This resulted in the integration of Bolga Court Hostel into the management structure of the health service.

Tallangatta Health Service (THS) has 66 registered beds – acute/sub-acute and residential aged care comprising of 15 state funded acute care beds and 51 Residential Aged Care Beds. The acute care beds are utilised for:

- General/sub-acute care
- Medical care
- Post-surgical care
- Respite care
- Palliative care
- Transition Care Program
Residential Aged Care

Lakeview Nursing Home is a 15 bed fully accredited facility providing high level residential aged care and respite care services.

Bolga Court is a 36 bed fully accredited facility providing low and high level residential aged care and respite care.

Adapting Bolga Court to the Changing Needs of Our Community

Tallangatta Health committed four hundred thousand dollars to upgrade the facilities of Bolga Court.

Bolga Court had been experiencing an ever decreasing demand for its Low Care beds and it reached an extremely low occupancy rate of 18 beds out of 36 in August 2011. The decision was made to undertake significant modifications to two of the Bolga modules to allow for the safe care of high care Residents. This will enable both Ageing in Place as well as the admission of future high care Residents.

The modifications included extension and upgrade of the bathrooms, security systems and fencing and the installation of new medication cupboards and pan rooms. Also, to meet the care needs of the clients, the facility purchased new beds and lifting devices.

The modules were filled by Residents within a week of the completion of the upgrades. Tallangatta Health opened the upgraded modules for a community tour during the Tallangatta Open Day held in March 2012.
Staff Health and Safety

What is Occupational Health Safety & Environment?

The Occupational Health Safety and Environment (OHS&E) Program at Tallangatta Health Service (THS) is designed to provide a safe working environment for all staff and volunteers whilst promoting a positive health and safety culture within THS.

What is the OHS&E program?

The program is about:

- Eliminating hazards and reducing risks to staff, volunteers and visitors through safety audits, risk assessments, training and education
- Reporting staff incidents and hazards, monitoring and reviewing through continuous improvements
- Education and training for staff which may include:
  - Fire extinguisher training
  - Patient No-lift training
  - Manual Handling training
  - Chemical Handling education

Improvements in 2011 - 12

- Replacements of floor coverings to aid in the wheeling of equipment
- Occupational Therapy audit of all patient/resident equipment to ensure in working order
- Development of workplace safety inspections of all areas
- Purchase of motorised food cart to facilitate meals delivery
- Training of two staff members in OHS&E – completion of 5 day course
- Improved linen storage in Bolga Court
- Installation of a new nurse phone system for staff security and resident safety

For the future

- Further staff to attend OH&S training courses
- Improved management & access of Safety Data Sheets of chemicals stored onsite

<table>
<thead>
<tr>
<th>Workplace Safety Inspection Forms are used to assess areas of risk within THS. Hazards are assessed under 5 identified hazard types.</th>
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<td>Passages/exits</td>
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Feedback Management – Compliments and Complaints

Tallangatta Health Service (THS) endeavours to improve the services that it provides by listening carefully to the feedback that is provided by patients, residents, staff, volunteers, and visitors. THS aims to support those who provide feedback by being fair and responsive. Consumers have access to feedback forms which are located throughout our facility (for example at the front office and at the bed side) & reminders about the process are placed regularly in staff and residents’ newsletters and discussed at staff and resident, family, and friends meetings. Patients, residents and carers are encouraged to discuss any concerns regarding their clinical care with their treating Doctor.

In 2011 – 2012 THS received a total of 22 complaints. Of these complaints all were answered within 30 days. There were 43 compliments received.

![Graph of THS feedback 2011-2012](image)

**Improvements in 2011 – 2012**

- Feedback form receptacle placed in Bolga Court entry
- Review & amendments to the Comments, Compliments & Complaints Policy
- Feedback reminder in staff newsletters, Residents and Friends newsletters (Friday Facts and News with a View)
- Review of the Respite Resident Survey form
- Feedback – Compliments and Complaints – Register updated to include closed by date and actions
- Review of patient information bedside booklet

All feedback is responded to and reported back through the Quality Committee.

**For the Future**

- Review of employee handbook to include information on the feedback – compliments and complaints process
- Staff education in relation to Feedback – compliments and complaint process
- To continue to monitor post discharge telephone calls to patients
**Acute Patients Post Discharge Telephone Calls**

These phone calls are made to all patients who are discharged from the acute ward by a Registered Nurse 3 - 5 days after discharge. Questions relate to a broad range of areas and includes those regarding their preparedness for discharge, their satisfaction with the discharge process and any support services that have been arranged (such as District Nursing Services, Meals on Wheels), comfort and pain management at home and if there has been any need to contact their Doctor regarding their care (that was not planned prior to discharge).

**Internal Residential Satisfaction Survey Results – September 2011**

Tallangatta Health Service (THS) undertakes an annual internal residential satisfaction survey of all residents or their representatives which provides them with other opportunities to provide feedback to THS so that we may continue to improve the services and care provided.

The return rate for the survey in 2011 was 62%. The invaluable information that our residents provided us with has led to further opportunities to improve including:

- Meal reviews & implementation of morning tea
- Updates to the Residents’ Handbook to include further information on Rights & Responsibilities
- Information around clergy and religious services for THS residents

Tallangatta Health Service (THS) participates in the Victorian Patient Satisfaction Monitor (VPSM) program which is a state wide patient satisfaction survey for acute care patients. The VPSM survey is conducted by an independent company which compiles all results, comparing results with similar sized health services. Reports are available six monthly, although we are able to access data monthly for more timely and meaningful reviews. As there have been low numbers of discharges from THS we have been unable to obtain statistical results for July 2011 – June 2012 that would provide adequate comparable data.

Included are some verbatim comments we have received to the following questions:

<table>
<thead>
<tr>
<th>What was the best thing about your stay in hospital?</th>
<th>What were the worst things about your stay in hospital?</th>
<th>What could the hospital do to improve the care and services it provides to better meet the needs of the patients?</th>
</tr>
</thead>
<tbody>
<tr>
<td>The friendliness and kindness of the staff</td>
<td>Length of stay and distance from home</td>
<td>More interesting soup and sandwiches</td>
</tr>
<tr>
<td>Helpful staff who take a very active interest in overall wellbeing</td>
<td>Nothing, best place for me</td>
<td>Physiotherapy department review.</td>
</tr>
<tr>
<td>Being well looked after</td>
<td>There was nothing bad at all</td>
<td>Great service – no complaints</td>
</tr>
</tbody>
</table>

These comments have been forwarded to the relevant departments and where applicable reviews and actions are implemented.
Anne Smith – Outstanding Achievement Award Finalist 2012 Aged and Community Care Victoria (ACCV) Awards.
Anne Smith

- Winner, Minister for Health Volunteer of the Year, Small Rural Health Services
- ACCV Volunteer Outstanding Achievement Award Finalist

Anne Smith is a caring dedicated lady who has volunteered many regular hours to Tallangatta Health Service (THS) over the last 25 years through the delivery of Cosmetic Care. Anne has coordinated the team since 1998; her passion for her work drives her to continually recruit members from the township and the local area to become volunteers, ensuring that the service is provided every week.

Each Monday morning Anne, and others who accompany her, give hand massages and apply hand cream and nail polish to the permanent residents and acute patients of the Health Service. As well as providing a practical service, the team brightens the days of many of the elder community through their visits and their bright and cheery nature. Anne has been a resident of the local area all of her life and knows most of those who reside at Tallangatta Health Service. Even with the residents who don’t require any cosmetic care, Anne will take the time to engage with them through her positive outlook and conversation.

The Cosmetic Care team first began in Tallangatta in 1987 with Anne Smith as a member. Even in times when there have been low numbers, Anne has been instrumental in being a driving force to ensure that Cosmetic Care is delivered every Monday morning. Anne is passionate about her commitment from which she gains much enjoyment.

THS values any contribution to their patients and residents that is made by community members. It is vital for the residents who are in permanent care to have involvement with the outside community and this is actively encouraged.

Anne brings community spirit with her during visits with conversation and news of the local area and its people. She is active in many other groups and organisations and brings her enthusiasm for life to the organisation.

Through the sensory experience of hand massage, Anne and her team are able to connect in a way that is often lacking in the lives of many who do not receive close and personal contact.

Regular Cosmetic Care is not only practical, but it provides a broader social activity to residents and clients beyond what the nursing staff can always provide. Through the provision of cosmetic care, nurses are able to focus their time on other activities, thus resulting in more time given to the benefit of patients/residents in the long run.

Through Anne’s weekly visits, she has extended her service to provide care, companionship, and true friendship. Many long term relationships have developed over the years with people who have no-one else in their world. Anne has been a true friend and a willing listener to many, providing a non-judgemental ear whilst being sensitive to the changing needs of those concerned.
Health Promotion

My Health, My Life - Lifestyle Health Workshop

The “My Health, My Life” Program is a four week program that has been developed to encourage and support people with chronic conditions to independently lead a lifestyle that optimises their health potential. This course that supports personal self-management is being run by staff members from Tallangatta Health Service (THS) who have been trained in supporting people diagnosed with a chronic disease.

Health conditions that fit the criteria for this course may include:

- Diabetes
- Heart failure
- Kidney failure
- Parkinson’s disease
- Emphysema
- Arthritis
- Obesity
- Other significant conditions

The course aims to motivate and inform people about strategies to ensure that they stay on top of their condition and gives them time to practice strategies within a friendly group environment over the four sessions.

Some of these strategies include being able to identify individual symptoms and manage them, knowing when to seek medical advice and being able to get the most out of their doctor’s visit. Other important aspects are setting achievable goals that provide an individual with more independence and dealing with obstacles that prevent individuals achieving their goals.

For the program to be a personal success participants need to make a commitment to attend all sessions and to be involved, as each session provides an insight into the self-management of chronic illness using new information.

Throughout 2011 - 2012 there have been two programs with nine participants. Pre and post program evaluations are attended by participants, with many identifying marked improvements including:

- Exercising regularly
- Seeing exercise as an important part of the day
- Enjoying healthy eating and only eating junk food occasionally
The Towong / Albury Wodonga Health Collaborative

2012 Graduate Nurse Program

Recruitment and retention of registered nurses together with an ageing workforce are significant issues for rural Australia. Very few smaller rural health agencies are able to offer a graduate program for numerous reasons, such as funding, opportunities for professional development and diversity of experience. These issues have been addressed with the Victorian Department of Health Nursing and Midwifery Policy branch offering funding to rural and regional health services to establish a collaborative Early Graduate Program for Bachelor/Masters of Nursing graduates entering the workforce from 2012.

The grant provided the opportunity to form a collaborative between Albury-Wodonga Health, Tallangatta Health Service (THS) and Upper Murray Health & Community Services (UMH&CS), to assist with the development, implementation and evaluation of a nurse graduate collaborative program within the subregion, to be delivered in 2012 and conducted at least twice over the next two years.

THS and UMH&CS are typical small rural health services experiencing difficulties providing a graduate program, recruiting nurses and supporting the changing needs of an ageing workforce. They have partnered with Albury-Wodonga Health Service to provide a unique rural graduate program. This can be attributed to the scope and diversity of rural nursing practice that results in differences in the level of responsibility and skill when compared with metropolitan nursing practice. For example, many rural health services are without a medical officer on weekends and after hours, requiring nurses to be skilled in first line emergency care. This provides the graduate with experience in health assessment, emergency care including stabilisation and transfer to a trauma care facility. It is hoped that the Towong/Albury Wodonga Health Graduate Nurse Program will assist in recruitment and retention of skilled Registered Nurses and the regional workforce will be strengthened.

Pictured in the foreground is Graduate Nurse Rhiannon Anthony during a practical education session “Unplanned Labour Presentations”.

11
Education

Aged Care Standards and Accreditation Agency Training

In December 2011 Tallangatta Health Service (THS) provided the venue for Aged Care Training where eleven key personnel from THS along with nine staff from three other Aged Care Facilities in the region attended a three day course. The course is designed to provide a comprehensive understanding of the accreditation process, audit principles and methods to help critically assess and improve the service delivery within our facility.

Whilst this course not only provided invaluable information to the attendees, especially THS staff who at that time were preparing THS for reaccreditation, it also gave four Residential Aged Care facilities the opportunity to network and share learnings. All participants either strongly agreed or agreed that the information was adequate and relevant.

Feedback from the training:

- Excellent learning opportunity
- Great sessions
- Informative and useful to our work practices

Staff members attending accreditation training:

Back row (standing) Left to Right – Debbie Cullen, Lenore Rhodes, Leslie Smith, Helen May, Gillian O’Brien, Leanne Gale.
Front row (seated) Left to Right – Linda Todhunter, Julie Carroll, Robyn Gillis, Libby Pieper.
To ensure that Tallangatta Health Service (THS) maintains a standard of safe and high quality care, opportunities for education and training are provided to our staff.

In January 2012 we asked our clinical care staff where they felt they would like further opportunities of learning and the specific topics that were identified were:

- Palliative care
- Wound management
- Incident management
- Dementia care
- Documentation management – especially with the software program utilised for our Aged Care Residents

Whilst these have provided us with education areas to focus on they are not the only topics of education provided to THS staff.

For the Future

- Needs analysis of non-clinical staff
- Continue to provide training & education to identified needs
- Hotel services staff training on fluid consistencies

Community Participation

District Nursing

Our District Nurse team is comprised of highly qualified registered nurses devoted to the care of community members of the Towong Shire. They visit all areas including Dartmouth, Eskdale, Mitta, Koetong, Tallangatta Valley, Bethanga, Bellbridge, Talgarno, Granya and Tallangatta. They also visit Sandy Creek and Gundowring Road due to their proximity to Tallangatta. This year our District Nursing team provided 1973 hours of nursing care to members of our community.

Home visits are vital for many community members to maintain their independence, while having their overall health supervised by trained and caring staff. Tallangatta District Nursing is available five days per week and on call on weekends for palliative clients in the final stage of their illness.

District Nurses monitor general health, including blood pressures, blood sugars, pathology collection and wound management. They work with their clients supporting them to develop a care plan that meets individual needs. Referrals to district nursing can be made by a doctor, a hospital, a family member with the client consent, or self-referral.

District Nurses help to manage client’s health issues, offer advice and connect clients to other support services such as home and community care, physiotherapy, occupational therapy, social worker, financial counsellor, podiatry, dietician, diabetes nurse, women’s health and palliative care.

District Nursing is funded by the Home and Community Care Program. Post-Acute Care can also be provided to anyone who has been an inpatient of a public hospital or who has presented at an emergency department and requires further treatment at home. There is no cost for Post-Acute Care but eligibility requirements must be met. The District Nursing team can liaise with Albury Wodonga Health to organize these services for you.
Tallangatta Health Service (THS) is committed to continuous quality improvement. As with Home and Community Care (HACC) and other services, feedback is regularly sought from clients. The District Nursing Client Survey 2012 was distributed to 50 clients/carers with 26 completed (response rate 50.5%). Of these, 77% of responses were from clients and 23% from carers.

Results indicated that 92.4% of respondents rated the skill of the district nurses involved in providing their care as ‘Very Good’ while the remaining 7.7% rated care as ‘Good’.

The graph indicates high rates of satisfaction (90% and above) with involvement in care planning, work competency, providing clear explanations, providing sufficient answers about care, providing support for carers and feeling confident that concerns will be listened to. While almost 80% of clients/carers indicated they felt care was consistent and coordinated, our staff will seek to increase this level by implementing strategies within the team.
District Nursing services 50 – 80 clients at any one time depending on demand.

District Nursing is funded through the Home and Community Care program (HACC)

THS District Nurses may also provide services to clients through other funded programs such as the Department of Veterans Affairs and the Post-Acute Care program.

District Nursing Client Satisfaction Survey Results 2012

- Involving you in planning care
- Working competently
- Giving clear explanations
- Consistent and coordinated care
- Providing sufficient answers about care
- Providing support to carers
- If you have concerns do you know who to tell
- Confident that concerns will be listened to and acted upon

Services provided by the District Nursing Service include but are not limited to:
- Wound management
- Medication management
- Blood pressure monitoring
- Blood collection
- Health assessments
- Post-acute care
- Palliative care
Falls Minimisation

Definition: The World Health Organisation defines a fall as “an event which results in a person coming to rest inadvertently on the ground or floor or a lower level”

All patients and residents admitted to Tallangatta Health Service (THS) are assessed for their fall risks on admission and on a regular basis thereafter; the rating for each demonstrates the extent of supervision and/or assistance they may require with transfers and mobility.

A multidisciplinary team is involved in the assessment process which shall include the implementation and management of interventions to support the patients and residents.

Other interventions that have been used by THS to reduce falls and the impact of falls include:

- Medical assessment including recurring medication management and review
- Use of equipment and motion aids such as bed and chair sensors
- Residents participation in strength and exercise classes
- Reporting of falls through the electronic reporting tool Victorian Health Information Management Systems (VHIMS), and the Department of Health Aged Care Clinical Indicators
- Falls data review at internal committees including Quality and Clinical Review

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<thead>
<tr>
<th>Table: Department of Health Aged Care Clinical Indicators 2011 - 2012</th>
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<td>Statewide Falls Rates (per 1000 occupied bed days)</td>
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<tr>
<td>Bolga Court Hostel</td>
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<tr>
<td>Statewide High/Low Mixed Rates</td>
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<tr>
<td>Lakeview Nursing Home</td>
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<td>Statewide High Care Rates</td>
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There were three fall related fractures across both aged care facilities for 2011 – 2012.

Whilst the reported levels at THS have been high, they are decreasing compared to the same period for 2010 – 2011. This is reassuring for the preventative measures that have been introduced.
Improvements in 2011-12

- Staff education and training on falls (including falls rate posters displayed in clinical areas)
- Increase in equipment available to prevent falls (ie bed / chair sensors)
- Allied health notified of resident/patient fall via VHIMS alert
- New improved Call bell system

For the Future

- Falls risk screening and assessment on admission auditing
- Further staff education and training on falls minimisation
- Falls data interrogation to identify patterns

Skin Integrity – Pressure Wound Monitoring and Prevention

Definition: A pressure ulcer is defined as a lesion caused by unrelieved pressure resulting in damage of underlying tissue. Pressure ulcers are an internationally recognised patient safety problem and are largely preventable (http://www.health.vic.gov.au/pressureulcers).

Tallangatta Health Service (THS) Residential Aged Care Facilities reports quarterly to the Department of Health on a variety of health related issues one of these being the prevalence of pressure ulcers.

A pressure ulcer is caused by unrelieved pressure resulting in damage to the skin plus or minus the underlying tissue; they can also be known as a bed sore or pressure sore.

Pressure ulcers may develop due to sitting or lying in the one position for long periods. They are a common complication in health care settings, are often difficult to treat and are recognised as one of most common causes of harm to patients.

Residents/patients at greatest risk of developing pressure ulcers are those who are immobile for long periods of time, the elderly, smokers and those with a poor nutritional intake. They are commonly found over bony areas such as toes, heels and buttocks.

THS recognises that prevention and management of pressure ulcers is an important resident safety issue and a priority for staff.

THS continues to use numerous strategies to prevent a pressure injury which include:

- Use of pressure-reducing support surfaces and equipment to reduce the likelihood of pressure areas developing
- Reporting on pressure ulcers internally at Quality Committee and Board of Management meetings and externally to the Department of Health
- A multidisciplinary team approach

During 2011-2012 there have been no pressure injuries reported at THS with either aged care residents or acute patients.
Medication Management

The safe and appropriate use of medications to minimise errors is important for the safety of our residents and patients.

All medication errors are reported through the electronic reporting tool Victorian Health Information Management Systems (VHIMS). A total of 50 medication-related incidents were reported in the Health Service for 2011 -2012. These incidents can be classified into more than one category.

Each incident is reviewed to see if improvements can be made to prevent a recurrence. Incidents are reviewed by the Quality and Clinical Review Committees which track trends and system failures. The number of reported incidents is less than previous years (77, 2009 – 2010; 61, 2010 - 2011).

The number of residents prescribed nine or more medications are reported to the Department of Health through the Aged CareClinical Indicators, which are compared against other organisations.

| Statewide Rates of Residents prescribed Nine or More Medicines (per 1000 occupied bed days) |
|---------------------------------|-----|-----|-----|-----|
| Bolga Court Hostel              | 6.00| 3.00| 6.00| 4.00|
| Statewide High/Low Mixed Rates  | 3.66| 3.89| 4.08| 3.75|
| Lakeview Nursing Home           | 8.29| 6.63| 8.29| 3.32|
| Statewide High Care Rates       | 4.00| 4.21| 4.15| 4.44|

Resident’s medications are reviewed regularly by their doctor to ensure that they meet their requirements.
Accreditation

All Victorian health services must achieve and maintain accreditation with an approved accrediting body. Accreditation is a process that health services use to ensure that they deliver high quality, evidence based and safe care to their patients. The Australian Council on Healthcare Standards (ACHS) is the external organisation that conducts the accreditation process and sets out the Evaluation and Quality Improvement Program (EQuIP), which the acute sector of Tallangatta Health Service (THS) has adopted.

In February 2011 THS completed a full accreditation survey, this involved surveyors visiting THS and verifying that we continue to meet the ACHS standards.

Between each assessment there is a process of self-assessment, ongoing reporting and evaluation of progress on recommendations received from the previous survey. THS completed a self-assessment report in November 2011, with our next onsite visit scheduled for November 2012.

The Aged Care Standards and Accreditation Agency Limited which reviews aged care services provided an unannounced visit in December 2011 where the two aged care facilities were found to meet outcomes assessed. Both Lakeview and Bolga Court shall be assessed by the agency on the 44 outcomes in August 2012.

The table below outlines all of the accreditation processes that are in place across THS and the status of each as at 30 June 2012.

<table>
<thead>
<tr>
<th>Area</th>
<th>Type of Accreditation</th>
<th>Status</th>
<th>Next Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Aged Care</td>
<td>Aged Care Standards and Accreditation Agency Ltd</td>
<td>Accreditation achieved in October 2009</td>
<td>August 2012</td>
</tr>
<tr>
<td>Home and Community Care</td>
<td>Community Care Common Standards (HACC)</td>
<td>Accreditation achieved in 2008</td>
<td>2013</td>
</tr>
<tr>
<td>(District Nursing Service)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Medical Practice</td>
<td>Royal Australian College of General Practitioners (RACGP) Standards</td>
<td>Accreditation November 2010</td>
<td>2013</td>
</tr>
</tbody>
</table>

Stop Press – Following assessment by Aged Care Standards and Accreditation Agency Ltd in August 2012, full accreditation has been obtained for both residential aged care facilities Lakeview Nursing Home and Bolga Court Hostel.
Cultural Diversity Plan

The Tallangatta Health Service (THS) “Cultural Diversity Plan, 2011-2014” (see table below) has been adapted from the Victorian Department of Human Service’s Cultural Diversity Plan Guidelines into “priority areas” for THS. The guidelines can be enacted in ways that are appropriate for Tallangatta & the District Community profile and demographics.

The Cultural Diversity Plan is aligned with the THS Strategic Direction for 2011 -2015

<table>
<thead>
<tr>
<th>Priorities</th>
<th>Action</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access and Inclusion</td>
<td>Ensure that patients &amp; residents of cultural and linguistic backgrounds are identified during the admission process.</td>
<td>To complete annual audits of Cultural and Linguistic Diverse (CALD) /Indigenous patients admitted to THS. Review availability of Interpreter Services contact details in departments. Audit usage of Interpreter Services accessed. THS is an equal opportunity employer.</td>
</tr>
<tr>
<td>Delivery of culturally sensitive service</td>
<td>To understand and accommodate particular beliefs &amp; preferences of different cultures, social circumstances and ethnic groups within the scope of THS and surrounds.</td>
<td>To target education for staff to understand patient / resident needs if the current community profile and demographics in THS and surrounds alters.</td>
</tr>
<tr>
<td>Signage and patient / resident information is appropriate for the community profile</td>
<td>That signage and patient/resident information is reflective of the community profile.</td>
<td>If the current profile and demographics reflects an increase in the CALD population then appropriate signage and patient information shall reflect these changes.</td>
</tr>
</tbody>
</table>
Emergency Preparedness

Tallangatta Health Service (THS) has an extensive Emergency Management Plan which details responses to fire and emergency situations within the facility. Emergency education is included in the annual Mandatory Training program which is undertaken by all staff members.

The Executive and maintenance staff members of THS maintain a working relationship with the local Tallangatta Fire Brigade and fire drills are conducted throughout the year at the health service.

In January 2012, a fire drill was held at Bolga Court and residents were evacuated from one of the modules. Following a review of the drill, recommendations were made and actioned, these included a change to the evacuation procedure of how residents are to be supervised during evacuation and the timely access to keys required in an emergency.

The fire drill in January also highlighted a telephone communication issue with the current phone system. An upgraded Nurse Call system was installed in March 2012 which now provides a reliable portable communication system throughout the facility.

THS maintains representation on the Towong Municipal Emergency Management Plan Committee which meets twice a year and has representation from various stakeholders throughout the Shire. Agencies being represented include the Victoria Police, State Emergency Service, Country Fire Authority, Department of Sustainability and Environment, Towong Shire Council and several others. The committee is guided by the Municipal Emergency Management Plan which is activated if a significant emergency should occur within the shire.

The THS Bushfire Management Plan was originally developed in 2009 and was aligned to the Towong Shire Bushfire Management Plan. The plan is reviewed annually in October and pre-season preparation is put in place within all departments.

The THS Heatwave/Extreme Heat policy and procedure is aligned to the Bushfire Management Plan and provides guidelines for the management of residents, clients, and staff members on days of extreme heat.

During 2011 - 12 an external Fire Safety Audit was conducted which is undertaken every five years. Previous audits have provided recommendations to upgrade our fire safety system. This led to a successful grant application to carry out the recommended work which will see a new fire safety system including fire panels.

Fire History
Outbreaks of bushfire are not uncommon within the Towong Shire in the past. Significant bushfires have been experienced in 1939, 1952, 1978, 1985, and 2003.
Infection Control

Maintaining a safe environment for our patients, residents, staff, volunteers and visitors is a core business of the Infection Control Program. All staff have an active role in the infection and prevention strategies for Tallangatta Health Service (THS).

One strategy implemented is Hand Hygiene. This is a simple, low cost strategy that plays a major role in keeping everyone safe by preventing the spread of most organisms that cause healthcare associated infections.

![Hand Hygiene Auditor](image)

Hand hygiene audits are attended quarterly by our “Gold Star Hand Hygiene Auditor” Louise Bowran (pictured). As a quality improvement, audits are now undertaken with an iPad which is saving time and enabling data to be uploaded immediately to the website.

Our compliance rate of 71.9% for the reporting period November 2011 to March 2012 is in excess of the Department of Health target of 65% for the acute care areas.

The Department of Health target will be raised to 70% for 2012 – 2014.

We have made the alcohol based hand rub (DeBug) available throughout THS and we recommend our visitors use it during their visits.

Staff Immunisations

This year THS executives have continued to show support for our Influenza vaccination program and the number of staff accepting vaccinations continues to improve.

For 2011 – 2012, 52% of staff members were immunized against influenza.

Our Environment

The THS cleaning audit results indicate that we exceed the Victorian Public Health Services cleaning standards: External Cleaning Audit results.

- July 2010 - 90.8%
- July 2011 – 90%
- July 2012 – 94.6%

Feedback from our residents through our annual residential aged care survey indicated:

- Public areas are kept odour free? Yes = 85%
- Cleanliness of resident’s rooms? Yes = 85%
Our food safety program is maintained and monitored in a variety of ways including:

- Staff recording refrigerator and freezer temperature monitoring
- Cleaning schedules for kitchens completed and compliant

External Food Safety Audit attended in June 2012 where THS was found to be compliant.

The audit did suggest some recommendations which have been implemented including:

- Staff Health Program survey
- Increase in the number of staff having influenza vaccinations
- Improved access to alcohol based hand rubs following a location audit and review

For the future

- Refurbishment of the laundry
- Purchase of palm held devices to facilitate cleaning audits
- Provision of immunisation for staff following staff immunization survey
- Increase the calibration of thermometers to 3 monthly
- Increase temperature audits of meals on wheels meals including the temperature of the last meal delivered
- Develop allergens policy and procedure
Residential Aged Care Quality Indicators

Tallangatta Health Service (THS) submits data quarterly to the Department of Health from the two on site Residential Aged Care facilities.

A range of data which compares THS with other organisations within Victoria is submitted including:

- the prevalence of pressure ulcers
- falls and fall related fractures
- use of restraints
- incidence of residents prescribed nine or more medications

Another of these measures includes weight loss of greater than three kilograms.

For the reporting period July 2011 – June 2012 there was one resident of THS that had unplanned weight lost greater than three kilograms. This incidence was below state wide data comparisons. The unplanned weight loss of residents is monitored each month.
Improvements in 2011 – 2012

- Multidisciplinary review of menu content and choice
- Change in meal times and introduction of morning tea
- Four week seasonal rotating menus
- Staff training on dietary needs and fluid consistency
- Review of ordering and storing of stock

For the Future:

- All residents weight will be monitored monthly
- Submission of data quarterly to the Department of Health
- Where identified and indicated residents will be referred to the multidisciplinary team to support individual nutrition and hydration needs
- Ongoing menu reviews from Hotel Services and patient/resident surveys
- Staff training on texture modified fluids and diets

Residential Aged Care Satisfaction Survey October 2011 indicated that:

- The quality of food is attractive, appetising, and nutritious? Yes = 95%
- There are adequate food choices? Yes = 85%

Residential Aged Care Satisfaction Surveys are attended annually and results for 2012 will be compared.
Tele-health comes to Tallangatta!

In February 2012 Tallangatta Health Service (THS) held the region’s first tele-health consultation which allowed a patient to have a video appointment with a Melbourne endocrinologist specialist. The consultation, using an iPad, was held in the rooms of Tallangatta Medical Centre.

Louise Bowran travels to see her endocrinologist in Melbourne every six months. Louise explained that usually she has to take time off work to travel to her appointments, but the tele-health consultation enabled this to happen very easily with huge time saving benefits.

It is important that rural people have the same level of services that their counterparts in the city have. It is hoped that the tele-health service will be extended to other providers once relationships have been built with them and further technology supports are established.

The tele-health service will be of particular benefit to older members of the community who find that even travelling to Albury/Wodonga can be a difficulty.

Tallangatta Health Service plans to broaden the scope of tele-health consultations to include a cardiologist. This technological approach may have huge benefits in the future. Louise explained, “It is something that needs planning and not every specialist knows about it. It’s about people talking to their GP and the practice manager making the necessary arrangements”.

Patient Louise Bowran with Dr Ashish Ahuja in readiness for a tele-health consultation
Men’s Shed

What is a Men’s Shed?
The modern Men’s Shed is an updated version of the shed in the backyard that has long been a part of Australian culture. Men’s Sheds are springing up all around Australia. If you looked inside one you might see a number of men restoring furniture, perhaps restoring bicycles for a local school, maybe making bird baths or fixing lawn mowers or making a kids cubby house for Camp Quality to raffle. You might also see a few young men working with the older men learning new skills and maybe also learning something about life from the men they work with. You will see tea-bags, coffee cups and a comfortable area where men can sit and talk. You will probably also see an area where men can learn to cook for themselves or they can learn how to contact their families by computer.

Tallangatta Men’s Shed

- Tallangatta Men’s Shed is auspiced by Tallangatta Health Service and operates from an existing shed at Tallangatta Health Service.
- The Tallangatta Men’s Shed comprises a small group of men (up to 6 at a time) who meet each Thursday morning for the purpose of fellowship, to share and use their skills, and have fun.
- The Men’s Shed group have been involved in several projects in the past including a presentation at the 0-8 years information day run by the Towong Shire which led to the installation of shelves at the local kindergarten.

The Future

Tallangatta Health Service was successful in obtaining a grant from The Department of Human Services to extend the Men Shed and the project is about to commence. This will triple the area of the shed and include an outside deck. The project has been contracted to local firm Lyford Engineering. Membership of the Men’s Shed has been restricted by the limited space available. The expanded area will enable the Tallangatta Men’s Shed to actively seek new members. Traditionally Men’s Shed groups have targeted retired men who seek the company of other men with similar interests; however, the opportunity now exists for younger men in the community to join. It is a great way to make new friends, learn new skills, and help your community.

Tallangatta Health Service and the Men’s Shed would like to acknowledge the contribution of Ken Godfrey to the Tallangatta Men’s Shed. Ken has moved from the Tallangatta area and recently resigned his membership. We wish him all the best.
Awards

STAFF SERVICE AWARDS 2011/2012

The following dedicated staff of Tallangatta Health Service received awards for service during the 2011 - 2012 year.

10 Years
Anne McDonald    Denise Gigliotti
Elizabeth Sjoberg    Carol Rowe
Denise Kirk    Leslie Smith
Jane Smith

20 Years
Kim Clark    Barbara Ritchie
Jenny Walsh

25 Years
Barbara Ritchie

Barbara Ritchie being presented with an award by Board Chair Lucinda Rhook for 25 years of service to Tallangatta Health Service.
Evaluation 2010-2011
An invitation for readers to provide feedback on last year’s report was supplied with both hard and electronic copies.
Formal responses were received and included:
- A valuable document, deserving of credit for the amount of effort and work to put together
- Interesting and informative to the reader

Feedback 2011-2012
The Quality of Care evaluation form is available within this report; we would like to hear from you, we value our readers’ opinions. Feedback allows us to provide information that is of interest to our readers.
If you have any ideas, comments or suggestions for the format of next year’s Quality of Care report, please contact or write to us.

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